MARYLAND DEPARTMENT OF THE ENVIRONMENT
Air and Radiation Administration ● Air Quality Permits Program
1800 Washington Boulevard ● Baltimore, Maryland 21230
(410)537-3230 ● 1-800-633-6101● www.mde.maryland.gov

FORM 41
PERMIT TO CONSTRUCT APPLICATION FOR PORTABLE CRUSHING AND/OR SCREENING EQUIPMENT AT TEMPORARY SITES

1. Eligibility for a Temporary Site Permit

a. You **must** check off **all** of the following items to use this application form.
- ☐ A finite amount of material already located and generated by operations on the site will be crushed/screened.
- ☐ No new material generated by operations on the site will be crushed/screened.
- ☐ No material generated off-site will be crushed/screened.

b. You **must** check off **one** of the following items to use this application form.
- ☐ Material has never been crushed/screened at the site.
- ☐ It has been at least three years since material was crushed/screened at the site.
  Date materials were last crushed/screened at the site: _____

2. Temporary Job Site Location

Temporary Job Site Location Name: _____
Temporary Job Site Street Address: _____
Temporary Job Site City/State/Zip Code: _____

3. Equipment Owner and Operator Information

Owner Name: _____
Owner Street Address: _____
Owner City/State/Zip Code: _____

4. Contact Information

Contact Name: _____
Job Title: _____
Phone Number: _____
Email Address: _____

5. Workers' Compensation Coverage Information

Before a Permit to Construct may be issued by the Department, the applicant must provide the Department with proof of worker's compensation coverage as required under Section 1-202 of the Workers' Compensation Act.

Company Name: _____
Binder/Policy Number: _____ | Expiration Date: _____

6. Temporary Job Site Description

Check all that apply.
- ☐ Demolition project (describe) _____
  Examples: Removal of department store at South Mall or Demolition of parking garage at Milton Business Complex
- ☐ Site development – crushing/screening of in-situ stone
- ☐ Waste concrete generated at a concrete batch plant
- ☐ Other processing of finite amount of material generated by operations on-site
  (describe) _____

Material to be crushed/screened (describe) _____
Estimated total tons of materials to be crushed/screened _____

7. Operating Schedule

Projected Start Date: _____
Projected End Date: _____
Hours per Day: _____
Days per Week: _____

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Total Number of Days: ____

8. Crushing and Screening Equipment Information

Crusher	Screen	Manufacturer/Model	Capacity (tons per hour)
☐	☐	____	____
☐	☐	____	____
☐	☐	____	____

Total number of conveyors on-site ____

Engine Information

Diesel	Gasoline	Manufacturer/Model	Horsepower	Fuel Usage (gallons/month)
☐	☐	____	____	____
☐	☐	____	____	____
☐	☐	____	____	____

9. Dust Suppression Information

Dust from the equipment, roads, stockpiles, and materials handling operations MUST be controlled. Check all that apply.

☐ Wet Suppression on Equipment (crushers and screens)
☐ Wet Suppression on Stockpiles
☐ Flush/sweep paved roads
☐ Water on unpaved roads
☐ Truck washing station
☐ Other (describe) ____

☐ Work Practices:
- ☐ Avoid overfilling front-end loaders
- ☐ Minimize drop height of material when loading trucks or stockpiles
- ☐ Minimize working of stockpiles especially on windy or dry days
- ☐ Remove debris and spillage from on and around the plant
- ☐ Post signs and control speed of all vehicles

10. Required Supplemental Documents

☐ Vendor literature for all equipment (crushers, screens, conveyors, engines), including maximum rated capacity and maximum engine horsepower

☐ Sketch or aerial photograph of the job site

11. Responsible Party Certification Statement

"I CERTIFY UNDER PENALTY OF LAW THAT THE INFORMATION SUBMITTED IN THIS REQUEST FOR COVERAGE IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS."

Responsible Party Signature **Date**

Printed Name and Title

For ARA Use Only

Date Received:	
Date Reviewed:	
Reviewed By:	
ARA Premises Number:	
Associated ARA Registration Number or Numbers:	