



**REQUEST FOR CANCELLATION OF
 SURFACE AREA DISTURBANCE PERMIT ISSUED BY NDEP-BAPC**

PERMIT INFORMATION:

Permit Number: _____ FIN Number: _____
 Owner/Operator: _____
 Responsible Official: _____
 Project Name: _____
 Project Address/Location: _____
 County: _____

STATEMENT OF RESPONSIBLE OFFICIAL:

A. I affirm that no further disturbance of the land surface or topsoil will occur at the above referenced location. Any and all surfaces disturbed by excavation, construction, grading, or other activities have been permanently stabilized by the following method(s) (Check all that apply***):

- | | | |
|--|---|---------------------------------|
| <input type="checkbox"/> Buildings | <input type="checkbox"/> Landscaping | <input type="checkbox"/> Paving |
| <input type="checkbox"/> Application of gravel/aggregate | <input type="checkbox"/> Application of dust palliative | |

*** Photographic evidence must be submitted with this request. Without photographic evidence this request will not be considered.

Or,

B. This Surface Area Disturbance permit has been superseded by another Air Quality Operating Permit
 New Permit Number: _____

Signature of Responsible Official: _____ Date: _____

NDEP-BAPC use only:

- Adequate photographic evidence supplied showing site stabilization
- Permit Issued that replaces SAD

Notes: _____

BAPC Supervisor: _____ Date: _____