



**PERMIT APPLICATION FOR
ASPHALT CONCRETE PLANTS**
NORTH DAKOTA DEPARTMENT OF HEALTH
DIVISION OF AIR QUALITY
SFN 8526 (09-12)

SECTION A – GENERAL INFORMATION

Name of Firm or Organization		
Applicant's Name		
Title	Telephone Number	E-mail Address
Mailing Address (Street & No.)		
City	State	ZIP Code
Contact Person for Air Pollution Matters		
Title	Telephone Number	E-mail Address

SECTION B – PLANT DATA

Type of Plant: <input type="checkbox"/> Permanent <input type="checkbox"/> Portable	Source ID Number		
Location (if permanent)			
County	Latitude (Nearest Second)	Longitude (Nearest Second)	
Legal Description of Facility Site _____ ¼ _____ ¼ _____ Section _____ Twp. _____ Range			
Expected Operating Schedule			
Hours Per Day	Days Per Week	Week Per Year	Date of Plant Manufacture
Date of Major Modification or Rebuild	Type of Operation <input type="checkbox"/> Virgin Material <input type="checkbox"/> Recycle Material <input type="checkbox"/> Both		Maximum Output Capacity of Plant (Ton/Hour)

SECTION C – DRYER DRUM MIXER

Name of Manufacturer			Model Number
Diameter (ft)	Length (ft)	Rated Capacity (Ton/ Hour)	Age

SECTION D – BURNER

Name of Manufacturer			Model Number
Heat Input (MMBtu/ Hour)	Burner Fuel		
	Oil (Gal/Hour)	Grade (#1-6, Waste, etc.)	Sulfur Content (%)
Propane (Gal/Hour)		Natural Gas (ft ³ /Hour)	

SECTION E – AIR POLLUTION CONTROL EQUIPMENT

Type: <input type="checkbox"/> Wet Scrubber/Washer <input type="checkbox"/> Venturi Scrubber <input type="checkbox"/> Baghouse			
Name of Manufacturer			Model Number
Design Efficiency (%)		Operating Efficiency (%)	
Describe Disposal Method for Scrubber Bond Residue:			

SECTION F – EXHAUST FAN/STACK

Fan Speed (RPM)	Rating (HP)	Gas Flow		Outlet Velocity (fps)
		ACFM	SCFM	
Stack Shape: <input type="checkbox"/> Rectangular <input type="checkbox"/> Circular				
Stack Exit Dimensions (inches)	Stack Height Above Grade (ft)	Gas Exit Temperature (°F)		

SECTION G – MISCELLANEOUS EQUIPMENT

Cold Aggregate Bins (Number of Bins)	Capacity of Each Bin (Ton)
Cold Aggregate Conveyor Capacity (Ton/Hour)	Recycle Conveyor Capacity (Ton/Hour)
Hot-Mix Storage Bin Capacity (Tons)	Hot-Mix Elevator Capacity (Ton/Hour)

SECTION H – GENERATOR ENGINE(S)

Name of Manufacturer			Model Number
Manufacture Date	Engine Rating (HP)	Fuel Type/Grade	Fuel (Gal/Hour)
Name of Manufacturer			Model Number
Manufacture Date	Engine Rating (HP)	Fuel Type/Grade	Fuel (Gal/Hour)

SECTION I – FUGITIVE DUST CONTROL

Describe equipment or method to control fugitive dust emission from process equipment, haul roads, etc. (Fugitive dust includes dust from all sources except the dryer exhaust stack):
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SECTION J – ADDITIONAL REMARKS OR COMMENTS

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Signature of Applicant	Date
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INSTRUCTIONS FOR PERMIT APPLICATION FOR ASPHALT CONCRETE PLANTS

For the purposes of this application, an asphalt concrete plant is defined as follows: A factory for manufacturing asphalt paving mixtures and is comprised of any combination of the following: dryers; systems for screening, handling, storing, and weighing hot aggregate; systems for loading, transferring and storage mineral filler; systems for mixing asphalt concrete; systems for controlling emissions (pollution control system); and the loading, transfer, and storage systems associated with pollution control systems.

1. Complete and submit one form for each asphalt plant you plan to operate in North Dakota. Print or type all information. If an item does not apply, place NA in the appropriate space.
2. Select a number, letter, or combination of numbers and letters as a SOURCE IDENTIFICATION NUMBER for each plant owned by your company. This source identification number will be used by the Health Department to distinguish between your plants.
3. Plans, specifications, manufacturer's catalogs or test data for the dryer, burner, pollution control system, and exhaust fan, shall be submitted to the Department, upon request.
4. If operating in a permanent location, attach a sketch showing plant location and surroundings within a one-mile radius of the plant; indicate dwellings, public roads, haul roads, aggregate stockpiles, north arrow and direction of prevailing winds.
5. If you need more space to explain any system or answers, attach and label separate sheet(s).
6. For purpose of this application, the following definitions apply:

Permanent	Plant operating six months or longer at the same location.
Portable	Plant operating less than six months at the same location.
7. Each time a portable plant is moved to a new location, a Change of Status Notice SFN 8455 is to be completed and submitted to the Department prior to starting the move. The notice is a postcard, preaddressed to the Health, and is available upon request.
8. An Annual Production Report SFN 8543 must be submitted for each plant operated in North Dakota. For portable plants, the report must list all plant locations during the calendar year. Annual reports are due by March 15 after the operating year ends.

An Annual Permit to Operate fee will be assessed by the Department in accordance with the applicable section of the North Dakota Air Pollution Control Rules (Chapter 33-15-23 Fees).

A filing fee of one hundred fifty dollars (\$150.00) must be submitted with the permit application.

SEND COMPLETED APPLICATION AND ALL ATTACHMENTS TO:

North Dakota Department of Health
Division of Air Quality
918 E Divide Ave., 2nd Floor
Bismarck, ND 58501-1947
(701) 328-5188