

## PORTABLE SOURCE PERMIT MOVE NOTIFICATION

Please see instructions on page 2 before filling out the form.

IDENTIFICATION	
1. Business name:	2. Permit No.:
3. Contact name:	4. Title:
5. Work phone:	6. Cell phone:
7. Email address:	
PREVIOUS LOCATION	
8. Previous location of equipment:	
9. Last date of operation at previous location:	
NEW LOCATION	
10. Street address, latitude & longitude, or Assessor's Parcel No. (attach map) where equipment will be operating:	Zip Code:
11. Date equipment will be brought to new location:	
12. Expected duration of operation at new location:	
13. Projected Throughput (tons):	
14. Project/Job Name:	
15. Onsite Contact Name:	
16. Phone #:	
17. Email Address:	

18. List of equipment that will be used at this project site:

EU ID	Type (screen, crusher, engine etc.):	Capacity (tph or hp):	Manufacturer & Model:

19. Is equipment run on pole power?	Yes	No (Provide engine information in equipment list if diesel)
20. Provide a plant flow diagram and site map as a separate attachment.		

**Reporting Requirements:**

Visual Emission Observations (VEO) must be conducted on any project where any crushing operations occur.

- VEO must be performed by someone with a current method 9 certification
- AQMD must be notified 7 days prior to scheduled test
- Notifications can be emailed to [AQMDCompliance@washoecounty.gov](mailto:AQMDCompliance@washoecounty.gov).
- VEO report must be submitted to [AQMDCompliance@washoecounty.gov](mailto:AQMDCompliance@washoecounty.gov) within 10 days of Method 9 performance test. The current Method 9 certification from the individual that conducted the test must be included with the report.
- Once project is complete you must submit a final move notification indicating the equipment has been moved off site.

This application shall be deemed incomplete if submitted information is incorrect, inaccurate, or missing. To the best knowledge of the Responsible Official, the information submitted in this application is certified as true and complete. The Responsible Official agrees that any willful misrepresentation shall be cause for revocation of the Permit to Operate.

This Movement Notification is submitted in accordance with the provisions of Permit to Operate conditions, and under penalty of perjury, to the best of my knowledge the information supplied in this document is true and correct.

Signature of Responsible Official: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name of Responsible Official: \_\_\_\_\_

Title of Responsible Official: \_\_\_\_\_

**All information above this line is required for this form to be considered complete. Duplicate sheet as needed.**

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## Form Instructions

This form must be submitted to the AQMD prior to relocating a portable source at any time before relocating to a site where the source will operate portable crushing and/or screening equipment to support a single on-site construction activity for less than 12 months (i.e., temporarily).

1. Provide the source name as it appears on the application, the source name should match the name on the permit.
2. Provide the Source Permit number as it appears on the permit.
3. Specify the name of the contact person for the portable source.
- 4-7. Specify the contact person's title, work phone number, cell phone number, and work email address.
8. Specify the previous location of the portable source.
9. Specify the last date the portable source operated at the previous location.
10. Specify the new location for the portable source: a street address, the location's latitude and longitude, or the Assessor's Parcel Number. Specify the ZIP code of the new location if one is available. Attach a map that shows both the new location of the portable source and the maximum proposed area for the source's operation. Mapping instructions can be found ([here](#)).
- 11-12. Specify the date on which the portable source will begin operating at the new location and how long it will operate there.
13. Specify projected throughput to be processed at this location/project.
14. Specify the project/job name.
15. Who will be the onsite contact?
16. What is the phone number for the onsite contact?
17. What is the email address of the onsite contact?
18. List all equipment from permit including Emission Unit ID to be used at this location/job.
19. Pole power or diesel engine? If diesel provide engine information in the equipment list and what piece of equipment it is associated with.
20. Provide a plant flow diagram and site map as a separate attachment.