Northern Sierra Air Quality Management District

Julie Hunter, Air Pollution Control Officer

DISTRICT HEADQUARTERS
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NORTHERN FIELD OFFICE
257 E. Sierra, Unit E
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SOIL AERATION / REMEDIATION / VAPOR EXTRACTION PERMIT APPLICATION

A FILLING FEE MUST ACCOMPANY THIS APPLICATION

Please contact District Staff or use the current fee schedule for the current fee.

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:_____

(Rev 11/5/2025)