

## YOLO-SOLANO AIR QUALITY MANAGEMENT DISTRICT 1947 Galileo Court, Suite 103; Davis, CA 95618 Phone (530) 757-3650; Fax (530) 757-3670

## CONFINED ANIMAL FACILITY (CAF) PERMIT APPLICATION

Failure to adhere to the application instructions may result in an incomplete application and a delay in the processing of the application. Plans and/or drawings submitted with your application cannot exceed 11 in. x 17 in. See instructions for further detail. For assistance, contact the District Engineering Division at (530) 757-3650. Application must be submitted with correct filing fee.

#### 1. APPLICATION TYPE:

- [ ] Initial / New CAF Permit
- [ ] Modification to an existing valid CAF Permit; CAF Permit #:

#### 2. CAF NAME (exactly as it should appear on your Permit):

#### 3. CAF PHYSICAL LOCATION:

CITY, STATE AND ZIP CODE:

# 4. PERSON APPLYING FOR CAF PERMIT:

Applicant N	ame:		
Title:			
Mailing Add	lress (if d	lifferent):	
City, State a	nd Zip C	ode:	
Telephone:	(	)	Ext.
FAX:	(	)	
E-mail Addr	ess:		

Date Stamp Received:	 	Permit # Assigned:	
Filing Fee Received:	\$ Invoice #:	Check/Credit Card:	
Hourly processing fee:	\$ (See Emission Evaluation I	Fee Determination Summary)	
Expedite Fee:	\$ (See Emission Evaluation I	Fee Determination Summary)	
Total to be Invoiced:	\$ Invoice #:		
Comments:			

### 5. DISTANCE FROM THE CAF TO THE NEAREST K-12 SCHOOL:

\*\*You must check the correct box below, otherwise your application is incomplete\*\*

[ ] CAF is within 1,000 feet of a K-12 school

Name of nearest school:

[ ] CAF is NOT within 1,000 feet of a K-12 school

### 6. CAF SITE & EQUIPMENT PLANS / PLOTS / DRAWINGS:

Attach a site drawing that clearly identifies property lines, relevant buildings, location of proposed equipment, and any other information applicable to the CAF Permit application. Also, attach applicable drawings that clearly show the design and operation of proposed equipment.

### 7. SUPPLEMENTAL CAF APPLICATION FORM(S):

Attach all required supplemental CAF permit application forms to the end of this main CAF Permit application form.

#### 8. EMISSION MITIGATION PLAN(S):

Attach all required emission mitigation plans (EMP) to the end of this main CAF Permit application form.

### 9. **PROCESSING FEE:**

The application processing fee shall be assessed in accordance with the time and materials labor rate established in Section 307.10 of District Rule 4.1. The initial filing fee shall be equal to two (2) hours at the time and materials labor rate established in Section 307.10 of District Rule 4.1. Therefore, an initial filing fee is due at the time the application is submitted. Additional District processing hours spent on the application will be invoiced to the applicant following completion of the evaluation process.

#### **10. SIGNATURE:**

This application must be signed by the applicant listed in Section 4. By signing this document you are indicating that all information contained in this document and in any attachments are true, accurate and complete to the best of your knowledge. If paying by credit card signed application may be transmitted by facsimile (fax) or electronic mail (email), and any such signature shall have the same legal effect as an original.

SIGNATURE:

DATE:

# YOLO-SOLANO AIR QUALITY MANAGEMENT DISTRICT

1947 Galileo Court, Suite 103; Davis, CA 95618

### CONFINED ANIMAL FACILITY (CAF) PERMIT APPLICATION INSTRUCTIONS

**NEED ASSISTANCE?** Contact the District engineering staff to receive assistance over the phone or to schedule an appointment for a free consultation to assist you in completing your permit application package. The engineering division can be reached at (530) 757-3650 or toll-free within the (916), (530), & (707) area codes at (800) 287-3650.

**PERMIT PROCESSING FEE:** An initial permit filing fee is required when submitting an application to the District (refer to Instruction #9).

- 1. **APPLICATION TYPE:** Check the appropriate box for the type of application being filed. The top box is for initial and new permit application filings. The bottom box is for applications to modify an existing valid CAF Permit. When an application is filed for a modification, please include the existing CAF Permit number.
- 2. CAF NAME: Enter the business name of the CAF. The CAF name will appear on the permit.
- **3. CAF PHYSICAL LOCATION:** Enter the street address of the CAF or a description of the CAF location (i.e. section, township, and range).
- 4. **PERSON APPLYING FOR CAF PERMIT:** The person applying for the CAF Permit should be an authorized responsible official of the CAF. All District correspondence, including the CAF Permit and invoices, will be sent to the applicant's mailing address.
- 5. DISTANCE FROM THE CAF TO THE NEAREST K-12 SCHOOL: You must check the correct box in this section; otherwise your application is incomplete. If your CAF is within 1,000 feet of a K-12 school, please enter the name of the nearest school.
- 6. CAF SITE & EQUIPMENT PLANS / PLOTS / DRAWINGS: Submit a site drawing that clearly identifies property lines, relevant buildings, location of proposed equipment, and any other information applicable to the CAF Permit application. In addition, submit applicable drawings that clearly show the design and operation of proposed equipment.
- 7. SUPPLEMENTAL CAF APPLICATION FORM(S): Attach all required supplemental CAF Permit application forms (i.e. supplemental application form for dairies) to the end of the main CAF Permit application form. Missing supplemental application forms will result in an incomplete application package.
- 8. EMISSION MITIGATION PLAN(S): Attach all required emission mitigation plans (i.e. VOC emission mitigation plan for dairies) to the end of the main CAF Permit application form. Missing emission mitigation plans will result in an incomplete application package.
- **9. PROCESSING FEE:** The initial filing fee is equal to two (2) hours at the time and materials labor rate established in Section 307.10 of District Rule 4.1. An initial filing fee is due at the time the application is submitted. Application packages without an initial filing fee will not be processed. Additional District processing hours spent on an application package (over two hours) will be invoiced to the applicant following completion of the District's application evaluation process. Options and instructions for submittal of the application and payment: 1) Mail with <u>check and/or money</u> order payable to: YSAQMD, 1947 Galileo Ct, Ste. 103; Davis, CA 95618; 2) pay by <u>credit card</u> (service fee applies) at <u>www.ysaqmd.org</u> and either email with payment confirmation to <u>payments@ysaqmd.org</u> or by fax (530) 757-3670; or 3) <u>visit the District office and pay with check, money order or credit card</u>.
- **10. SIGNATURE:** The application must be signed by the applicant listed in Section 4. By signing this document you are indicating that all information contained in this document and in any attachments are true, accurate, and complete to the best of your knowledge. If paying by credit card signed application may be transmitted by facsimile (fax) or electronic mail (email), and any such signature shall have the same legal effect as an original.