

AIR QUALITY PERMIT APPLICATION GENERAL FACILITY INFORMATION

APPLICATION NUMBER
(AQD Use Only)

1	COMPANY INFORMATION	Name								
Mailing Address					City		State		Zip	

2	APPLICATION TYPE	Applicability Determination	Construction Permit	Operating Permit
	GP Authorization To Operate	GP Authorization To Construct	GP Name:	
	Renewal	Modification	Relocation	PBR
			PBR Type:	
Permit Number(s) (If Applicable)				
Est. Date of Construction/Modification Start:		Operational Start-up:	Completion:	
Construction Permit Public Review Process:		Traditional	Enhanced	

3	IS CONFIDENTIAL INFORMATION INCLUDED?	YES	NO
By including confidential information, Applicant acknowledges that such information may be shared with the U.S. Environmental Protection Agency for purposes consistent with the Federal Clean Air Act, 42 U.S.C. §§ 4201 et. seq.			

4	TIER CLASSIFICATION	Tier I	Tier II	Tier III	N/A – AD only
FACILITY TYPE		Major	Minor	Synthetic Minor	

5	FEES SUBMITTED	\$	Check #	Date
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6	TECHNICAL CONTACT	Name				
Phone		Fax	Email Address			
Company Name						
Street Address		City	State	Zip		

7	FACILITY INFORMATION	Name						
SIC Code(s)		NAICS Code(s)						
Contact Person		Title	Phone					
LEGAL DESCRIPTION	Sub Section	Section	Township	Range				
Physical Address or Driving Directions								
City or Nearest Town		Zip	County					

8	GEOGRAPHIC COORDINATES	Latitude (to 5 Decimals)	Longitude (to 5 Decimals)
REFERENCE POINT		Facility Entrance Point or First Gate of Lease Property (preferred above all other options)	
Center of Facility	Unknown	Other (Specify):	

9	APPLICATION CERTIFICATION	This application, including all attachments, has been submitted as required by OAC 252:100.					
I certify that (a) I am the Responsible Official for this company as defined in OAC 252:100-1-3; and (b) based on information and belief formed after reasonable inquiry, the statements and information contained in this application are true, accurate, and complete.							
Responsible Official (name)		Title					
Responsible Official (signature)		Date					
Phone	Fax	Email Address					
Street Address		City	State	Zip			