



ANNUAL PRODUCTION REPORT - ROCK, SAND AND GRAVEL PLANT
 NORTH DAKOTA DEPARTMENT OF HEALTH
 DIVISION OF AIR QUALITY
 SFN 51113 (11-10)

GENERAL INFORMATION

Name of Company		Year of Emissions	
Mailing Address	City	State	Zip Code
Permit to Operate Number	Plant ID Number	Actual Hours of Operation	

ROCK, SAND AND GRAVEL PLANT

Type: <input type="checkbox"/> Screening Only <input type="checkbox"/> Crushing and Screening	Capacity: <input type="checkbox"/> Permanent _____ ton/hr <input type="checkbox"/> Portable _____ ton/hr
Actual Throughput _____ tons	Is this less than the allowable throughput stated in the Permit to Operate under process restrictions? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is the plant subject to NSPS? <input type="checkbox"/> Yes (if constructed or modified after August 31, 1983) <input type="checkbox"/> No	
Equipment Changes: Have there been any changes in equipment since the last current permit was issued that would increase or decrease the throughput capacity of this plant? <input type="checkbox"/> Yes (If yes, explain on reverse side in detail) <input type="checkbox"/> No	

SITE LOCATION (PORTABLE SOURCES ONLY)

County	LOCATION				DATES	
	1/4	Section	Township	Range	From	To

I declare under the penalties of perjury that this report has been examined by me and to the best of my knowledge is a true, correct and complete report.

Print Name of Person Submitting Report	Title	Email
Signature	Telephone Number	Date

Return completed form to:
 North Dakota Department of Health
 Division of Air Quality
 918 E Divide, 2nd Floor
 Bismarck, ND 58501-1947
 Telephone: (701)328-5188

Provide additional information as necessary: