Mail Application To:		For Department use only:
New Mexico Environment Department Air Quality Bureau New Source Review Unit 1301 Siler Road, Building B Santa Fe, NM 87507-3113 Phone (505) 476-4300 www.nmenv.state.nm.us/aqb		AIRS #: AI #:

General Construction Permit (GCP-2)

Multi-Form for Quarrying, Crushing, and Screening Facilities

(Locating outside of Bernalillo County and Tribal Communities)

Use this form for any combination of the following permitting activities: **Initial registration** of a facility for a GCP-2 permit, GCP-2 facility **relocations**, GCP-2 **substitution of equipment** notification, and reporting of **additional equipment** for GCP-2 facilities.

Acknowledgements (Mark all that apply):

☐ **I am submitting this form for an initial GCP-2 registration.**

☐ **I am submitting this form for relocation.** A complete form is required for all relocations. For relocation, response to questions with asterisks {*} and section IX {attachment D.2} do not need to be provided unless information in these sections is being changed as well; sections VII, VIII, and IX{attachment A} are not required unless equipment has changed since the last submitted list. Posting of public notice is required.

☐ **I am submitting this form for equipment substitutions, removals, or additions.** Sections I, VII, and VIII are required in addition to the certification form on page 9. Applicable provisions of the GCP-2 may require compliance tests for equipment installed following this notification. Include other sections if information is changing that should be reported in those sections.

☐ **I acknowledge that a pre-application meeting is available to me upon request.**

☐ **I have enclosed a check for the initial registration fee ($3,640) or the relocation fee ($364).** For facilities qualifying as a "small business" under 20.2.75.7.F NMAC, these fees are $1,820 and $182 respectively, provided NMED has a Small Business Certification Form on file, which can be found at: http://www.nmenv.state.nm.us/aqb/permit/app_form.html . These fees are effective 1/1/2009, and will change on 1/1/2010 per 20.2.75.11.F NMAC. Provide your Check No.: and Amount:

☐ **I have sent a copy of this application to the nearest Department Field Office (required for initial registrations only).**

☐ **I have initiated the public notice required by Condition II.B.1 of GCP-2 (required for initial registrations).**

☐ **This facility meets the applicable requirements in 20.2.75 NMAC to register as a Small Business.**

I	Company Information		
1	a) Company name:		b) Date appl. notarized:
2	a) Facility name:		*b) 4 digit SIC code:
3	Company mailing address:		
4	Permit # (unless this is a new facility):		AI # (unless this is a new facility):
5	a) Contact person:		b) Title:
6	a) Phone No:	b) Fax No:	c) e-mail:
7	Type of material processed by the Facility:		
8	Will this facility operate in conjunction with other air regulated parties on the same property? ☐**No** ☐**Yes** If yes, what is the name and permit number (if known) of the other facility?		

II Applicability

1*	Does your facility have Emissions Units subject to any New Source Performance Standard (NSPS) other than 40 CFR 60 Subpart OOO and/or Subpart IIII?	☐**No** ☐**Yes**
2*	Is your facility listed under a NESHAP or MACT?	☐**No** ☐**Yes**
3	Will your facility mine and/or process radioactive materials?	☐**No** ☐**Yes**
4	Will your facility mine and/or process materials that include any listed Hazardous Air Pollutants (HAPs)?	☐**No** ☐**Yes**
5	Will your facility mine and/or process nonmetallic minerals used as fuels (such as coal)?	☐**No** ☐**Yes**
6	Will your facility manufacture cement?	☐**No** ☐**Yes**
7	Will your facility mine and/or process potash or humate?	☐**No** ☐**Yes**
8	Will your facility process slag, asbestos tailings, or asbestos containing waste materials?	☐**No** ☐**Yes**
9	Is your facility subject to 20.2.72 NMAC, Subpart IV, *Permitting for Toxic Air Pollutants?*	☐**No** ☐**Yes**
10	Will this facility be located less than three (3) miles from a Class I (Wilderness) area? See AQB Modeling website for a map of Class I areas at: http://www.nmenv.state.nm.us/aqb/modeling/class1areas.html	☐**No** ☐**Yes**
11	Will this facility use any fuels other than natural gas, liquefied petroleum gas (LPG)/propane, gasoline, and # 2 diesel fuel with a sulfur content greater than 0.05% by weight?	☐**No** ☐**Yes**
If you answered ***Yes*** to any of questions 1-11, your facility **does not** qualify for this general construction permit. You need to submit an application for a regular permit under 20 NMAC 2.72 *Construction Permits*.		
12	Will your facility meet the location requirements as described in Sections III.C. and III.E. of this general construction permit?	☐**No** ☐**Yes**
13	Is your facility's primary purpose to produce, process, crush, screen, and /or process any of the listed materials per Condition I.A.1 of the general construction permit?	☐**No** ☐**Yes**
14	Is your facility's Maximum Production less than or equal to 600 Tons Per Hour? (Required by Condition III.A.4. of this General Construction Permit)	☐**No** ☐**Yes**
15	Does your facility include any combination of the Emissions Units listed in Section I.A.3. of the general construction permit, and no others?	☐**No** ☐**Yes**
16	Can your facility comply with all of the applicable state and federal regulations listed in Section III.B. of the general construction permit?	☐**No** ☐**Yes**
17	Will the perimeter of the Area of Operations of your facility be located more than one-quarter mile (1/4) from an existing recreation area, private residence, office building, school, or other occupied structure?	☐**No** ☐**Yes**
18	Will the minimum distance between any emission source of the permitted Facility and the perimeter of the Restricted Area (except where the haul road crosses the Restricted Area perimeter) be at least 10 meters (11 yards)?	☐**No** ☐**Yes**
19	Will your facility operate **no more** than 4,380 hours per year?	☐**No** ☐**Yes**
20	Will your facility operate during daylight hours only?	☐**No** ☐**Yes**
21	Will the haul road control measures meet or exceed the requirements as described in Section III.F. and Table III.F.1 of this general construction permit?	☐**No** ☐**Yes**
If you answered ***NO*** to any of questions 12-21, your facility **does not** qualify for this general construction permit. You need to submit an application for an individual permit under 20. 2.72 NMAC *Construction Permits*.		

III Current Facility Status

1*	Has this facility previously been issued a general construction permit? ☐Yes ☐No	If yes, the registration No. is:	
2*	Has this facility already been constructed? ☐Yes ☐No	If yes, is it currently operating in New Mexico? ☐Yes ☐No	
3*	Does this facility currently have a construction permit (20.2.72 NMAC, Section 200.A or 200.B)? ☐Yes ☐No	If yes, the permit No., and whether it will remain active or not	
4*	Is this application in response to a Notice of Violation (NOV)? ☐Yes ☐No If so, provide current permit #:	If yes, NOV date:	NOV Tracking No.
5	This Facility is submitting this application as a Small Business and will operate under the small business product limitation in the GCP, Section II.D.2 – *Fees*. ☐Yes ☐No		
6	This Facility will operate as a Small Business under Condition II.D. I understand that additional reporting requirements are necessary prior to operating over the 760,000 TPY limit as required in Condition IV.C.1.b. ☐Yes ☐No		

IV Facility Location Information

1	a) Section:	b) Range:	c) Township:	d) County:	e) Elevation (ft):
2	a) UTM Zone: ☐12 or ☐13	b) UTME (to nearest 0.01 km):	c) UTMN (to nearest 0.01 km):		

	d) Specify Easting and Northing Coordinates as NAD 27: or NAD 83:	
AND	Latitude (deg., min., sec.):	Longitude (deg., min., sec.):
3	Name and zip code of nearest New Mexico town and/or tribal community:	
4	Detailed Driving Instructions including direction and distance from nearest NM town and/or tribal community (attach a road map if necessary). If there is no street address, provide public road mileage marker:	
5	Direction and distance to the nearest occupied structure from the perimeter of the Area of Operations: On Attachment C (page 6) required map, indicate (circle) all residences within ¼ mile of area of operations.	
6	Status of land at which the facility is to be located (check one): ☐Private ☐Indian/Pueblo ☐Government	
7	Name and county of the nearest Class I Area and its direction from the facility:	
8	Shortest distance from the facility to the boundary of the nearest Class I Area (to the nearest 1 km):	

V Proposed Operating Schedule

1	Facility **maximum** operating ($\frac{\text{hours}}{\text{day}}$):	($\frac{\text{days}}{\text{week}}$):	($\frac{\text{weeks}}{\text{year}}$):	($\frac{\text{hours}}{\text{year}}$):
2	Facility's maximum daily operating schedule? Start:	☐AM ☐PM	End:	☐AM ☐PM
3	Month and year of anticipated startup of new or modified facility:			
4	Month and year of anticipated completion date at this proposed site:			
5	Will this facility operate at this site for more than one year? ☐Yes ☐No		If yes, give number of years, months, permanent etc.	

VI Other Facility Information

1	Maximum proposed production		tons/hr	3	Total miles of haul road (one way)		miles
2	Area of storage pile & operations		acres	4	Estimated Number of Haul truck trips per day (round trip)		trips/day
5	Amount of area with restricted public access in acres and the methods used to restrict public access:						
6	Describe the control measures that will be used on haul roads to meet the fugitive emission requirements described in Section III.F. of this General Construction Permit:						

7	Provide a preliminary operational plan(s) defining the measures to mitigate source emissions during: 1) Facility malfunctions, start up, shutdown, scheduled maintenance as defined in 20.2.7 NMAC or 2) weather conditions that would cause an exceedance of the visible emission requirement in Section III.A.6. of the permit.

VII Process Equipment Information (use additional sheets if necessary){*}

Unit Number	Component Description (or unit's function)	Manufacturer	Manufacture Date.	Model Number	Equipment Size, Capacity[1] or Maximum Process Rate	Manufacturers Emission Factors for Regulated Air Pollutants (for engines or generators)	Date of Most Recent Compliance Test in New Mexico (or "None")

[1] To properly account for power conversion efficiencies, generator set rated capacity shall be reported as the rated capacity of the engine in horsepower, not the kilowatt capacity of the generator set.

VIII Storage Tank Information (Note: this data will be used to determine 40 CFR 60 Subpart Kb applicability) (Use additional sheets if necessary){*}									
Tank No.	**Materials Stored**	**Date Installed (MM/DD/YY)**	**Capacity (bbl)**	**Capacity (M^3)**	**Diameter (M)**	**Height (M)**	**True Vapor Pressure (kPa)**	**Annual Through-puts (gal)**	**Annual Turnovers**

IX Required Attachments

The following Attachments are required. Please label each accordingly. A complete application shall include:

*Attachment A A process flow sheet and/or block diagram indicating the individual equipment, all emission points and types of control applied to those points. Numbering system should cross reference with Attachment B.

Attachment B A plot plan drawn to scale, showing the Area of Operations, emissions points, structures, tanks, and fences of the Restricted Area, and the Property Boundary owned, leased, or under direct control of the applicant and/or owner or operator.

Attachment C A map such as a 7.5 minute United States Geological Survey (USGS) topographic quadrangle showing the proposed location of the Facility. The map shall also include the following:

Access and haul roads
A minimum radius around the plant of 5km (3.1 miles), showing any Class 1 areas
Topographic features of the area
The name of the map
A graphic scale
An indicator showing which direction is north
The UTM or Longitudinal coordinate system on both axes
Any co-located particulate sources
Include facility property boundaries, perimeter of the area of restricted public access (fenceline), area of operations boundary, & location of the primary crusher.
Location of state parks, recreation areas, school yards, residences, businesses, schools, or other occupied structures within ¼ mile of the boundary of the area of operations.
Show the nearest occupied structure, indicating the shortest distance from it to the perimeter of the Area of Operations, unless the distance is greater than 3.1 miles. If greater than 3.1 miles, so indicate.

Attachment D Documentation that public notice has been initiated

1) Include the General Posting of Notice-Certification including location of posted notice along with the posted sample; date of posting, and name of person posting the notice.
2a) {*}Include an original or copy of the actual newspaper advertisement. The original or copy of the advertisement must include the header showing the date and newspaper or publication title. **OR**
2b) {*}Include an affidavit from the newspaper or publication stating that the advertisements were published. The affidavit must include the date of the advertisements' publication, and a legible photocopy of the entire ad.

Attachment E A written description of the methods by which public access is limited to the Restricted Area

Certification X Certification by the Facility's owner or operator, or authorized representative before a notary public that all of the information included in the registration form is true and complete to the best of his or her knowledge (see attached copy in Part IV of this registration form).

Certification

General Posting of Notices

General Construction Permits (GCPs)

I, _____, the undersigned, certify that on **{DATE},** I posted a true and correct copy of the attached Public Notice in a publicly accessible and conspicuous place at the facility entrance of the property on which the facility is, or is proposed to be, located.

Signed this ____ day of _____, _____,

_____ _____

Signature Date

_____

Printed Name Title {APPLICANT OR RELATIONSHIP TO APPLICANT}

X Certification

Company Name: _____

I, _____, hereby certify that the information and data submitted in this application are true and as accurate as possible, to the best of my knowledge and professional expertise and experience.

Signed this _____ day of _____, 20_____, upon my oath or affirmation, before a notary of the State of _____.

_____ _____

Signature **Date**

_____ _____

Printed Name **Title**

Scribed and sworn before me on this _____ day of _____, 20_____.

My authorization as a notary of the State of _____ expires on the _____ day of _____, 20_____.

_____ _____

Notary's Signature **Date**

_____

Notary's Printed Name

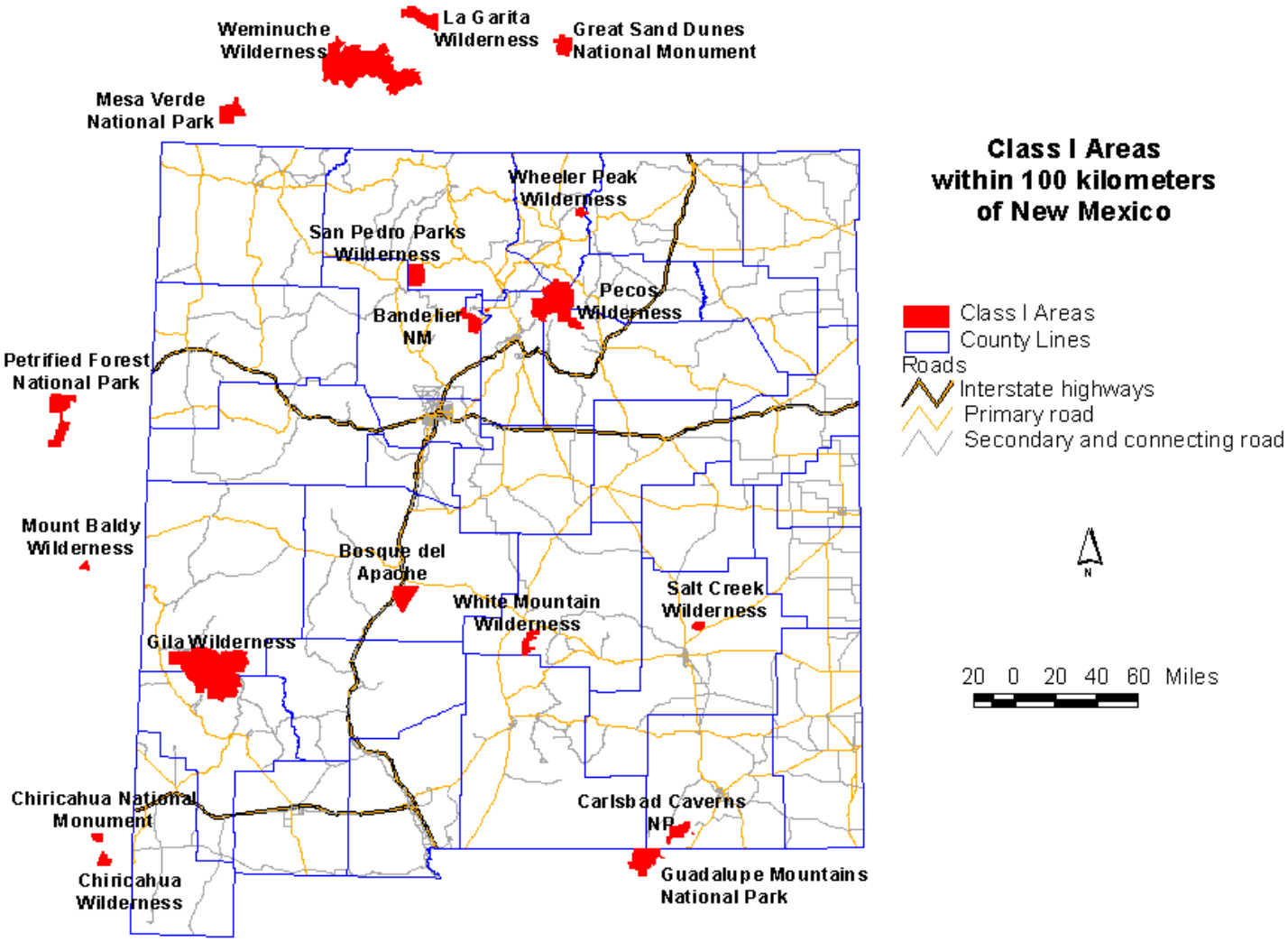
Class I Areas
within 100 kilometers
of New Mexico
Weminuche Wilderness
La Garita Wilderness
Great Sand Dunes National Monument
Mesa Verde National Park
Wheeler Peak Wilderness
San Pedro Parks Wilderness
Pecos Wilderness
Bandelier NM
Petrified Forest National Park
Mount Baldy Wilderness
Bosque del Apache
White Mountain Wilderness
Salt Creek Wilderness
Gila Wilderness
Chiricahua National Monument
Chiricahua Wilderness
Carlsbad Caverns NP
Guadalupe Mountains National Park
Class I Areas
County Lines
Roads
Interstate highways
Primary road
Secondary and connecting road
N
20 0 20 40 60 Miles

Figure 1