



**Kansas Department of Health and Environment  
Division of Environment  
Bureau of Air and Radiation**

**NSPS NOTIFICATION for ROCK CRUSHERS**

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

- 1) Source ID #: \_\_\_\_\_
- 2) Company/Source Name: \_\_\_\_\_
- 3) Address (Location): \_\_\_\_\_
- 4) Contact Person(s): \_\_\_\_\_
- 5) 40 CFR 60 Subpart: OOO
- 6) Subject Equipment: \_\_\_\_\_
- 7) Site ID #: \_\_\_\_\_
- 8) Site Location of Equipment: \_\_\_\_\_
- 9) C #: \_\_\_\_\_

**ACTION AND REQUIRED TIME PERIOD**

**DATE OF ACTION**

_____ Actual equipment start-up (within 15 days after) . . . . .	_____
_____ Maximum production achieved (within 15 days after) . . .	_____
_____ Scheduled performance test (7 days prior) . . . . .	_____
_____ Date of Actual Performance Test . . . . .	_____
_____ Performance test report submitted (within 30 days) . . . . .	_____

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Return completed forms to:** Air Compliance and Enforcement Section

1000 SW Jackson, Suite 310  
Topeka, Kansas 66612-1366