

MOJAVE DESERT AIR QUALITY MANAGEMENT DISTRICT

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www.MDAQMD.ca.gov • @MDAQMD



Application for spray booth and/or paint spray gun only

Remit **\$302.00** with this document (\$172.00 for change of owner)

PLEASE TYPE OR PRINT

Section 1: Owner information

a. Permit to be issued to (company name):			b. Federal tax ID #:	
c. Mailing/billing address (for above company name) <i>include city, state and zip code:</i>				
d. Facility or business license name (for equipment location):				
e. Facility Address — Location of equipment (if same as for company, enter "Same"):			Equip. coordinates (lat/long):	
f. Contact name:		Title:	Email address:	Phone:
General nature of business:			Company NAICS:	
Type of Organization <input type="checkbox"/> Individual owner <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Utility <input type="checkbox"/> Local agency <input type="checkbox"/> State agency <input type="checkbox"/> Federal agency				

Section 2: Nature of application

Application is hereby made for the following equipment:	
Application is for what type of permit: <input type="checkbox"/> New construction <input type="checkbox"/> Modification <input type="checkbox"/> Change of owner	For modification or change of owner: _____ Current Permit Number
Do you claim Confidentiality of Data? _____ No _____ Yes (attach explanation; specify which information provided is confidential)	

Section 3: Operation information

Facility annual operation by quarters (percent): <input type="checkbox"/> Uniform OR _____ % Jan-Mar _____ % Apr-Jun _____ % Jul-Sep _____ % Oct-Dec	Expected operating hours of equipment _____ Hrs/day _____ Days/wk _____ Wk/yr Total annual hours _____
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Section 4: Equipment information

Manufacturer: _____	Model: _____	Serial No.: _____
Booth dimensions (specify units): W _____ by L _____ by H _____		
<input type="checkbox"/> Open spray (gun) <input type="checkbox"/> Automotive booth <input type="checkbox"/> Bench type booth <input type="checkbox"/> Floor type booth		
Exhaust fan (if present): Rating (hp): _____ Fan diameter (inches): _____		
Manometer across exhaust filters? <input type="checkbox"/> yes <input type="checkbox"/> no		Minimum pressure drop: _____ inches H2O

Section 5: Filters information

	Type and material	Number	Width	Length	Thickness
Inlet	_____	_____	_____	_____	_____
Exhaust first stage	_____	_____	_____	_____	_____
Exhaust second stage	_____	_____	_____	_____	_____
Exhaust third stage	_____	_____	_____	_____	_____

-For District use only-

Application number:	Invoice number:	Permit number:	Company/facility number:
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Section 6: Application information

Article sprayed (check all that apply): Aerospace Architectural Metal Plastic Composite Wood
 Motor vehicle Other (specify): _____

Minimum size of articles sprayed (feet): _____ width _____ length _____ height

Method of application (check all that apply): Air atomization Pressure atomization (airless) Combined air and airless
 Electrostatic High volume low pressure (HVLP) Hand Other (specify): _____

Gen or spray system cleaning method: Enclosed gun cleaning system open flush manual wipe Other, (specify): _____

Section 7: Disposition

Air dried oven dried, baked or cured (specify below) Part of booth Separate enclosure
 Oven (if present) is: Gas-fired Electric Maximum heat input (Btu/hr): _____

Section 8: Materials information

Please include the MSDS for each coating and solvent to be used with the application submission.

Type	VOC content lb/gal or gm/liter	Vapor pressure mmHg @ 20°	Maximum use gal/l per day	Maximum use gal/l per year
Enamel	_____	_____	_____	_____
Topcoat	_____	_____	_____	_____
Primer	_____	_____	_____	_____
Sealer	_____	_____	_____	_____
Stain	_____	_____	_____	_____
Added Thinner	_____	_____	_____	_____
Clean-up solvent	_____	_____	_____	_____
Surface preparation solution	_____	_____	_____	_____
Other: _____	_____	_____	_____	_____
Other: _____	_____	_____	_____	_____

Section 9: Receptor information

Distance (feet) and direction to the property line of closest: _____ residence _____ business _____ school
 Name of closest school (K-12) _____

If the proposed equipment operates within 1,000 feet of a school site and operation results in the emission of hazardous air pollutants, a public notice will be required at the expense of the applicant (CH&S §42301.6)

***Please note:** District staff may contact you for further information. Failure to provide additional information as requested in a timely manner may result in delays in the processing of this permit application.

Section 10: Certification

I hereby certify that all information contained herein is true and correct.

 Name of responsible official Official title Signature of responsible official Date signed

Phone: _____ Email: _____

Application submission instructions:

- 1) Submit completed application to Engineering@mdaqmd.ca.gov
- 2) Pay the corresponding application fee of \$302 per permit for new or modified permit (or \$172 for change of owner) via check or credit card.

Payment by check:

Make check payable to the Mojave Desert AQMD
 Mail the check with a copy of this completed application to:

Mojave Desert AQMD
 14306 Park Avenue
 Victorville, CA 92392

Payment by credit card:

Pay online at <http://www.mdaqmd.ca.gov>
 Click "Pay Fees"

Please note: *a surcharge applies for all credit card payments.*

- 3) If payment is made online via credit card, please email the receipt to Engineering@mdaqmd.ca.gov
 Should you have any additional questions, please, do not hesitate to contact the permitting division at 760-245-1661, or via email at engineering@mdaqmd.ca.gov