FORM AQGP-126 – Plating and Polishing
APPLICATION FOR GENERAL AIR CONTAMINANT DISCHARGE PERMIT OR ATTACHMENT

FOR LRAPA USE ONLY	
Permit Number:	Type of Application:
Application No:	**REASSIGNMENT** ☐ **NEW** ☐
Date Received :	**Check No.** **Amount $**

1. Company	**2. Facility Location**
Legal Name:	Name:
Mailing Address:	Street Address:
City, State, Zip Code:	City, County, Zip Code:
Number of employees:	
3. Site Contact Person	**4. Standard Industrial Classification Code(s)**
Name:	Primary:
Title:	Secondary:
Telephone number:	**5. Other LRAPA Permits**
Fax. number:	
e-mail address:	

6a. General Air Contaminant Discharge Permit:

☐ Yes ☐ No	Check yes if all of the following apply: • My facility performs one or more of the following plating and polishing activities: electroplating, non-electrolytic plating, non-electrolytic metal coating processes, thermal spraying, dry mechanical polishing, electroforming, and electropolishing. • My facility uses or has emissions of one or more plating and polishing metal hazardous air pollutants (HAP). Plating and polishing HAPs are compounds of cadmium, chromium, lead, manganese, and nickel, or any of these metals in the elemental form with the exception of lead.	Annual Fee: LRAPA Title 37
<u>If yes</u>, proceed to section 6b. You are subject to AQGP-026 (plating and polishing operation permit). LRAPA will invoice you for a pro-rated amount of the applicable annual fee in either 6a or 6b. **<u>If no</u>**, you are not subject to AQGP-026 (plating and polishing operation permit) and are not required to submit a permit application.		

6b. General ACDP Attachment:

☐ Yes ☐ No	Are you currently assigned to a General Air Contaminant Discharge Permit for other non-plating and polishing activities at your facility and the permit has an annual fee of Class One or higher? If so, you will be assigned an attachment to your existing General Permit instead of getting a second general permit. Existing source number: _____	Annual Fee: LRAPA Title 37

7. Signature

I hereby apply for permission to discharge air contaminants in Lane County, Oregon, as stated or described in this application, and certify that the information contained in this application and the schedules and exhibits appended hereto, are true and correct to the best of my knowledge and belief.

_____	_____
Name of official (Printed or Typed)	Title of official and phone number
_____	_____
Signature of official	Date

SUBMIT COPY OF:

1. **THE COMPLETED APPLICATION, AND**
2. **A LAND USE COMPATIBILITY STATEMENT (LUCS)**

To:
permitting@lrapa-or.gov

Call (541) 736-1056 with any questions.