

DISTRICT HEADQUARTERS

200 Litton Drive, Suite 320  
Mailing Address: P.O. Box 2509  
Grass Valley, CA 95945  
(530) 274-9360 / FAX: (530) 274-7546  
email: office@myairdistrict.com or www.myairdistrict.com

NORTHERN FIELD OFFICE

257 E. Sierra, Unit E  
Mailing Address: P.O. Box 2227  
Portola, CA 96122  
(530) 832-0102 / FAX: (530) 832-0101  
email: julie@myairdistrict.com or www.myairdistrict.com

**SOIL AERATION / REMEDIATION / VAPOR EXTRACTION PERMIT APPLICATION**

**FILING FEE, FY 15-16: \$ 297.12**

*Mail application and filing fee to the Main Office in Grass Valley.*

1. Applicant's Business Name: \_\_\_\_\_

2. Contact Person: \_\_\_\_\_

3. Applicant's Address: \_\_\_\_\_

Street

City

State

Zip

Phone #

4. Project Address: \_\_\_\_\_

Street

City

State

Zip

Phone #

5. If no address available: Township \_\_\_\_\_ Range \_\_\_\_\_ Section \_\_\_\_\_ (include map)

6. Total quantity of soil to be aerated / treated: \_\_\_\_\_ (cubic yards)

7. Estimated average level of contamination, or total organic content of soil: \_\_\_\_\_  
(include supporting documentation, e.g. test results, calculations, etc.)

8. Chemical Identification of Contaminants (Attach sampling results to this application)

9. Proposed start date of aeration / remediation / vapor extraction: \_\_\_\_\_

10. Estimated date of completion: \_\_\_\_\_

11. Estimated maximum annual VOC emissions: \_\_\_\_\_ pounds per year

12. Distance to nearest residence: \_\_\_\_\_ (feet, yards, meters, miles, etc.)

13. Is there a school or residence within 1,320 feet of the aeration site? Yes \_\_\_\_\_ No \_\_\_\_\_

14. **On a separate sheet**, describe the remediation technology and process. Include copies of literature from remediation equipment manufacturer, information on control efficiency, and any other information that may help the district assess the emission rates for all VOC's and toxics anticipated from the project. Include a flow diagram of any remediation system to be used, with all components labeled and flow rates indicated.

15. Applicant's signature: \_\_\_\_\_ Date: \_\_\_\_\_