

**Intent to Transfer Location – Air Quality Bureau**

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

Montana Air Quality Permit Number: \_\_\_\_\_\_\_\_\_\_\_\_\_

Will move its:

[ ] Asphalt Plant [ ] Crushing Plant [ ] Concrete Plant Other: \_\_\_\_\_\_\_\_\_\_\_\_

Is the plant moving out of state? [ ] Yes [ ]  No

If the plant is staying in-state, please complete the following:

* Provide the location nearest to where the equipment will be set-up, such as a gravel pit.
* Enter in decimal degrees five digits to the right of the decimal point.
* Provide an aerial view or topographic map with the pinpoint location shown.
* Send confirmation when move is complete via phone (406-444-3490) or email (see below).

**From**: (ie: Name of Pit) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Home Pit: Y/N)

Lat/Long: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

County: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**To:** (ie: Name of Pit) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Home Pit: Y/N)

Lat/Long: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 County: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Date of Move: \_\_\_\_\_\_\_\_\_\_

Do you believe this will move into designated Sage Grouse Habitat as covered by the Governor’s Executive Order 21-2105? [ ] YES [ ] NO

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Return form to:

Email: DEQ-ARMB-Admin@mt.gov

Mail: DEQ/AQB P.O. Box 200901, Helena, MT 59620-0901

Fax: (406) 444-1499

*Please refer to Administrative Rules of Montana 17.8.765*