

Administrative Information and Certification

DEQ USE ONLY	
Permit Number:	Type of Application:
Application No:	RNW ____ MOD ____ NEW ____
Date Received :	
Regional Office:	Check No. Amount \$

Facility name: _____ Permit number: _____

1. Site identifier:		
2. Legal Name:		
3. Mailing Address:	P.O. Box or Street number	
	City, State, ZIP	
4. Facility Address:	Street number or description	
	City, County, ZIP	
	Tax lot #	
5. Owner:	Name	
	Phone number	
6. Contact Person:	Name	
	Title	
	Phone number	
	Email	
	Fax number	
7. Business activity:	Description	
	Standard Industrial Classification (SIC) code	
8. Other DEQ permits:		
9. Permit Action: <input type="checkbox"/> Administrative Amendment (include MD904) <input type="checkbox"/> Simple permit modification (include MD905) <input type="checkbox"/> Moderate permit modification (include MD905) (may require short-term NAAQS analysis) <input type="checkbox"/> Complex permit modification (include MD906) (may require short-term NAAQS analysis) <input type="checkbox"/> Ambient air monitoring revision fee <input type="checkbox"/> Modeling review (outside Major NSR or Type A State NSR) <input type="checkbox"/> Renewal of an existing permit (include forms ED605, ED606, an updated list of equipment, and any other necessary forms)		

Statement of Certification:

I have reviewed this application and all supporting documentation in their entirety and to the best of my knowledge, information, and belief formed after reasonable inquiry, the statements and information contained herein are true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and/or imprisonment for knowing violations.

The status of this facility's compliance with all air pollution control applicable requirements is reported in this application along with the methods to be used for compliance demonstration. For applicable requirements with which this facility is in compliance, this facility will continue to comply with such requirements. For applicable requirements that will become effective during the permit term, this facility will meet such requirements on a timely basis. If there are any applicable requirements for which this facility is not in compliance, a schedule of compliance is included in this permit application describing how compliance will be achieved.

Name of Responsible Official

Title of Responsible Official

Signature of Responsible Official

Date

Fee Information
(Make check payable to DEQ)

OAR 340-220-0050	
Administrative Amendment	\$975.00
Simple permit modification	\$3,903.00
Moderate permit modification	\$29,276.00
Complex permit modification	\$58,552.00
Ambient air monitoring revision fee	\$7,807.00
Modeling review (outside Major NSR or Type A State NSR)	\$9,000.00

Amount due:	
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Submit a paper copy of the completed application to the applicable address below.

Modified Permits (with fees)
Oregon Department of Environmental Quality Financial Services – Revenue Section 700 NE Multnomah St., Suite 600 Portland, OR 97232-4100

Email a convenience copy to the Regional Office by selecting the county where the facility is located.

Email to:

Permit Renewals (no fees) Select County:
Oregon Department of Environmental Quality