



**AIR POLLUTION CONTROL**  
**PERMIT RENEWAL/REGISTRATION APPLICATION**  
NORTH DAKOTA DEPARTMENT OF ENVIRONMENTAL QUALITY  
DIVISION OF AIR QUALITY  
SFN 60242 (3-2019)

Permit Number
Name of Firm/Organization
Name of Facility
Mailing Address
City/State/ZIP Code

As an authorized company representative, I certify that, to the best of my knowledge, the information contained on the attached renewal forms (Permit to Operate) and additional sheets is both complete and accurate. Changes in the process and any additions or deletions of source units and equipment have been annotated.

Comments:

Signature	Date
Name	Telephone Number
Title	
E-mail Address	

SEND COMPLETED APPLICATION AND ALL ATTACHMENTS TO:

North Dakota Department of Environmental Quality  
Division of Air Quality  
918 E Divide Avenue, 2nd Floor  
Bismarck, ND 58501-1947  
(701)328-5188