

# Great Basin Unified Air Pollution Control District CONSERVATION MANAGEMENT PRACTICES PLAN APPLICATION

## GENERAL INFORMATION

A Conservation Management Practices (CMP) plan is a requirement for all agricultural operation sites as specified in Section 5.0 of District Rule 502. The goal of this CMP plan is to reduce sources of PM<sub>10</sub> emissions from agricultural operations. Attach CMP-A, B, C and all other applicable CMP Supplemental Application Forms to this sheet. By signing below, the applicant agrees to implement all Conservation Management Practices checked on the attached sheets. **A fee of \$165 is due with submittal of this plan** to cover the District's cost of plan processing and field inspection for the first year.

Name of Facility: \_\_\_\_\_

Facility Location: \_\_\_\_\_

Total Farm Acreage: \_\_\_\_\_

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

City/State/Zip code: \_\_\_\_\_

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

Other (Cell): \_\_\_\_\_ E-mail: \_\_\_\_\_

Person Responsible: \_\_\_\_\_ Title: \_\_\_\_\_

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

**Please list the following information for the persons responsible for:**

**Plan Preparation:**

Same as Person Responsible Above?

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

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

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

City/State/Zip code: \_\_\_\_\_

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

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

Other (Cell): \_\_\_\_\_

**Plan Implementation:**

Same as Person Responsible Above?

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

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

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

City/State/Zip code: \_\_\_\_\_

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

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

Other (Cell): \_\_\_\_\_

### FOR DISTRICT USE ONLY

This CMP plan application has been verified to contain all supporting information required by the APCO to evaluate the application.  CMP-A, B and C attached.  All other appropriate CMPs attached.  Fee paid. Date: \_\_\_\_\_

Reviewer: \_\_\_\_\_ Initials: \_\_\_\_\_ Date: \_\_\_\_\_

APCO approval: \_\_\_\_\_ Date: \_\_\_\_\_