

**Air Pollution Control District  
Annual Survey Form  
Source Type - Aggregate Processing**

**Please answer all of the following questions**

Company Name \_\_\_\_\_  
Company Location \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
Company Contact \_\_\_\_\_ Telephone \_\_\_\_\_  
E-mail \_\_\_\_\_

- 1) Calendar year of the information reported: 20\_\_\_\_\_
- 2) Operating schedule: Hrs/Day\_\_\_\_\_ Days/Week\_\_\_\_\_ Weeks/Yr \_\_\_\_\_
- 3) Total hours of operation during the calendar year \_\_\_\_\_

Indicate the number and type of equipment that your company owns or operates at this site and which production equipment is vented to controls:

4) Production Equipment	5) Controlled	6) Pollution Control Equipment
Storage Piles _____	_____	Baghouse _____
Jaw Crushers _____	_____	Water sprays _____
Cone Crushers _____	_____	Water truck _____
Conveyors _____	_____	Other specify _____
Stackers _____	_____	
Screens _____	_____	
Trucks _____	_____	
Loaders _____	_____	

- 7) Aggregate production (tons/hour): average \_\_\_\_\_ maximum \_\_\_\_\_
- 8) Aggregate production (tons/year) \_\_\_\_\_
- 9) Sand production (tons/hour): average \_\_\_\_\_ maximum \_\_\_\_\_
- 10) Sand production (tons/year) \_\_\_\_\_
- 11) Crushing operations (tons/hour): average \_\_\_\_\_ maximum \_\_\_\_\_
- 12) Crushing operations (tons/year) \_\_\_\_\_
- 13) Average moisture content of sand or aggregate (%) \_\_\_\_\_
- 14) Length of unpaved haul roads (miles) \_\_\_\_\_
- 15) If blasting is done, indicate the number of blasts per year \_\_\_\_\_
- 16) Exhaust airflow rate to air pollution control equipment (CFM) \_\_\_\_\_

**Use the back of this form for additional comments or clarification.**