before commencing operation at the location. The owner/operator may not operate at a location for 15 days after the Department receives a complete not... Department receives notice of a location, owners/operators may move equipment to and from the location without submitting additional notice, except as required for initial confirmation of occupancy or for final removal of equipment. (2) Within 15 days after receiving a complete notification, the Department will publish notification of new locations at http://deq.mt.gov/Air/PublicEngagement. (3) Within 10 days after commencing operation at any new location, the owner/operator must contact the Department to confirm that the location is active. (4) The owner/operator must notify the Department within 10 days after removing all equipment of a single source category from a location. Guidance for filling out this form can be found on the DEQ website at http://deq.mt.gov/Air/BI/NewFacility.

Owner/Operator Certification. I hereby certify that, to the best of my knowledge, information, and belief, formed after reasonable inquiry, the information provided in this notification is true, accurate, and complete.	**For State of Montana Use Only**
Name (print): murphy wagar Title: owner	Date Received: Electronically 3/19/2020
Company: murphys excavating inc	Date Notice Published (or NA): 3/19/2020
Phone: 406 253 2507 Email: murphysexcavating@hotmail.com	
Date:	
Signature:	

Notice of Montana Operating Locations

Location Name: sickler /M.E #2	Location Type: ● Temporary ○ Permanent

Physical Location	County: flathead	Lat./Lon. Decimal Degrees: 48.05395 / -11469399

Montana Sage Grouse Conservation Program Applicability	This location is within sage grouse habitat: ☐ Yes ☐ No
Visit https://sagegrouse.mt.gov to determine if the location is located within sage grouse habitat as recognized by the Montana Sage Grouse Habitat Conservation Program.	If yes, I have consulted with the MT Sage Grouse Habitat Conservation Program: ☐ Yes ☐ No

Source Category to be Operated at Location (complete for all that apply)	Type of Notification		
	New	Confirmation	Removal
Crushing/Screening	☒	☐ Date: 3/30/20	☐ Date: 12/30/20
Concrete Batch Plant	☐	☐ Date:	☐ Date:
Asphalt Plant (Drum)	☐	☐ Date:	☐ Date:
Asphalt Plant (Batch)	☐	☐ Date:	☐ Date:

Form may be submitted electronically to DEQ-ARMB-Admin@mt.gov.

Air Quality Bureau • P.O. Box 200901 • Helena, MT 59601-0901 • (406) 444-3490