Print Form

Contaminated Soil and/or Groundwater Clean-Up Application Form -77

air pollution control district
SANTA BARBARA COUNTY

Santa Barbara County Air Pollution Control District
260 N. San Antonio Road, Suite A
Santa Barbara, CA 93110-1315

Use this form to request a permit for contaminated soil and/or groundwater clean-up projects. This includes gasoline, crude oil , dry cleaning fluids, metals and any other soil contaminated with toxic, hazardous or volatile compounds. Mail the completed form(s) and appropriate filing fee (see Rule 210 Schedule F.1 https://www.ourair.org/wp-content/uploads/cpi-fees.pdf) *at least 120 days before estimated project start-up* to the Air Pollution Control District (APCD) at the above address.

Facility Address/Location	
Current APCD Permit # (if any)	
Assessors Parcel No(s)	

☐ Yes ☐ No Is the remediation site property boundary line located within 1,000 feet of a school (k-12)? If yes, provide school name and address.

School name		School address	

☐ Yes ☐ No If the remediation site is located within 1,000 feet of a school, can work activities occur outside of school hours (e.g., weekends, summer, holidays)? If yes, provide correspondence from the school district that confirms that no school activities will occur during this time period. If no, submit a completed APCD Form -03 (*School Summary Form*).

I. Operating Schedule (include estimated start date, end date, and daily operating schedule)

Daily Operating Schedule		To	
Proposed Start Date		Proposed End Date	

II. Cleanup Method

Type of Facility (former dry cleaner, gasoline station, etc.)

☐ In-Situ Vacuum Extraction	☐ Liquid/Air Stripper
☐ Bio-Reclamation	☐ Above Ground Vacuum Extraction
☐ Other (describe)	
☐ Dual Phase Extraction ☐ Single Phase Extraction	Will Air Sparging be used? ☐ Yes ☐ No

III. Extent of Contamination and Soil Information

Estimated Contaminated Volume?	Cubic ft	Bulk Density of Soil?	Ton/Cubic ft
Average Intrinsic Permeability of the Contaminated Soil?	cm^2	Depth to Groundwater?	ft. BGS

For APCD use only. FID # **App. #**

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IV. Type of Soil Contaminants (Check all that apply above 0.2 PPM and define **maximum inlet concentration to control device**[1])

☐	Total ROC[2]	ppmvd	☐	Benzene	ppmvd
☐	Tetrachloroethene (PCE)	ppmvd	☐	Toluene	ppmvd
☐	Ethylene Dichloride (DCE)	ppmvd	☐	EthylBenzene	ppmvd
☐	Trichloroethylene (TCE)	ppmvd	☐	Xylene	ppmvd
☐	Vinyl Chloride (Chloroethylene)	ppmvd	☐	Methyl Tert-Butyl Ether (MTBE)	ppmvd
☐	Other	ppmvd	☐	Xylene	ppmvd
☐	Other	ppmvd	☐	Other	ppmvd
☐	Other	ppmvd	☐	Other	ppmvd
☐	Other	ppmvd	☐	Other	ppmvd

[1] If dilution is used, enter contaminant concentration in ppmvd entering control device after dilution.

[2] See District Rule 102 for the definition of ROC. For permitting purposes, list the maximum total hydrocarbon concentration detected by a PID calibrated to isobutylene.

☐ Yes ☐ No Is a pilot test report or detailed analysis confirming the above inlet concentrations included in this application? If not, provide the detailed basis for how the values were determined as a separate attachment.

V. Well Information

Extraction Wells			Injection Wells		
Number of Extraction Wells			Number of Injection Wells		
Diameter of Wells		ft.	Diameter of Wells		ft.
Maximum Depth		ft. deep	Maximum Depth		ft. deep
Well Spacing		ft.	Design Flowrate		SCFM
Radius of Influence		ft.	Ambient Air Used?	☐ Yes	☐ No

VI. Vacuum Extraction Blower

Blower Power Source (electric, diesel, etc):		Horsepower:	HP
Manufacturer:		Model:	
Design Flow Rate:	MAX SCFM	To	MIN SCFM

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VII. Control Device *(Fill out applicable section)*

Thermal Oxidizer (Phase I)				*District assumes 98% control efficiency for all calculations*			
Max Capacity:	SCFM	Fuel Type:			Heat Rating:	MMBTU/hr	
Operating Temperature:	F	To	F		Fuel Consumption rate:		
Manufacturer				Model			

Catalytic Oxidizer (Phase II)				*District assumes 95% control efficiency for all calculations*			
Max Capacity:	SCFM	Fuel Type:			Heat Rating:	MMBTU/hr	
Operating Temperature:	F	To	F		Fuel Consumption rate:		
Manufacturer				Model			
Catalyst Specific Information:		Catalyst Type/Material:					
		Catalyst Life Expectancy:					

Carbon Adsorption (Phase III)				*District assumes 90% control efficiency for all calculations*			
Flowrate Operating Range	MIN Flowrate:	SCFM		MAX Flowrate:	SCFM		
Operating Temperature:	F	To	F		Carbon Weight Per Cannister:	Lb	
Replacement Schedule:							
Manufacturer				Model			

Internal Combustion Engine				Aux Fuel Type:			
Max Capacity:	SCFM	Horsepower:	HP		Heat Rating:	MMBTU/hr	
Number of Cylinders:					Fuel Consumption rate:		
Manufacturer				Model			
Combustion Temperature:	F			Manifolding: Air Stripper Used?	☐ Yes	☐ No	

VIII. Stack Parameters				Exhaust Stack Height:	ft.	Stack Diameter:	in.
Design Flow Rate:	MAX SCFM	To	MIN SCFM				
Gas Exit Velocity:	MAX ft/sec	To	MIN ft/sec				
Exhaust Temperature:	MAX F	To	MIN F				
Exhaust Blower Used?	☐ Yes	☐ No		Horsepower:	HP		
Manufacturer:				Model:			

IX. Monitoring Systems *(Fill out all that apply)*			
System Parameter	**Instrument Manufacturer**	**Instrument Model**	**Calibration Schedule**
Control Device Inlet Temp (F)			
Stack Outlet Temp (F)			
Control Device Inlet Gas Flow (SCFM)			
Stack Outlet Gas Flow (SCFM)*			
Control Device Inlet Pressure (PSIG)			
Control Device Outlet Pressure (PSIG)			
System Influent Flow Rate (SCFM)			
Catalytic Oxidizer Bed Temp (F)*			
Amount of Supplemental Fuel Used**			

* Required for thermal oxidizer and catalytic control devices.

** Required for systems which use fossil fuel (e.g., Diesel oil, natural gas, propane) for any device within the system (e.g, thermal oxidizer, pump driven by an internal combustion engine)

X. Air Dilution *(Fill out if air dilution will be used at the control device inlet)*					
Estimated Turndown Ratio:			Max Dilution Air Flowrate		SCFM
Dilution Air Temperature:	MAX F		To	MIN F	
Air Dilution Blower Information					
Ambient Air Used?	☐ Yes	☐ No	Horsepower:	HP	
Manufacturer:			Model:		

XI. Electrical Generator Engines *(Fill out all that apply)*					
Portable Engines Used?	☐ Yes	☐ No	Grid Power Used?	☐ Yes	☐ No
Portable Engine Information					
Fuel Type (gas, diesel, etc):			*Horsepower:		

* If the portable engine is over 49 bhp, fill out the appropriate APCD form listed below for the engine and submit it with this application.

Form 34P - Diesel Fired Primary Engine Application

Form 70 - Spark Ignited IC Engine Application (natural gas, propane, gasoline)

Applicant/Preparer Statement

The person who prepares the application also must sign this form. The preparer may be an employee of the owner/operator or an authorized agent (contractor/consultant) working on behalf of the owner/operator (an *Authorized Agent Form -01A* is required).

I certify pursuant to H&SC Section 42303.5 that all information contained herein and information submitted with this application is true and correct.

Completed By _____ Company _____

Signature _____ Date _____

Application Checklist (Have you submitted all the required information? Please check off the boxes)

- ☐ Permit Fees (Fee = $3,065). This includes an application filing fee of $565 plus a cost reimbursement deposit of $2,500 to cover hourly costs for APCD staff time.
- ☐ A copy of the **approved** lead agency site remediation plan.*
- ☐ An Emissions Verification Test Plan consistent with the District's Guidance Document (Form 07). The District will not issue an ATC permit unless the Test Plan meets District requirements.*
- ☐ Maximum influent and effluent concentration calculations using the District default control efficiency for the applicable control device. (98% for Thermal Oxidizer, 95% for Catalytic Oxidizer, 90% for Carbon Adsorption)
- ☐ Pilot test or other analytical analysis confirming inlet concentrations of contaminants to the control device.
- ☐ Attached copy of any government agency's order to remediate the site (if applicable).*
- ☐ Attached facility plot showing tank locations, property line and surrounding area up to 2,500 feet away. Identify all land uses in the area and highlight sensitive areas such as schools, residential areas, restaurants and shopping areas.
- ☐ List of all equipment, supporting manufacturer information and a process flow diagram for the equipment.
- ☐ Form -01 (*General Permit Application Form*) required for every permit application.
- ☐ Form -01A (*Authorized Agent Form*) attached if this application was prepared by and/or if correspondence is requested to be sent to an Authorized Agent (e.g., contractor or consultant). This form must accompany each application.
- ☐ Form -03 (*School Summary Form*) attached if the project's property boundary is within 1,000 feet of the outer boundary of a school (k-12) and you want to perform work during school hours.
- ☐ Form-15S (*Health Risk Assessment Screening Application Form*) required for every contaminated soil/groundwater cleanup project. Note that the HRA screening fee is not required as APCD costs will be assessed on an hourly basis.

* Submit both a paper and electronic PDF copy of these documents.

PLEASE NOTE THAT FAILURE TO COMPLETELY PROVIDE ALL REQUIRED INFORMATION OR FEES WILL RESULT IN YOUR APPLICATION BEING RETURNED OR DEEMED INCOMPLETE.

NOTICE OF CERTIFICATION:

All applicants must complete the following Notice of Certification. This certification must be signed by the Authorized Company Representative representing the property owner. Signatures by Authorized Agents will not be accepted.

NOTICE of CERTIFICATION

I, _____ , am employed by or represent

Type or Print Name of Authorized Company Representative

_____

Type or Print Name of Business, Corporation, Company, Individual, or Agency

(hereinafter referred to as the applicant), and certify pursuant to H&SC Section 42303.5 that all information contained herein and information submitted with this application is true and correct and the equipment listed herein complies or can be expected to comply with said rules and regulations when operated in the manner and under the circumstances proposed. If the project fees are required to be funded by the cost reimbursement basis, as the responsible person, I agree that I will pay the Santa Barbara County Air Pollution Control District the actual recorded cost, plus administrative cost, incurred by the APCD in the processing of the application within 30 days of the billing date. If I withdraw my application, I further understand that I shall inform the APCD in writing and I will be charged for all costs incurred through closure of the APCD files on the project.

For applications submitted for Authority to Construct, modifications to existing Authority to Construct, and Authority to Construct/Permit to Operate permits, I hereby certify that all major stationary sources in the state and all stationary sources in the air basin which are owned or operated by the applicant, or by an entity controlling, controlled by, or under common control with the applicant, are in compliance, or are on approved schedule for compliance with all applicable emission limitations and standards under the Clean Air Act (42 USC 7401 *et seq.*) and all applicable emission limitations and standards which are part of the State Implementation Plan approved by the Environmental Protection Agency.

I agree that as property owner I am ultimately responsible for all activities related to this project. This includes compliance, operations, and the oversight of authorized agents and equipment owners/operators. It is my responsibility, as the property owner, to notify the APCD using the Form APCD-01T of any change to the equipment operator, equipment owner, or authorized agent. within 30 days of the change.

Completed By: _____ Title: _____

Date: _____ Phone: _____

Signature of Authorized Company Representative _____