



186 Iron Horse Court, Suite 101, Yakima, WA. 98901
Phone: (509) 834-2050 Fax: (509) 834-2060
Website: <http://www.yakimacleanair.org>

Filing Fee: \$400.00*

*Pursuant to WAC 173-400-111(1) (e)-an application is not complete until the permit application filing fee required by YRCAA has been paid.

OFFICIAL USE ONLY

YRCAA NSR No: _____ Date Fee Paid: _____

Received by: _____ Filing Fee: **\$400.00**

☐ YRCAA is the lead agency for the SEPA process. Processing Fee \$400.00

Review of the application will not begin, until the application filing fee is paid. A surcharge fee for the time required for preparing and processing the application for approval will be invoiced after the permit to operate is issued.

New Source Review (NSR) Application General

Stationary/Permanent Source

INSTALLATION OR ESTABLISHMENT OF NEW AIR CONTAMINANT SOURCES

NSR Application is Required for Construction, Installation or Establishment of an Air Pollution Source
Or

Replacement or Substantial Alteration of Emission Control Technology on an Air Pollution Source or Equipment

I. General Information:

BUSINESS NAME Central Pre-mix Concrete Co.

NATURE OF BUSINESS Concrete Production

MAILING ADDRESS 5111 E Broadway Ave, Spokane Valley, WA

FACILITY ADDRESS (if different): 2000 E Beech St. Yakima, WA

PHONE and FAX NUMBERS () 509-534-6221 Email: garrett.sullivan@nrcn.com

TYPE OF PROCESS, EQUIPMENT, OR APPARATUS Replacement Baghouses

LIST OF AIR CONTAMINANT(S) WHICH WILL BE PRODUCED AND/OR CONTROLLED Cement
Fugitives from cement silo filling and truck loading

ESTIMATED STARTING DATE: 2009

ESTIMATED COMPLETION DATE: 2009

Compliance with SEPA (State Environmental Policy Act) - Check One of the Options Below:

- ☐ A DNS or EIS has been Issued by Another Agency for this Project and a Copy is Attached.
- ☐ If no DNS or EIS Exists for this Project, a Completed Checklist for this Project and the SEPA Processing Fee are Attached. *YRCAA SEPA checklist is available by phone, or by our website.*
- ☐ The city/county has established an exemption for this project.
- ☒ I certify that the SEPA has been satisfied or this project is exempt:

_____ by _____
Date Government Agency

Previous NSR/Air Permits Number issued by YRCAA for the Facility, if any NSRP-09-CPM-08

Describe Input to Output Process (Attach drawings, schematics, prints, or block diagrams) _____

ESTIMATED COSTS: OF BASIC SOURCE EQUIPMENT \$ _____

OF CONTAMINANT CONTROL APPARATUS \$ _____

Process: Production Output per Year (tons, pounds, etc) 80,000

Maximum Output per Hour (tons, pounds, etc) 150 cu yds / hr

Percentage of Production (%)

Dec - Feb _____

Mar - May _____

Jun - Aug _____

Sep - Nov _____

Operating Schedule: Hrs/Day 10-12

Days/Wk 5

Wks/Yr 52

II. Emissions Estimations and Calculations:

1. Criteria Pollutants (gr/dscf, tons/yr, lbs/hr., ppm, etc.)

Particulate (PM₁₀, PM_{2.5}) _____

Volatile Organic Compounds _____

Nitrogen Oxides _____

Sulfur Oxides _____

Carbon Monoxide _____

Lead _____

2. Toxic Air Pollutants (Name)

Quantity (in gr/dscf, tons/yr, lbs/hr. ppm, etc.)

3. Fugitive Pollutants (Source) _____ Quantity (in gr/dscf, tons/yr, lbs/hr. ppm, etc.) _____

4. Air Pollution Modeling
Results _____
Computer Printout Attached? ☐ Yes ☐ No

III. Emission Data:

1. Stack Height (Feet) _____ Inside Diameter (feet) _____
Gas Exit Temp (degrees F) _____ Gas Exit Velocity (ft/min) _____
Flow Rate (cfm) _____
Shared Stack? If a shared stack, identify process (es) or point(s) which share the stack.
Distance from Stack to Property Line _____
2. Discharge Point or points (if no stack or other than stack)
Height (feet) _____ Inside Diameter (feet) _____
Gas Exit Temp (degrees F) _____ Gas Exit Velocity (ft/min) _____
Flow Rate (cfm) _____

Shared discharge point? If a shared discharge point, identify process (es) or point(s) which share the discharge point. _____

Distance from discharge point to Property Line _____
3. Fuel Type _____ % Sulfur _____
% Ash _____ Unit of Measure (gal./cu.ft./etc.) _____
BTU per Unit of Measure _____ Consumption Units per Year _____
Maximum Consumption Units per Hour _____
4. Building Dimensions
Height (feet) _____ Length (feet) _____ Width (feet) _____

IV. Air Pollution Control Equipment:

Baghouse

Type C & W Silo Collector Model #, Serial # CP-LPR-8-S-FS-SPL
Efficiency 99.99 % PM_{2.5}: _____ and PM₁₀: _____
Bag Height (feet) 3.25 Bag Diameter (feet) 0.667
Filter Area (feet squared) 386 Blower Flow Rate (cfm) N/A
Filter Media Polyester Dimensions (feet) _____
Discharge Area Dimensions (feet) 0.52
Cleaning Mechanism (shake) (air psi) Pulse Jet
Other Data Previously installed replacements for baghouses on plant 25 silos
2 units

Scrubber

Type _____ Model #, Serial # _____
Efficiency _____
Gas Differential Pressure (psi) _____ Liquor Differential Pressure (psi) _____
Liquor Flow (gpm) _____ Discharge Area Dimensions (feet²) _____
Gas Flow (cfm) _____ Other Data _____

Cyclone

Type _____ Model #, Serial # _____
Efficiency _____ PM_{2.5}: _____ and PM₁₀: _____
Gas Flow (cfm) _____ Discharge Area Dimensions (feet²) _____
Other Data _____

Precipitator

Type _____ Model #, Serial # _____
Efficiency _____
Gas Flow (cfm) _____ Gas Velocity (ft/sec) _____
Residence Time _____ Gas Differential Pressure (psi) _____
Precipitation Rate (ft/sec) _____ Discharge Area Dimensions (feet²) _____
Other Data _____

Ad/Absorp

Type _____ Model #, Serial # _____
Efficiency _____
Gas Flow _____ Gas Velocity (ft/sec) _____
Gas Temp (degree F) _____ Bed Volume (ft³) _____
Bed Dimensions (feet) _____ Capacity (hours) _____
Contaminant (lb/day) _____ Regeneration time (hours) _____

Other Type _____ Model #, Serial # _____
Efficiency _____
Gas Flow (cfm) _____ Discharge Area Dimensions (feet) _____
Other Data _____

V. Additional Information:

1. Attach Related Information on Chemicals or Materials that will be emitted. (MSDS Sheets, Company Information, etc.)

Note: Indicate how much quantity are used per MSDSs

☐ Yes ☐ No, if not why? _____

2. Fugitive Dust Control Plan (Attach if Necessary)

3. Attach Operation and Maintenance Manual of Pollution Control Equipment.

☒ Yes ☐ No, if not, why? _____

4. Attach Vendor Information or Manufacturer's Instructions on Pollution Control Equipment.

☐ Yes ☐ No, if not, why? _____

APPLICANT: I hereby certify that the information contained in this application, including supplemental forms and data, when required, is, to the best of my knowledge, complete and correct. I also agree to all fees for processing this permit and grant permission for YRCAA staff to enter the premises for inspection.

Signature [Signature] Date 5/24/2024

Title Environmental Specialist Date 5/29/2024

Name and Title of Individual Filling out Form:

Name (print) Dylan Eisenbrandt

Signature [Signature]

Name and Title of Contact Person, if Different than Above:

Name Ken Paul

Title Area Foreman

Name and Title of the Responsible Official for the permit, if Different than Above:

Name Mike Mc Breen

Title VP