



**ASPHALT PLANTS**

**PRODUCTION & EQUIPMENT INFORMATION**

Reporting Year: \_\_\_\_\_

Please fill in all blanks with either appropriate information or NA (Not Applicable).  
Copy this form as needed to complete inventories for all of your facilities.

1. Montana Air Quality Permit # \_\_\_\_\_
2. Company Name: \_\_\_\_\_ Contact: \_\_\_\_\_
3. Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip Code: \_\_\_\_\_
4. Phone Number: \_\_\_\_\_ E-mail Address (required): \_\_\_\_\_
5. Asphalt Plant Make/Model/Year: \_\_\_\_\_
6. Date of last Stack Test: \_\_\_\_\_  
Emission Factor from last Stack Test:  
a) Grains per dry standard cubic foot of air: \_\_\_\_\_  
b) and/or Pounds per ton of asphalt produced: \_\_\_\_\_  
c) Production Rate during the last Stack Test \_\_\_\_\_ Tons/hour
7. Asphalt Plant Type: Batch Drum Other: \_\_\_\_\_
8. Emission Control: Baghouse Wet Scrubber Other: \_\_\_\_\_
9. Dryer Fuel Type: Coal Propane Natural Gas Oil Diesel Other: \_\_\_\_\_  
Amount of fuel: \_\_\_\_\_
10. Total Annual Hours of Operation: \_\_\_\_\_  
Hours/Day \_\_\_\_\_ Days/Week: \_\_\_\_\_
11. Total Asphalt Produced: \_\_\_\_\_ Tons
12. % Throughput by Quarter (%Tons by Quarter): Jan-Mar \_\_\_\_\_ % Apr-June \_\_\_\_\_ %  
July-Sep \_\_\_\_\_ % Oct-Dec \_\_\_\_\_ %
13. Asphalt Cement Heater Model/Year: \_\_\_\_\_  
Total Annual Heater Fuel Usage:  
Oil \_\_\_\_\_ Gallons  
Diesel \_\_\_\_\_ Gallons  
Propane \_\_\_\_\_ Gallons  
Natural Gas \_\_\_\_\_ Million Cubic Feet (MMCF) - Convert Decatherms to MMCF  
Other \_\_\_\_\_ Tons, gallons, or MMCF

14. Total Vehicle Miles Traveled: \_\_\_\_\_

Equipment:

Front loaders: \_\_\_\_\_ Miles

Haul Trucks: \_\_\_\_\_ Miles

(Includes Pit Area & Private Access/Haul Roads by front loaders, haul trucks, and other vehicles)

15. Road/Pit Dust Fugitive Emission Control (may select more than one as appropriate):

Water  Chemical Suppressant  Paved Roads  Other \_\_\_\_\_

16. If you have included equipment that is not identified in your Air Quality Permit, please comment:

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If you included equipment in Section #16, please call the Department at (406) 444-3490, you may need to update your permit. If your permit does not accurately reflect the equipment you are using and you do not have it updated, you may be subject to a violation and financial penalties.

17. Equipment is currently located out of state: Yes or No

18. If in Montana, current location:

Latitude/Longitude: (in decimal degrees) \_\_\_\_\_

County \_\_\_\_\_

(Please list 5 digits to the right of the decimal point for the latitude and longitude)

I certify the data submitted above for Permit # \_\_\_\_\_ is based on information and belief formed after reasonable inquiry; the statements and information in the document are true, accurate, and complete.

Signed: \_\_\_\_\_

Name: \_\_\_\_\_

Position: \_\_\_\_\_

Date: \_\_\_\_\_



**GENERATORS and ENGINES**

**PRODUCTION & EQUIPMENT INFORMATION**

**Reporting Year:** \_\_\_\_\_

**Please fill in all blanks with either appropriate information or NA (Not Applicable).  
Copy this form as needed to complete inventories for all of your facilities.**

1. **Montana Air Quality Permit #:** \_\_\_\_\_
2. **Company Name:** \_\_\_\_\_ **Contact:** \_\_\_\_\_
3. **Mailing Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_ **Zip Code:** \_\_\_\_
4. **Phone Number:** \_\_\_\_\_ **E-mail Address (required):** \_\_\_\_\_
5. **Number of Generators:** \_\_\_\_\_ (enter NA if plant uses utility electricity).
  - Generator #1 Size** \_\_\_\_\_ **Kilowatts**
  - Engine #1 Size** \_\_\_\_\_ **Horsepower**
  - Annual Hours of Operation** \_\_\_\_\_
  - Total Annual Generator Fuel Usage**
  - Oil** \_\_\_\_\_ **Gallons**      **Natural Gas** \_\_\_\_\_ **Million Cubic Feet**
  - Propane** \_\_\_\_\_ **Gallons**      **Diesel** \_\_\_\_\_ **Gallons**
  - Gasoline** \_\_\_\_\_ **Gallons**      **Other** \_\_\_\_\_
  
  - Generator #2 Size** \_\_\_\_\_ **Kilowatts**
  - Engine #2 Size** \_\_\_\_\_ **Horsepower**
  - Annual Hours of Operation** \_\_\_\_\_
  - Total Annual Generator Fuel Usage**
  - Oil** \_\_\_\_\_ **Gallons**      **Natural Gas** \_\_\_\_\_ **Million Cubic Feet**
  - Propane** \_\_\_\_\_ **Gallons**      **Diesel** \_\_\_\_\_ **Gallons**
  - Gasoline** \_\_\_\_\_ **Gallons**      **Other** \_\_\_\_\_
  
  - Other Engine Size** \_\_\_\_\_ **Horsepower**
  - Annual Hours of Operation** \_\_\_\_\_
  - Total Annual Generator Fuel Usage**
  - Oil** \_\_\_\_\_ **Gallons**      **Natural Gas** \_\_\_\_\_ **Million Cubic Feet**
  - Propane** \_\_\_\_\_ **Gallons**      **Diesel** \_\_\_\_\_ **Gallons**
  - Gasoline** \_\_\_\_\_ **Gallons**      **Other** \_\_\_\_\_





**CONCRETE BATCH**

**PRODUCTION & EQUIPMENT INFORMATION**

**Reporting Year:** \_\_\_\_\_

**Please fill in all blanks with either appropriate information or NA (Not Applicable).  
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1. **Montana Air Quality Permit #** \_\_\_\_\_
2. **Company Name:** \_\_\_\_\_ **Contact:** \_\_\_\_\_
3. **Mailing Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_ **Zip Code:** \_\_\_\_\_
4. **Phone Number:** \_\_\_\_\_ **E-mail Address (required):** \_\_\_\_\_
5. **Emission Control on Process:** Spraybar Foggers/Misters Filter Baghouse Wet Material  
Other: \_\_\_\_\_
6. **Concrete Batch Total Tons of Product:** \_\_\_\_\_  
**Tons:** \_\_\_\_\_ **Cubic Yards:** \_\_\_\_\_
7. **Concrete Total Tons Cement purchased:** \_\_\_\_\_ **Tons**  
**Fly Ash Total Tons purchased:** \_\_\_\_\_ **Tons**
8. **Concrete Batch Total Tons of Aggregate:** \_\_\_\_\_ **Tons**
9. **Total Annual Hours of Operation:** \_\_\_\_\_  
**Hours/Day:** \_\_\_\_\_  
**Days/Week:** \_\_\_\_\_
10. **% Throughput by Quarter (%Tons by Quarter):** Jan-Mar \_\_\_\_\_ % Apr-June \_\_\_\_\_ %  
July-Sep \_\_\_\_\_ % Oct-Dec \_\_\_\_\_ %
11. **Total Vehicle Miles Traveled:** \_\_\_\_\_ **Miles**  
**(Includes Pit Area & Private Access/Haul Roads by front loaders, haul trucks, and other vehicles)**  
**Equipment:**  
**Front loaders** \_\_\_\_\_ **Miles**  
**Haul Trucks** \_\_\_\_\_ **Miles**
12. **Road/Pit Dust Fugitive Emission Control (may check more than one as appropriate):**  
Water Chemical Suppressant Paved Roads Other \_\_\_\_\_

**13. If you have included equipment that is not identified in your Air Quality Permit, please comment:**

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**If you included equipment in Section #13, please call the Department at (406) 444-3490, you may need to update your permit. If your permit does not accurately reflect the equipment you are using and you do not have it updated, you may be subject to a violation and financial penalties.**

**14. Equipment is currently located out of state: Yes or No**

**15. If in Montana, current location:**

**Latitude/Longitude:** (in decimal degrees) \_\_\_\_\_

**County** \_\_\_\_\_

(Please list 5 digits to the right of the decimal point for the latitude and longitude)

**I certify the data submitted above for Permit # \_\_\_\_\_ is based on information and belief formed after reasonable inquiry; the statements and information in the document are true, accurate, and complete.**

**Signed:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Position:** \_\_\_\_\_

**Date:** \_\_\_\_\_



**CRUSHING AND SCREENING**

**PRODUCTION & EQUIPMENT INFORMATION**

Reporting Year: \_\_\_\_\_

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- 1. Montana Air Quality Permit # \_\_\_\_\_
- 2. Company Name: \_\_\_\_\_ Contact: \_\_\_\_\_
- 3. Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip Code: \_\_\_\_\_
- 4. Phone Number: \_\_\_\_\_ E-mail Address (required): \_\_\_\_\_
- 5. Number of Crushers by Type:  
# Jaw: \_\_\_\_ # Cone: \_\_\_\_\_ # Impact: \_\_\_\_ # Roll: \_\_\_\_ # Gyratory: \_\_\_\_\_
- 6. Number of Screens (do not include Grizzlies): \_\_\_\_\_
- 7. Emission Control on Process  Spraybar  Foggers/Misters  Filter Baghouse  Wet Material  
 Other: \_\_\_\_\_
- 8. Total Annual Hours of Operation: \_\_\_\_\_  
Hours/Day: \_\_\_\_\_ Days/Week: \_\_\_\_\_
- 9. %Throughput by Quarter (%Tons by Quarter): Jan-Mar \_\_\_\_\_% Apr-June \_\_\_\_\_%  
July-Sep \_\_\_\_\_% Oct-Dec \_\_\_\_\_%

**10. Breakdown of Material Crushed per Crusher**

Crusher #1 Type (Jaw, Cone, etc.): \_\_\_\_\_ Throughput: \_\_\_\_\_ Tons/Year  
 Crusher #2 Type (Jaw, Cone, etc.): \_\_\_\_\_ Throughput: \_\_\_\_\_ Tons/Year  
 Crusher #3 Type (Jaw, Cone, etc.): \_\_\_\_\_ Throughput: \_\_\_\_\_ Tons/Year  
 Crusher #4 Type (Jaw, Cone, etc.): \_\_\_\_\_ Throughput: \_\_\_\_\_ Tons/Year  
 Total Material Crushed: \_\_\_\_\_ Tons (sum of Crushers #1-#4 above)

**11. Breakdown of Material Screened per Screen (do not include Grizzly screens)\*\***

Screen #1 Product Throughput: \_\_\_\_\_ Tons/Year  
 Screen #2 Product Throughput: \_\_\_\_\_ Tons/Year  
 Screen #3 Product Throughput: \_\_\_\_\_ Tons/Year  
 Screen #4 Product Throughput: \_\_\_\_\_ Tons/Year  
 Total Material Screened: \_\_\_\_\_ Tons (sum of Screens #1-#4 above)

\*\*Note: Throughput is for each screen as a unit. The tonnage through a 3-deck screen is not 3 times the total dumped into it.

12. Total Vehicle Miles Traveled: \_\_\_\_\_ Miles  
(Includes Pit Area & Private Access/Haul Roads by front loaders, haul trucks, and other vehicles)  
Equipment:  
Front Loaders \_\_\_\_\_ Miles  
Haul Trucks \_\_\_\_\_ Miles

13. Road/Pit Dust Fugitive Emission Control (may select more than one as appropriate):  
 Water  Chemical Suppressant  Paved Roads  Other \_\_\_\_\_

14. If you have included equipment that is not identified in your Air Quality Permit, please comment:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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15. Equipment is currently located out of state: Yes or No

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Signed: \_\_\_\_\_  
Name: \_\_\_\_\_  
Position: \_\_\_\_\_  
Date: \_\_\_\_\_





**13. Road/Pit Dust Fugitive Emission Control (may select more than one as appropriate):**

Water  Chemical Suppressant  Paved Roads  Other \_\_\_\_\_

**14. If you have included equipment that is not identified in your Air Quality Permit, please comment:**

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**County** \_\_\_\_\_

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**Signed:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Position:** \_\_\_\_\_

**Date:** \_\_\_\_\_