

Alaska Department of Environmental Conservation
AIR QUALITY CONSTRUCTION PERMIT APPLICATION
Project Information Form



Section 1 Stationary Source Information

Stationary Source Name:			SIC:		
Project Name (if different):		Stationary Source Contact:			
Source Physical Address:		City:	State:	Zip:	
		Telephone:			
UTM Coordinates (m) or Latitude/Longitude:		E-Mail Address:			
		Northing:	Easting:	Zone:	
		Latitude:	Longitude:		

Section 2 Legal Owner

Name:		
Mailing Address:		
City:	State:	Zip:
Telephone:		
E-Mail Address:		

Section 3 Operator (if different from owner)

Name:		
Mailing Address:		
City:	State:	Zip:
Telephone:		
E-Mail Address:		

Section 4 Designated Agent (for service of process)

Name:		
Mailing Address:		
City:	State:	Zip:
Physical Address:		
City:	State:	Zip:
Telephone :		
E-Mail Address:		

Section 5 Billing Contact Person (if different from owner)

Name:		
Mailing Address:		
City:	State:	Zip:
Telephone:		
E-Mail Address:		

Section 6 Application Contact

Name:				
Mailing Address:		City:	State:	Zip:
		Telephone:		
		E-Mail Address:		

Section 7 Major Permit Classification(s)

(Check all that apply)

- 18 AAC 50.306
- 18 AAC 50.311
- 18 AAC 50.316

Section 8 Minor Permit Classification(s)

(Check all that apply)

- 18 AAC 50.502(b)(1)
- 18 AAC 50.502(b)(2)
- 18 AAC 50.502(b)(3)
- 18 AAC 50.502(b)(4)
- 18 AAC 50.502(b)(5)
- 18 AAC 50.502(b)(6)
- 18 AAC 50.502(c)(2)(A)
- 18 AAC 50.502(c)(2)(B)
- 18 AAC 50.502(c)(3)
- 18 AAC 50.508(3)
- 18 AAC 50.508(5)
- 18 AAC 50.508(6)

PROJECT IDENTIFICATION FORM

Section 9 Project Description

Provide/attach a short narrative describing the project. Discuss the purpose for conducting this project, what emission units/activities will be added/modified under this project (i.e., project scope), and the project timeline. If the project is a modification to an existing stationary source, describe how this project will affect the existing process. Include any other discussion that may assist the Department in understanding your project or processing your application. Include a schedule of construction and the desired date for permit issuance.

If this application includes an Owner Requested Limit or a request to revise an existing permit term or condition, describe the intent of the limit, and provide sample language for the limit, and for monitoring, record keeping, and reporting for showing compliance with the limit.

Add additional pages if necessary.

PROJECT IDENTIFICATION FORM

Section 10 Certification

This certification applies to the Air Quality Control Construction Permit Application for the _____
submitted to the Department on: _____ (Stationary Source Name)

Type of Application

- Initial Application
- Change to Initial Application

The application is **NOT** complete unless the certification of truth, accuracy, and completeness on this form bears the **signature of a responsible official** of the firm making the application. (18 AAC 50.205)

CERTIFICATION OF TRUTH, ACCURACY, AND COMPLETENESS

“Based on information and belief formed after reasonable inquiry, I certify that the statements and information in and attached to this document are true, accurate, and complete.”

Signature:	Date:
Printed Name:	Title:

Section 11 Attachments

Attachments Included. List attachments:

Section 12 Mailing Address

Submit the construction permit application to the Permit Intake Clerk in the Department’s Anchorage office. Submitting to a different office will delay processing. The mailing address and phone number for the Anchorage office is:

Permit Intake Clerk
Alaska Department of Environmental
Conservation Air Permit Program
555 Cordova Street
Anchorage, Alaska 99501
(907) 269-3070