



Serving Sutter and Yuba Counties

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Air Pollution Control Officer

### Air Quality Permit Checklist

California Government Code Section 65850.2 prohibits cities from issuing an occupancy permit to a business without clearance from the local air quality agency. This Checklist will determine if you need to obtain clearance from the Feather River Air Quality Management District (FRAQMD).

Company Name: \_\_\_\_\_  
Property Address: \_\_\_\_\_  
City: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_  
Type of Business: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Fax Number: \_\_\_\_\_ e-mail address: \_\_\_\_\_

**Will the facility have any of the following equipment?** Yes  No

- Dry cleaning equipment
- Printing press – screen/lithographic/flexographic
- Internal combustion engines (excluding motor vehicles)
- Combustion equipment (greater than 1 million Btu/hr. combined maximum input) – boilers/heaters/ovens
- Abrasive blasting operations
- Emissions control equipment – Baghouse/cartridge dust filter/scrubber/cyclone
- Fuel storage (250 gallons or larger) and/or fuel dispensing equipment [excludes diesel fuel]
- Wood or aggregate processing equipment – crushing/screening/chipping/sawing

**Will any of the following operations be performed?** Yes  No

- Application of paints, resins, surface coatings, solvents, adhesives, or other organic compounds
- Etching, plating, casting, or melting of metals
- Molding, extruding, or curing of plastics
- Production of fumes, dust, smoke, or strong odors
- Agricultural commodity fumigation or processing – drying/hulling/shelling/loading/conveying

**If you answered “No” to both questions, this checklist is your clearance from FRAQMD.** If you answered “Yes” to either question, you must contact FRAQMD to determine if air quality permits are required. If permits are needed, FRAQMD will assist you in submitting permit application(s) and then provide you with a clearance letter. You can call FRAQMD at **(530) 634-7659**.

I certify under penalty of perjury under the laws of the State of California, based on information and belief formed after reasonable inquiry, that the information contained in this application, composed of the forms and attachments, is true, accurate, and complete, and that I am the responsible official.

RESPONSIBLE OFFICIAL OR AUTHORIZED AGENT SIGNATURE: \_\_\_\_\_

NAME (PRINTED): \_\_\_\_\_ TITLE: \_\_\_\_\_ DATE: \_\_\_\_\_