



The North Carolina Department of
Environment and Natural Resources

Division of Air Quality
Air Permits Section
Air Quality Analysis Branch

For DAQ Use ONLY
Date Received _____
Permit # _____
Premise # _____
Date Issued _____

**Application for a Permit to Construct
or Modify a Transportation Facility ***

PLEASE TYPE OR PRINT IN INK

Filed by: _____

APPLICATION INSTRUCTIONS

THIS APPLICATION IS NOT COMPLETE UNLESS ALL REQUIRED INFORMATION IS SUBMITTED.

1. PRINT OR TYPE ONLY. For assistance, call the Division of Air Quality at (919) 733-3340.
2. Submit three (3) copies of the application, engineering drawings, specifications, other supporting data and documents, along with the \$400 application fee to:

N.C. Division of Air Quality
Air Permits Section/Air Quality Analysis Branch
1641 Mail Service Center
Raleigh, North Carolina 27699-1641

3. All permit applicants must complete Part I. Parking facility applicants must complete Part II for each parking lot or deck to be permitted. Airport applicants must complete Part III, and if appropriate, Part II.
4. Three (3) copies of the traffic study and/or modeling analysis must be submitted with all permit applications. When modeling is required, a modeling plan must be submitted and approved prior to submitting modeling.

* Transportation Facility is defined as a Complex Source.

Part I - Transportation Facility Air Permit Application*

Site Location:

Date: _____

Latitude: _____

1) _____
Permittee (responsible individual, facility owner)

Longitude: _____

2) _____
Facility Name (company, establishment, town, etc.)

(Area code) phone number

3) _____
Site Location (St./Rd./Hwy.)

City Zip Code County

4) _____
Mailing Address (P.O. Box/St./Rd./Hwy.)

City Zip Code County

5) _____
Company Contact Title

(Area code) phone number

_____ Air Quality Analysis Contact Title

(Area code) phone number

6) Description of Application (check one):

- Alteration of / addition to an existing facility or development
- Ownership change of an existing facility or development
- New facility or development (to be constructed)
- Other (please specify) _____

7) Include the following information with the permit application and facility data supplement(s):

- (a) A dimensioned drawing of the facility showing vehicle entrance and exit orientations and all stopping/ yielding conditions. Indicate all proposed lane changes or additions and all existing/proposed signals.
- (b) A current and projected (project completion) map of local streets, expressways, freeways, stop/yield conditions, parking facilities, and sensitive areas (discrete receptor locations, such as: day care centers, recreational parks, retirement homes) within a minimum of one half mile radius of the proposed site to include all intersections. Identify nearby land uses. Indicate direction of north arrow and include an overlay of the modeling coordinate system.
- (c) A modeling analysis and/or traffic study analysis to demonstrate compliance with the National Ambient Air Quality Standard for carbon monoxide. Contact the Air Quality Analysis Branch in Raleigh to discuss specific modeling requirements.

8) Complete all applicable facility data supplements (Parts II and/or III).

9) _____
Signature of responsible party or company official

_____ Date

10) _____
Name (type or print) of person signing Title

_____ (Area code) phone number

* To construct or modify a Transportation Facility (complex source) in accordance with N.C. General Statutes Article 21, Chapter 143 and NCAC 15A 2Q .0800 and NCAC 15A 2Q .0600.

Part II - Parking Facility Supplement

Fill out a separate data sheet for each parking lot or deck to be permitted.

1) _____
Facility Name or ID Number

2) _____
Description of Operation or Primary Usage

3) _____
Technical Contact Title (Area Code) Phone

4) _____
Construction Start Date

5) _____
Operation Start Date (Date of Project Completion)

6) Type of parking facility (check one): Open Lot Parking Deck

7) Operation Data

	Existing	Proposed*
(a) Hours per day of operation		
(b) Busiest hour(s) of the day		
(c) Busiest day(s) of the year		
(d) Number of vehicles entering or leaving (Volume per Peak Hour)		

8) Parking Facility Data

	Existing	Proposed*
(a) Number of Parking Levels		
(b) Parking Capacity (total # of spaces)		

	Size (sq. ft.)	Elevation (ft)	Number of Spaces Existing	Number of Spaces Proposed*
Lot/Level1				
Level 2				
Level 3				
Level 4				
Level 5				
Level 6				
Level 7				
Level 8				
Level 9				
Level 10				

(c) Number of Entrances to Proposed Lot/Deck _____

(d) Number of Exits from Proposed Lot/Deck _____

*Proposed numbers should include existing plus new additions.

Part III - Airport Supplement

**Fill out a separate data sheet for each facility to be permitted.
Also fill out a separate Parking Facility Supplement (Part II)
for each parking lot or deck to be permitted.**

- 1) _____
Facility Name or ID Number
- 2) _____
Description of Operation
- 3) _____
Technical Contact Title (Area Code) Phone
- 4) _____
Construction Start Date
- 5) _____
Operation Start Date
- 6)

Airport Facility Data

	<u>Existing</u>	<u>Proposed*</u>
(a) Annual Aircraft Operations**	_____	_____
(b) Peak Hour Aircraft Operations**	_____	_____

*Proposed numbers should include existing plus new additions.

**One operation equals one takeoff or one landing.