



Form No.	A-L-0029
Effective Date	3/16/2009
Revision No.	001
Last Revision Date	7/1/2008
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**CHAPTER 149**  
**NONMETALIC MINERAL PROCESSING PLANTS**  
**CRUSHER IDENTIFICATION NUMBER APPLICATION**

State of Maine  
Department of Environmental Protection  
Bureau of Air Quality  
17 State House Station  
Augusta, Maine 04333-0017  
phone: (207) 287-2437 fax: (207) 287-7641

**Section A: FACILITY INFORMATION**

**Company Name as  
Registered with Secretary of State:**

**Application Contact**

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

e-mail: \_\_\_\_\_

**Billing Contact**

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

e-mail: \_\_\_\_\_

For Office Use Only	
CIN	
Check No.	
Date Received	
Date Letter Sent	
Initials	



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## Section B: EQUIPMENT INFORMATION

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**\*\*Please fill out a separate page for each piece of equipment (ex. primary crusher, secondary crusher, tertiary crusher). The annual fee is \$100 per piece of equipment, Payable to Treasurer, State of State.\*\***

---

Unique ID (optional) \_\_\_\_\_ Is this a serial number?  yes  no  
**(Either the CIN assigned by the DEP or the ID listed above must be permanently affixed to the crushing equipment)**

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Crusher Type:  Cone  Jaw  Other

---

Maximum Process Rate (ton/hr) \_\_\_\_\_  Portable  Stationary

---

Date of Manufacture: \_\_\_\_\_

---

Has a certified compliance test been performed on this crusher?  yes  no

---

If yes, date of last compliance test: \_\_\_\_\_

---

Water Sprays?  yes  no

---

Other Control Equipment? \_\_\_\_\_

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### Section C: SIGNATORY REQUIREMENT

Each application submitted to the Department must include the following certification signed by a Responsible/Authorized Official:

"I certify under penalty of law that I have personally examined the information submitted in this document and all attachments thereto and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the information is true, accurate, and complete. I authorize the Department to enter the property that is the subject of this application, at reasonable hours, including buildings, structures or conveyances on the property, to determine the accuracy of any information provided herein. I am aware there are significant civil and criminal penalties for submitting false information, including the possibility of fine and imprisonment."

Signature \_\_\_\_\_ Date \_\_\_\_\_

Name Printed \_\_\_\_\_ Title \_\_\_\_\_