

Fugitive Dust Control Plan Application Form  
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*Please print in ink or type. Blank spaces must be completed for the application to be processed. If an item is not applicable, please enter N/A.*

**1. Form Preparer:** Property Owner  Developer  Prime Contractor  Other \*  
 \*(If Other, attach Owner Designee Form [Page 3-8])\*

<b>CONTACT PERSON NAME</b>	
<b>COMPANY NAME</b>	
<b>COMPANY ADDRESS</b>	
<b>CITY, STATE, ZIP CODE</b>	
<b>TELEPHONE NUMBER</b>	
<b>FACSIMILE NUMBER</b>	
<b>24-HOUR, MANNED AFTER HOURS PHONE NUMBER</b>	
<b>SOUTH COAST AQMD DUST CLASS CERTIFICATE #</b>	

**2. Project Address or Location**

<b>PROJECT NAME</b>	
<b>PROJECT ADDRESS</b>	
<b>CITY, STATE, ZIP CODE</b>	
<b>NEAREST MAJOR CROSS STREETS</b>	
<b>PARCEL NUMBERS</b>	

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**3. Project Acreage (total land to be disturbed)**

(Include project site and associated unpaved access roads, stockpiles, and staging areas)

<b>PROJECT SIZE (ACRES)</b>	
<b>WATER SOURCE (GPM)</b>	

**4. Project Owner (if Fugitive Dust Control Plan preparer is not the property owner)**

<b>NAME</b>	
<b>COMPANY NAME (IF APPLICABLE)</b>	
<b>ADDRESS (INCLUDE CITY, STATE, &amp; ZIP CODE)</b>	
<b>TELEPHONE NUMBER</b>	
<b>FACSIMILE NUMBER</b>	

**5. The Person(s) responsible for dust control measures and to whom official notices should be sent if necessary**

<b>RESPONSIBLE PERSON</b>	
<b>COMPANY NAME</b>	
<b>ADDRESS (INCLUDE CITY, STATE, &amp; ZIP CODE)</b>	
<b>TELEPHONE NUMBER</b>	
<b>24-HOUR, MANNED AFTER-HOURS TELEPHONE NUMBER</b>	
<b>FACSIMILE NUMBER</b>	
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**6. On-Site Superintendent/Supervisor/Foreman contact**

<b>NAME</b>	
<b>COMPANY NAME</b>	
<b>ADDRESS (INCLUDE CITY, STATE, &amp; ZIP CODE)</b>	
<b>TELEPHONE NUMBER</b>	
<b>24-HOUR, MANNED AFTER-HOURS TELEPHONE NUMBER</b>	
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**7. Site Mapping**

Provide a map showing the vicinity of the project clearly identifying the closest major cross streets or other landmarks and the project location. Label this map “**Vicinity Map**”. Required map size is 8 ½ by 11”.

Provide an 8 ½ by 11” or larger **Assessor Parcel Map** for the property(s) on which the project will be occurring. Outline or highlight the affected parcels. Identify location of site entrances, internal unpaved haul routes, wind fencing, areas to be chemically stabilized and other proposed and required dust control mitigations. Projects that are only installing or constructing linear features such as roads, pipelines or other utilities that boarder or cross more than one Assessor’s parcel do not require Assessor’s Parcel Maps, but must provide a detailed vicinity map adequately depicting the entire project area. If the project is divided into construction phases (separate physical project areas), provide a map clearly identifying the phases.

**8. Attach a Fugitive Dust Control Plan**

- ✓ Projects with less than 10 acres of disturbed surfaces must complete and attach a Fugitive Dust Control Plan (Form DCP) or equivalent.
- ✓ Projects with 10 acres or more of disturbed surfaces must complete and attach a Site-Specific Fugitive Dust Control Plan. Guidance for preparation of a Site-Specific Fugitive Dust Control Plan is included later in this Chapter.

**9. Project notifications**

For projects with 10 acres or more of disturbed surfaces, the dust control ordinance requires notification to the local permitting authority and to the South Coast AQMD prior to project initiation and at project completion. (Refer to Chapter 4 of this Handbook for specific requirements and forms).

**10. Project Signage**

Construction signage must be installed on-site prior to construction. Guidelines for construction signage are found in Chapter 5 of this Handbook.

**11. Owner Agreement**

**The signatory on this application constitutes an agreement by the owner to be the person with authority to enforce compliance by all contractors and subcontractors of the Dust Control Ordinance, Fugitive Dust Control Plan conditions, and any supplements identified by the permitting authority. Once approved, this application is incorporated by reference and becomes apart of the approved site grading plan.**

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Owner Signature Date

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Printed Name Title and Company

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South Coast AQMD Coachella Valley Fugitive Dust Control Class Certificate #