



**WESTCHESTER COUNTY DEPARTMENT OF HEALTH
GUIDELINES FOR FILING APPLICATIONS FOR AIR
CONTAMINATION SOURCES
PORTABLE ROCK CRUSHING EQUIPMENT**

APPLICATIONS FOR PERMIT TO CONSTRUCT AND CERTIFICATE TO OPERATE

Description: Prior to the operation of a portable rock crushing equipment, approval must be secured from the Westchester County Department of Health.

Applicable Codes: Chapter 873, Article XIII, Sections 873.1303.1 and 873.1306.1 of the Laws of Westchester County.

Fees: Chapter 873, Article XXI of the Laws of Westchester County

When requesting approval to operate a portable rock crushing equipment pursuant to the above provision, the following list serves as the minimum filing requirements.

1. A licensed Professional Engineer licensed and registered to practice in the State of New York must prepare applications.
2. Application fees of **\$4,800.00** which consists of one time processing fees of **\$1,200.00** and operation permit fee of **\$1,200.00** for each year of the three-year operation cycle. Check shall be made out to Westchester County Department of Health. Since operational fees are on a fixed three-year cycle, contact the Department for appropriate pro-rated fee amount.
3. A letter of Authorization bearing the original signature of the owner or owner's representative authorizing the Professional Engineer to file applications and plans on behalf of owner.
4. If the owner is a corporation, the Certificate of Resolution for Authorization form should be completed, signed, and notarized. This form is for the corporation to authorize an employee (not the engineer) to sign the application documents on its behalf. Form can be found on our website at: (http://health.westchestergov.com/images/stories/pdfs/CertificateResolution_2010.pdf)
5. Environmental Assessment Form.
6. Provide calculation details for air emissions generated from the Power Generator, Rock Crusher(s), Stockpiles, and Screener(s).
7. Proof of Workers' Compensation Insurance (Form C-105.2, U-26.3, SI-12, or SIG-105.2) and Proof of Disability and Paid Family Leave Benefits Insurance (Form DB-120.1 or DB-155) for the Facility Owner. Contact your insurance carrier to obtain these forms. If your facility does not require insurance coverage, please visit the workers compensation board's website (<https://www.wcb.ny.gov>) and request a Certificate of Attestation of Exemption, Form CE-200. Upon completion of the form online, print up certificate, sign, date, and submit to this department.
8. One (1) copy of Westchester County Department of Health Application for Certificate to Construct and Operate (Form R) with all relevant items completed.

Note: In addition, a permit from the NYSDEC may be required. Contact the NYSDEC at (914) 428-2505 ext. 363 (Maria Antoniou).

Questions may be directed to the Air Quality Program, Natasha Court, PE, Associate Engineer at (914) 864-7278 or Gregory Toothill, PE, Senior Engineer at (914) 864-7299.

Please submit completed applications to:

Westchester County Department of Health
Bureau of Environmental Quality
25 Moore Avenue
Mount Kisco, NY 10549
Attention: Air Quality Program