## ADEC Relocation Notification Form (Application Addendum)

Submit to the Department at least *10 days before* moving the plant to any new location.

Facility Information:

Stationary Source:

Permit No.: AQ

Stationary Source:		Permit No.: AQ		
Facility Name:				
Contact Person:		Telephone:		
Make & Model of the Equipme	nt/Stationary Source t	o be relocated:		
Attach a complete list of equipment	nent to be operated at	the new location.		
<b>Estimated Operating Dates:</b>				
Estimated start-up date:				
Estimated shut-down date:				
Location Information:				
New Plant Location (street addr	ress, milepost number,	etc. – Include site	e maps):	
Latitude Lon	gitude			
OR				
UTM Coordinates: Zone	Northing	Easting	Datum	
Distance from Plant boundary t	to nearest inhabited str	ructure:	ft	
If this distance is within 2,000 f this location and is adequate to				
Attach approval documents from	m Borough where plar	nt is to be located.		
Comments:				
Certification: Based on information and belief information in and attached to the state of the s		1 .	•	
Printed Name:		_ Title:	Date:	
Signature:		Phone Number:		

Send completed report to: Compliance Technician, ADEC Air Permits Program, 610 University Avenue, Fairbanks, AK 99709-3643.