

## NOTICE OF INTENT TO CONSTRUCT AIR QUALITY GENERAL PERMIT

Complete this form, instead of DEQ Form #100-884, for construction of a proposed (new) facility eligible for coverage under one of the following general permits. Coverage under the general permit is effective upon receipt of this form, by the AQD along with a completed DEQ Landowner Notification Affidavit. Notification under any applicable NSPS and NESHAPs should also be submitted according to the schedules specified in the corresponding Federal rules.

|   |                            |      |       |  |     |  |
|---|----------------------------|------|-------|--|-----|--|
| 1 | <b>COMPANY INFORMATION</b> | Name |       |  |     |  |
|   | Mailing Address            |      |       |  |     |  |
|   | City                       |      | State |  | Zip |  |

|   |   |                          |                                    |                          |                                   |  |
|---|---|--------------------------|------------------------------------|--------------------------|-----------------------------------|--|
| 2 | <b>GENERAL PERMIT TYPE (check one)</b>        |                          |                                    |                          |                                   |  |
|   | Hot-Mix Asphalt Plant                         | <input type="checkbox"/> | Printing and/or Packaging Facility | <input type="checkbox"/> | Petroleum Liquid Storage Facility |  |
|   | Est. Date of Construction/Modification Start: |                          |                                    |                          | Completion:                       |  |
|   | Operational Start-up Date                     |                          |                                    |                          |                                   |  |

|   |  |                          |     |                          |    |
|---|--|--------------------------|-----|--------------------------|----|
| 3 | <b>CONFIDENTIAL INFORMATION INCLUDED</b> | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
|---|--|--------------------------|-----|--------------------------|----|

|   |                       |    |  |         |  |      |  |
|---|-----------------------|----|--|---------|--|------|--|
| 4 | <b>FEES SUBMITTED</b> | \$ |  | Check # |  | Date |  |
|---|-----------------------|----|--|---------|--|------|--|

|   |                          |      |       |  |     |  |
|---|--------------------------|------|-------|--|-----|--|
| 5 | <b>TECHNICAL CONTACT</b> | Name |       |  |     |  |
|   | Phone                    |      | Fax   |  |     |  |
|   | Company Name             |      |       |  |     |  |
|   | Street Address           |      |       |  |     |  |
|   | City                     |      | State |  | Zip |  |

|   |  |         |       |          |        |       |
|---|--|---------|-------|----------|--------|-------|
| 6 | <b>FACILITY INFORMATION</b>            | Name    |       |          |        |       |
|   | Description                            |         |       |          |        |       |
|   | SIC Code(s)                            |         |       |          |        |       |
|   | Contact Person                         |         | Title |          | Phone  |       |
|   | Legal Description                      | Section |       | Township |        | Range |
|   | Physical Address or Driving Directions |         |       |          |        |       |
|   | City or Nearest Town                   |         | Zip   |          | County |       |

|   |  |  |  |
|---|--|--|--|
| 7 | Describe Any Residence, Park, School, etc. within ¼ mile |  |  |
|---|--|--|--|

|   |   |
|---|---|
| 8 | <b>LIST ALL CURRENT AIR QUALITY PERMIT NUMBERS AT THIS FACILITY</b> |
|   |   |

|  |                                  |  |               |  |       |     |
|--|----------------------------------|--|---------------|--|-------|-----|
| 9  | <b>NOI CERTIFICATION</b>         |  |               |  |       |     |
| <b>This application has been submitted as required by OAC 252:100-7-15(c). I understand that I am responsible for assuring construction of the above facility in accordance with this application and OAC 252:100.</b> |                                  |  |               |  |       |     |
|  | Responsible Official (signature) |  |               |  | Date  |     |
|  | Responsible Official (typed)     |  | Phone         |  | Fax   |     |
|  | Responsible Official Title       |  | Email Address |  |       |     |
|  | Street Address                   |  | City          |  | State | Zip |