



**Utah Division of Air Quality  
New Source Review Section**

Date \_\_\_\_\_

Company \_\_\_\_\_

Site/Source \_\_\_\_\_

**Form 15c**

**Portable General Permit Application**

An Approval Order to construct must be approved before any equipment can be operated. Please refer to the *Approval Order* application instructions for specific details required to complete the application. Please print or type all information requested. All information requested herein must be completed and submitted before an engineering review can be completed. Please contact the New Source Review Section of the Division of Air Quality with any questions at (801) 536-4000. Written inquiries may be addressed to: Division of Air Quality, New Source Review Section, P.O. Box 144820, Salt Lake City, Utah 84114-4820.

**General Owner And Facility Information**

1. Company name and address:

Phone No.: ( )  
FAX No.: ( )

2. Company contact for environmental issues:

Phone No.: ( )  
FAX No.: ( )  
E-mail address:

3. Owners name and address:

Phone no.: ( )  
FAX no.: ( )  
E-mail address:

4. Identify any current Approval Order(s):

AO# _____	Date _____	AO# _____	Date _____
AO# _____	Date _____	AO# _____	Date _____
AO# _____	Date _____	AO# _____	Date _____

5. If request for modification, previous permit # and date: DAQE-AN \_\_\_\_\_ DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_

6. Type of operation:  Aggregate Processing Plants  Asphalt Plants  Concrete Batch Plants

7. Total company employees greater than 100?

Yes  No

8. Standard Industrial Classification Code

[ ][ ][ ][ ][ ]

9. Application for:

New equipment  Modification  
 Existing equipment operating without permit

10. For new equipment or modification, enter estimated start date:

11. For change of permittee, enter date of occurrence:

12. For existing equipment in operation without prior permit, enter initial operation date:

13. Has equipment been modified, moved or the capacity increased since November 29, 1969:  Yes  No  
If yes: Specify what equipment:

14. Equipment list (Table 1 and 2 Attach as Appendix A)		
15. I hereby certify that the information and data submitted in and with this application is completely true, accurate and complete, based on reasonable inquiry and to the best of my knowledge and belief.		
Signature: _____		Title: _____
16. _____ Name (Typed or printed)	17. Telephone Number: ( ) _____	18. Date: _____

**General Permit Application  
Form 15c  
Instructions**

1. Identify the name, address, phone number, and fax number of the legal entity that operates the equipment.
2. Identify the person who is to be contacted regarding this application; also include the phone number and fax number of this person.
3. If you are not the owner of the equipment under this application, enter the name, address, phone number, and fax number of the owner.
4. List any valid Approval Orders (AO) which are for equipment at this site.
5. Indicate previous AO number (if any) and date for AO modification.
6. State the type of operation.
7. Indicate if the total number of people employed by your company is over 100 people.
8. Using the provided list of business codes (page 8), enter the code which best describes your business activity at this facility.
9. Check all applicable boxes
  - Existing Equipment Operating Without permit* - equipment which has been in operation without a prior permit issued by the state.
  - Modification* - existing equipment which is physically altered by the removal, addition, or non-identical replacement of parts.
10. Enter the start date new equipment or modification.
11. For cases in this category, enter the future date when the change is anticipated.
12. For this category of equipment, enter the date when this equipment was first operated.
13. This is for equipment that was operated before November 29, 1969. Indicate whether equipment has been moved, modified or increased capacity since that date. Specify what equipment this includes.
14. Attach as Table 1 and 2 to the application a list of all portable equipment (NSPS/MACT - Table 1 and Non-NSPS - Table 2) that is owned or operated by the company. Forms are available from DAQ for these two tables.
15. Signature of authorized company agent.
16. Name of signing party.
17. Telephone number of signing party.
18. Date of application.

Additional information may be required for some projects. If so, the reviewing engineer will contact the individual listed in question number 2.