MENDOCINO COUNTY AIR QUALITY MANAGEMENT DISTRICT
1100A HASTINGS ROAD, UKIAH, CA 95482
PHONE: (707) 463-4354 mcaqmd@mendocinocounty.gov www.mendoair.org

Application Cover Sheet
* * * Required for All Permit Applications * * *

Section I	TYPE OF APPLICATION	
☐ Authority to Construct	☐ Transfer of Location	☐ Registration of Equipment
☐ Permit for Existing Equipment	☐ Transfer of Ownership	☐ Modification of Permit
☐ Expedited Permit Request (Additional Fees Apply)		Previous Application #

Section II APPLICATION INSTRUCTIONS (Also Review List & Criteria)

A. The Cover Sheet in addition to the appropriate application form must be filled out completely. Please type or print in black or blue ink. For permit assistance please call the District office at 707-463-4354. Faxed applications or copies will not be accepted.
B. Applications must be accompanied by one copy of each plan, specification, and drawing required. Incomplete applications will delay the review process. The District may request additional information.
C. This Cover Sheet must be signed by the Business Owner or Authorized Representative, the Operator, the Contractor, and the on-site Responsible Officer, if applicable.
D. Mail or deliver original signed application to: Mendocino County AQMD, 110A Hastings Road, Ukiah, CA, 95482.
E. Construction and/or operation prior to obtaining a permit from the District is a violation of District Regulations and subject to penalties as defined in Regulation 1, Rule 1-300(i).

Section III COMPANY / OWNERSHIP INFORMATION

Name of Business or Organization (DBA):				
Legal Owner (if different from DBA):				
Type of Ownership:	☐ Corporation	☐ Partnership	☐ Sole Proprietor	☐ Government Agency ☐ Other
Mailing Address:				
City:		**State:**		**Zip:**
Phone:	**Fax:**		**Email:**	
Name of Property Owner (if different from Business Owner):				

Section IV FACILITY INFORMATION

Facility Name (DBA):			
Name of Business or Organization Permit Will be Issued to:			
Nature of Business:			
Address Where Equipment is Located:		**City:**	
APN #s			
Mailing Address:			
City:	**State:**		Zip:
Phone:	**Fax #:**	**Email:**	

Section V OPERATOR INFORMATION

Name of Facility Operator (if different from DBA):			
Title:		**Cell Phone:**	
Mailing Address:			
City:	**State:**		**Zip:**
Phone:	**Fax:**	**Email:**	

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Section VI AUTHORIZED FACILITY REPRESENTATIVE INFORMATION

Name of Authorized Facility Representative with Signing Authority:

Title: **Cell:**

Mailing Address:

City: **State:** **Zip:**

Phone: **Fax:** **Email:**

Section VII ADMINISTRATIVE CONTACT INFORMATION

Name of Administrative Contact:

Title: **Cell:**

Mailing Address:

City: **State:** **Zip:**

Phone: **Fax:** **Email:**

Section VIII CONTRACTOR INFORMATION

Contractor Business Name: (Construction and /or Installation)

Contact Name: **Contact Title:**

Mailing Address:

City: **State:** **Zip:**

Phone: **Fax:** **Email:**

Section IX ON-SITE RESPONSIBLE OFFICER INFORMATION

Name of Designated On-site Responsible Officer:
(Responsibility / Authority to Ensure Facility Compliance)

Title: **Cell:**

Mailing Address:

City: **State:** **Zip:**

Phone: **Fax:** **Email:**

Section X TRADE SECRET INFORMATION

All information submitted to obtain an Authority to Construct/Permit to Operate is considered public information as defined by California Government Code Section 6254.7 unless specifically marked as a trade secret by the applicant. Each document containing trade secrets must be separated from non-privileged documents. All emission data is subject to disclosure regardless of any claim of trade secret. Acknowledgement _____(Please Initial) Are trade secret documents included in this application? ☐ NO ☐ YES

Section XI TYPE OF AREA SURROUNDING FACILITY

☐ Residential ☐ Commercial ☐ Residential/Commercial ☐ Light Industrial

Distance of Emissions Source to Property Line (In Feet)

Section XII LOCATION OF NEAREST SCHOOL

Is the project located within 1,000 feet of the outer boundary of a school? Please provide a map indicating the facility and any subject schools. ☐ NO ☐ YES (If yes, see below)

Nearest School: **Distance (in feet):**

Public notice is required (at the expense of the applicant) if any emission source is located within 1,000 feet of a school site and operation will result in an increase in hazardous air emissions. (CH&S 42301.6) "School" means any public or private school used for the purposes of the education of more than 12 children in kindergarten or any of grades 1 through 12, inclusive. (CH&S 42301.9(a))

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Section XIII CERTIFICATION STATEMENT

I hereby authorize the Mendocino County Air Quality Management District (District) to begin processing this application. I agree to pay all fees required by District Rules for receiving, processing and evaluating this application, and for the issuance of any Authority to Construct or Permit to Operate, including District costs incurred if the project is terminated or abandoned, or the permit is denied.

I agree to contact the District prior to backfilling any and all underground equipment, provide written notification within 24 hours of completion of construction and/or prior to beginning operation authorized by the Authority to Construct issued by the District for this application.

I further agree to defend, indemnify, release and hold harmless and free and clear from and against any liability, debt, obligation, claim, judgement, action, cause of action or cost or expense, of any nature whatsoever, incurred by or imposed upon the District as a result of, related to, or in any way in connection with any Authority to Construct or Permit to Operate issued by the District or with any related activity of the District, its agents, officers, attorneys, employees, boards and commissions including the Mendocino County Air Quality Management District Hearing Board (Hearing Board) from any claim, action or proceeding brought against any of the foregoing individuals or entities, the purpose of which is to attack, set aside, void or annul the approval of this Authority to Construct or the documents which accompany it or any related CEQA documents.

The indemnification shall include, but not be limited to, damage, costs, expenses, attorney fees or expert witness fees that may be asserted by any person or entity, including the Permit Holder / Applicant, arising out of or in connection with the approval of this application, whether or not there is concurrent, passive or active negligence on the part of the County, its agents, officers, attorneys, employees, boards and commissions, the District, its agents, officers, attorneys, employees, boards and commissions including the Hearing Board.

I certify that the information herein and the data submitted with the application is true and correct with regards to the equipment subject to this application and that operation of said equipment will comply with state and federal law and District regulations.

			(District Use Only)
Signature of Business Owner or Authorized Representative		Date	
Name (Please Print)	Title		
Signature of Operator		Date	
Name (Please Print)	Title		
Signature of Contractor		Date	
Name (Please Print)	Title		
Signature of On-site Responsible Officer		Date	**Application #**
Name (Please Print)	Title		**Facility ID #:**