

**RULE 403 - LARGE OPERATION NOTIFICATION**  
**SOUTH COAST AIR QUALITY MANAGEMENT DISTRICT**  
 21865 Copley Drive, Diamond Bar, CA 91765

Is this plan being submitted to comply with the requirements of a Notice to Comply or Notice of Violation? **YES/NO**  
 Notice Number \_\_\_\_\_ Please attach copy

**Qualifying Criteria:**

1. Does this operation contain more than 50 acres of disturbed surface area as of the date of submittal? **YES/NO**  
 Please indicate the size of the project \_\_\_\_\_.
2. Will the earth moving operation exceed a daily earth moving or throughput volume of 5,000 cubic yards three times during the most recent 365-day period from the date grading begins? **YES/NO**

**Please Print or Type**

|   |              |                                     |             |
|---|--------------|-------------------------------------|-------------|
| <b>Contractor/ Consultant/ Owner:</b><br>(Circle one of the above)  |              | <b>Phone Number:</b>                |             |
| <b>Address:</b>   | <b>City:</b> | <b>State:</b>                       | <b>Zip:</b> |
| <b>Project Name:</b>  |              |                                     |             |
| <b>Nature of Business:</b> <input type="checkbox"/> Construction/Demolition <input type="checkbox"/> Sand & Gravel/Mining Operations <input type="checkbox"/> Cement Manufacturing  |              |                                     |             |
| <b>Name of Responsible Person of Organization:</b>  |              |                                     |             |
| <b>Title:</b>   |              | <b>Phone Number:</b>                |             |
| <b>Environmental Observer:</b>  |              | <b>Phone Number:</b>                |             |
| <b>Date Attended Dust Class:</b>  |              | <b>ID Number:</b>                   |             |
| <b>Project Address:</b><br>(Attach location map)  | <b>City:</b> | <b>State:</b>                       | <b>Zip:</b> |
| <b>Name of Property Owner:</b><br>(If different than above)   |              |                                     |             |
| <b>Anticipated Start Date:</b>  |              | <b>Anticipated Completion Date:</b> |             |
| <b>Telephone Number:</b>  |              |                                     |             |
| <b>Emergency Phone Number:</b>  |              |                                     |             |
| <b>In accordance with paragraph (e)(1) of Rule 403, I will ensure that the actions specified in Tables 2 and 3 will be implemented on-site for each applicable fugitive dust source type within the property lines and that records are maintained in accordance with Rule 403, subparagraph (e)(1)(c) . Further, I hereby certify that all information contained herein is true and correct.</b> |              |                                     |             |
| <b>SIGNATURE OF RESPONSIBLE MEMBER OF ORGANIZATION</b>  | <b>TITLE</b> | <b>DATE</b>                         |             |
|   |              |                                     |             |