



**Minnesota Pollution
Control Agency**

520 Lafayette Road North
St. Paul, MN 55155-4194

NM-RE

**Location Notification – Nonmetallic Mineral
Processing General Permit**
Air Quality Permit Program

Doc Type: Notifications

Instructions

Please provide the following information about your nonmetallic mineral processing stationary source. Submit a copy of this form to the Minnesota Pollution Control Agency (MPCA) at the time of application for each stationary source location to be covered by this general permit and at least 48 hours in advance of each change in location of a stationary source, establishment of a new stationary source location, or change in a capacity/dust control option at an individual stationary source. Keep in mind that if the construction, modification, or operation of a nonmetallic mineral processing stationary source by the permittee would not comply with all conditions of this general permit, the permittee must apply for and obtain an individual part 70, state, or registration permit before beginning the actual construction, modification, or operation of the stationary source.

Mail, fax, or email this notice to the MPCA at the following address/phone number:

Beckie Olson
Air Quality Permits Program
Minnesota Pollution Control Agency
520 Lafayette Road North
St. Paul, Minnesota 55155-4194
Fax: 651-205-4592
E-mail: beckie.olson@state.mn.us

Location Information

- 1) Company name: _____
- 2) Facility (Plant) name/no.: _____
- 3) AQ Permit No. (if applicable): _____
- 4) New location of plant
County and nearest city/town: _____
Section, township, range: _____
Nearest crossroads to the plant: _____
Provide detailed directions from crossroads to plant or send plot map showing location: _____

- 5) Dates plant expected to operate at new location: from _____ to _____
- 6) Determine which dust control option you are required to follow in the permit using information from the Stationary Source Designation Matrix – Table 1 or Table 2. The Matrix is found on Form NM-00, and in the Nonmetallic Mineral Processing General Permit.
 - a. Check one: ☐ Small ☐ Medium ☐ Large
 - b. Check one and fill in number of crushers / screens / transfer operations:
☐ Number (Table 1): ____/____/____ or ☐ Cumulative Capacity (Table 2): ____/____/____
 - c. Annual Production Limit (tons): _____
- 7) Contact information of person submitting form:
Name (print): _____
Phone number: _____
Date: _____