

**FOR STATE OF MONTANA USE ONLY**

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

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

Air Quality Registration Form

 for Crushing and Screening, Concrete, and Asphalt Plants

# Registrant Information

Owner/Operator Information:

Owner/Operator Name: Mailing Address: City: State: Zip Code:

Company Name and Mailing Address:

□ Check if same as Owner/Operator

Company Name: Mailing Address: City: State: Zip Code:

Contact Person:

Name: Title: Affiliation (if different than Owner/Operator): Mailing Address: City: State: Zip Code: Phone: E-mail:

# Source Category Information

Check the box(es) to indicate which source type/category you are registering. In the Attachment A, you will also be asked to identify which source type will be operated at each location. The owner/operator is only authorized to operate equipment of the source type(s) identified with this registration or future updates.

□ Nonmetallic Mineral Crushing/Screening □ Asphalt Plant □ Concrete Batch Plant

# Montana Operating Location Information (See Attachment A)

You must notify the Department of all locations of operation at least 15 days before operating at the location.

[ ] Unknown at this time (applicant must submit Attachment A prior to operating in Montana)

[ ] Permanent and/or Temporary Location(s) are identified in Attachment A

# No fee is due at the time of registration. Annual operating fees for registered facilities are based on a sliding scale dependent on annual emission rates with a minimum of $500 to a maximum of $13,000 per year. Fees calculations can be found on our website <https://deq.mt.gov/Air/Assistance> - Existing Facilities - Registered Sources.

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. Further, I hereby acknowledge the duty to comply with all applicable requirements of the Administrative Rules of Montana Title 17, Chapter 8. The owner/operator is encouraged to review the guidance available on the Department’s website at [https://deq.mt.gov/Air/Assistance](https://deq.mt.gov/air/assistance) and may contact us with any questions related to this form. Within 15 days after receiving a complete registration notification, the Department will publish this form at <https://deq.mt.gov/air/resources>.

Owner/Operator Designated Representative Name (print):

Title: Signature: Date:

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