

South Coast Air Quality Management District Form 400-PS

Plot Plan And Stack Information Form

This form must be accompanied by a completed Application for a Permit to Construct/Operate - Form 400A and Form 400-CEQA.

Mail To: SCAQMD P.O. Box 4944 Diamond Bar, CA 91765-0944

> Tel: (909) 396-3385 www.aqmd.gov

Section A - Operator Information

Facility Name (Business Name of Operator To Appears On The Permit):

Valid AQMD Facility ID (Available On Permit Or Invoice Issued By AQMD):

Address where the equipment will be operated (for equipment which will be moved to various location in AQMD's jurisdiction, please list the initial location site):

		Fixed Location	on Various Locations				
Section B - Location Data							
Plot Plan	Please attach a site map for the project with distances and scales. Identify and locate the proposed equipment on the map. A copy of the appropriate Thomas Brothers page, a web-based map, or a sketch that shows the major streets and location of the equipment is acceptable.						
Location of Schools Nearby	Is the facility located within a 1/4 mile radius (1,320 feet) of the outer boundary of a school? If yes, please provide name(s) of school(s) below: School Name:	equipment vent f the school: the education of	feet				
Population Density	kindergarten or any of grades 1 to 12, inclusive, but does not include any private school in which education is primarily conducted in private homes. Urban Rural (<50% of land within 3 km radius accounted for by urban land use categories, i.e., multi-family dwelling or industrial.)						
Zoning Classification	Mixed Use Residential Commercial Zone (M-U) Service and Professional Zone Heavy Commercial (C-4) Commercial Manufacturing (C-	. ,	Medium Commercial (C-3)				
Section C - Emission Release Parameters - Stacks, Vents							
Stack Data	Stack Height: feet (above ground level) What is the height of the closest level Stack Inside Diameter: inches Stack Flow: acfm Rain Cap Present: Yes No Stack Orientation: Vertical If the stack height is less than 2.5 times the closest building height (H), please provide information on a (attach additional sheet if necessary): Vertical	Stack Tempe Horizo	rature: ℃F				
	Building #/Name: Building #/Name: Building Height:	feet feet	(above ground level)				
Receptor Distance From Equipment Stack or Roof Vents/Openings	Distance to nearest residence or sensitive receptor*:						
Building Information	Are the emissions released from vents and/or openings from a building? Yes No If yes, please provide: Building #/Name: Building Width:	feet					

*AQMD Rule 1470 defines SENSITIVE RECEPTOR as meaning any residence including private homes, condominiums, apartments, and living quarters, schools as defined under paragraph (b)(57), preschools, daycare centers and health facilities such as hospitals or retirement and nursing homes. A sensitive receptor includes long term care hospitals, hospices, prisons, and dormitories or similar live-in housing.

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Section D - Authorization/Signature							
I hereby certify that all information contained herein and information submitted with this application is true and correct.							
Signature of Preparer:	Title of Preparer:		Preparer's Phone #: Preparer's Email:				
Contact Person:		Contact's Phone#:		Date Signed:			
Contact's Email:		Contact's Fax#:					
THIS IS A PUBLIC DOCUMENT							

Pursuant to the California Public Records Act, your permit application and any supplemental documentation are public records and may be disclosed to a third party. If you wish to claim certain limited information as exempt from disclosure because it qualifies as a trade secret, as defined in the District's Guidelines for Implementing the California Public Records Act, you must make such claim at the time of submittal to the District.

Check here if you claim that this form or its attachments contain confidential trade secret information.