

RIETH-RILEY CONSTRUCTION Co., Inc.

100% Quality • 100% Employee Owned • Over 100 Years

8-2-22

Mr. Shane Nixon
EGLE, AQD
Cadillac District
120 West Chapin St. Cadillac, MI 49601

RE: Response to July 26, 2022, VN

Mr. Nixon:

Kasson Sand and Gravel ("Kasson") is in receipt of the Violation Notice ("VN") dated July 26, 2022, concerning the Compliance Evaluation Inspection ("CEI") at the Kasson facility located at 10282 South Pierce Rd, Maple City MI. 49664

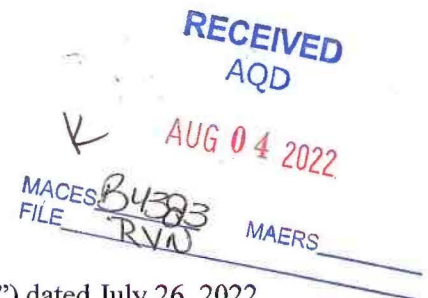
To resolve the VN, there is a signed hard copy of the revised PTI included in this package, as well as copies of the VE readings taken on each piece of equipment. Two (2) complete sets of documents have been sent to Lansing as well, for the enforcement and permits sections.

Please contact me at (574) 532-0032 if you need further documents, have any questions, or wish to discuss this matter further.

Respectfully,


John Berscheit

Technical Services Manager
Office 574-875-5183
Fax 574-875-8405
Cell 574-532-0032
jberscheit@rieth-riley.com





GENERAL PERMIT TO INSTALL APPLICATION

FOR EGLE USE ONLY

PERMIT NUMBER

PROCESS INFORMATION - NONMETALLIC MINERAL CRUSHING (PAGE 1 OF 2)

Authorized under 1994 PA 451, as amended. Completion of form is required. Applicant may be subject to civil and/or criminal penalties for providing false information.

Instructions: Use this form to request authority to install and operate a nonmetallic mineral crushing facility, under the terms and conditions of a general permit to install pursuant to Rule 201a. If two or more primary crushers operate in parallel, each constitutes a separate facility. Complete a separate copy of this form for each facility. Prepare and submit this form with the General Information form (EQP5727). **For a Modification:** Complete Items 1 - 9. Identify all existing and new or additional process equipment. Certify and submit pages 1 and 2 of this form to the Permit Section and the appropriate district office. See map for district office locations.

1. FACILITY CODE STATE REGISTRATION NUMBER (SRN) B 4 3 8 3		2. MINE/QUARRY NAME Kasson Sand and Gravel	
SECTION 16	TOWNSHIP 28N	RANGE 13W	3. AMOUNT PROCESSED AT THIS SITE (tons per year) 600,000
4. DESCRIPTION (Brief description of this facility or proposed modification. Attach a detailed site map showing all site characteristics including the location of any residential and/or commercial establishments and places of public assembly located within 1,000 feet of the proposed site) Stationary Non Metallic Crushing Plant			
5. DOES THIS FACILITY HAVE ANY OUTSTANDING UNRESOLVED AIR VIOLATIONS?		☒ YES ☐ NO	
6. ARE THE CRUSHER(S) LOCATED A MINIMUM OF 500 FEET FROM ALL RESIDENTIAL OR COMMERCIAL ESTABLISHMENTS OR PLACES OF PUBLIC ASSEMBLY?		☒ YES ☐ NO	
7. WAS THIS FACILITY PREVIOUSLY PERMITTED PURSUANT TO RULE 201? IF YES, PERMIT NO. B4383		☒ YES ☐ NO	
8. APPLICATION IS FOR ☐ NEW GENERAL PERMIT ☒ MODIFICATION TO EXISTING GENERAL PERMIT - PERMIT NO. 346-99			
9. FOR A MODIFICATION: IS THE FACILITY CURRENTLY IN COMPLIANCE WITH ALL CONDITIONS OF THE EXISTING GENERAL PERMIT, INCLUDING BUT NOT LIMITED TO THE TESTING OF ALL NSPS SUBJECT EQUIPMENT?		☐ YES ☒ NO	

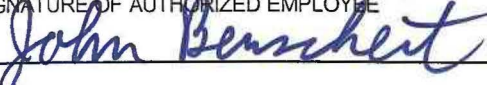
Instructions for completing the following items: Each piece of equipment must have a unique Identification number (ID). The ID may be any combination of up to 10 letters, numbers or keyboard characters with no spaces between characters. Provide an ID and complete all items for each piece of process equipment at the facility. If equipment is shop built, the manufactured date may be estimated. This data is mandatory. Use as many copies of page 2 as needed to list all process equipment. Use Additional Information form EQP5729 if needed to describe why a device is not subject to NSPS.

DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.) Jaw Crusher		DEVICE ID (Assign an identification number for this device) PAC-15	
MAKE AND MODEL PIONEER / TELSMITH 3352 / 54" X 20'		SERIAL NUMBER	MANUFACTURED DATE (year)
MAXIMUM RATED CAPACITY (tons per hour) 1000	CONTROL? ☒ YES ☐ NO CONTROL TYPE Water Spray		
IS DEVICE SUBJECT TO NSPS? ☒ YES, HAS DEVICE BEEN TESTED? ☒ YES, DATE TEST PASSED 10/18/2021 ☐ NO, DATE TEST SCHEDULED ☐ NO, REASON NOT SUBJECT			

DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.) Cone Crusher		DEVICE ID (Assign an identification number for this device) PAC- 13	
MAKE AND MODEL Metso GP 220		SERIAL NUMBER	MANUFACTURED DATE (year)
MAXIMUM RATED CAPACITY (tons per hour) 350	CONTROL? ☒ YES ☐ NO CONTROL TYPE Water Spray		
IS DEVICE SUBJECT TO NSPS? ☒ YES, HAS DEVICE BEEN TESTED? ☒ YES, DATE TEST PASSED 10/18/2021 ☐ NO, DATE TEST SCHEDULED ☐ NO, REASON NOT SUBJECT			

This page must be certified by an authorized employee

Applicant Certification: I certify, under penalty of law, that this permit application and any attachments were prepared by me, or under my direction or supervision in accordance with a system to ensure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. In addition, the equipment described in this application meets the necessary criteria for applicability for a General Permit to Install. Furthermore, I certify that I can and will comply with all conditions outlined in the General Permit to Install. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.

SIGNATURE OF AUTHORIZED EMPLOYEE 	DATE 8-2-22
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Michigan Department Of Environment, Great Lakes, and Energy - Air Quality Division

EGLE GENERAL PERMIT TO INSTALL APPLICATION NONMETALLIC MINERAL CRUSHING- (PAGE 2 OF 2)

FOR EGLE USE ONLY

PERMIT NUMBER

Authorized under 1994 PA 451, as amended. Completion of form is required. Applicant may be subject to civil and /or criminal penalties for providing false information.

Instructions: Page 1 of this form must be completed and certified by an authorized employee. Provide an ID and complete all items for each piece of process equipment at the facility. If the equipment is shop built, the manufactured date may be estimated. This data is mandatory. Use as many copies of this page as needed to list all process equipment. Use Additional Information form EQP5729 if needed to describe why a device is not subject to NSPS.

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DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.) Cone Crusher		DEVICE ID (Assign an identification number for this device) PAC-14	
MAKE AND MODEL EL-JAY RC45FH		SERIAL NUMBER 22A0387	MANUFACTURED DATE (year)
MAXIMUM RATED CAPACITY (tons per hour) 500	CONTROL? ☐ YES ☒ NO CONTROL TYPE		
IS DEVICE SUBJECT TO NSPS? ☒ YES, HAS DEVICE BEEN TESTED? ☒ YES, DATE TEST PASSED 10/18/2021 ☐ NO, DATE TEST SCHEDULED ☐ NO, REASON NOT SUBJECT			

DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.) Conveyor		DEVICE ID (Assign an identification number for this device) PCA-72A	
MAKE AND MODEL Homebuilt		SERIAL NUMBER	MANUFACTURED DATE (year)
MAXIMUM RATED CAPACITY (tons per hour) 500	CONTROL? ☒ YES ☐ NO CONTROL TYPE Water Spray		
IS DEVICE SUBJECT TO NSPS? ☒ YES, HAS DEVICE BEEN TESTED? ☒ YES, DATE TEST PASSED 10/18/2021 ☐ NO, DATE TEST SCHEDULED ☐ NO, REASON NOT SUBJECT			

DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.) Screen		DEVICE ID (Assign an identification number for this device) PSS-43	
MAKE AND MODEL KPI-JCI 7203-38LP		SERIAL NUMBER P181969	MANUFACTURED DATE (year)
MAXIMUM RATED CAPACITY (tons per hour) 1000	CONTROL? ☒ YES ☐ NO CONTROL TYPE Water Spray		
IS DEVICE SUBJECT TO NSPS? ☒ YES, HAS DEVICE BEEN TESTED? ☒ YES, DATE TEST PASSED 10/18/2021 ☐ NO, DATE TEST SCHEDULED ☐ NO, REASON NOT SUBJECT			

DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.) Conveyor - Stacker		DEVICE ID (Assign an identification number for this device) PSA-20	
MAKE AND MODEL Masaba 24"x120'		SERIAL NUMBER 2007121	MANUFACTURED DATE (year)
MAXIMUM RATED CAPACITY (tons per hour) 500	CONTROL? ☐ YES ☒ NO CONTROL TYPE		
IS DEVICE SUBJECT TO NSPS? ☒ YES, HAS DEVICE BEEN TESTED? ☒ YES, DATE TEST PASSED 10/19/2021 ☐ NO, DATE TEST SCHEDULED ☐ NO, REASON NOT SUBJECT			

DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.) Conveyor		DEVICE ID (Assign an identification number for this device) PTC-27	
MAKE AND MODEL HOMEBUILT 24"X50'		SERIAL NUMBER	MANUFACTURED DATE (year)
MAXIMUM RATED CAPACITY (tons per hour) 500	CONTROL? ☐ YES ☒ NO CONTROL TYPE		
IS DEVICE SUBJECT TO NSPS? ☒ YES, HAS DEVICE BEEN TESTED? ☒ YES, DATE TEST PASSED 10/19/2021 ☐ NO, DATE TEST SCHEDULED ☐ NO, REASON NOT SUBJECT			

Michigan Department Of Environment, Great Lakes, and Energy - Air Quality Division

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DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.) Conveyor		DEVICE ID (Assign an identification number for this device) PCA-75	
MAKE AND MODEL Homebuilt		SERIAL NUMBER	MANUFACTURED DATE (year)
MAXIMUM RATED CAPACITY (tons per hour) 400	CONTROL? ☒ YES ☐ NO CONTROL TYPE Water Spray		
IS DEVICE SUBJECT TO NSPS? ☒ YES, HAS DEVICE BEEN TESTED? ☒ YES, DATE TEST PASSED 10/18/2021 ☐ NO, DATE TEST SCHEDULED ☐ NO, REASON NOT SUBJECT			

DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.) Conveyor		DEVICE ID (Assign an identification number for this device) PSA-39	
MAKE AND MODEL Superior 36"x60' PRSC		SERIAL NUMBER 182731	MANUFACTURED DATE (year) 2021
MAXIMUM RATED CAPACITY (tons per hour) 500	CONTROL? ☒ YES ☐ NO CONTROL TYPE Water Spray		
IS DEVICE SUBJECT TO NSPS? ☒ YES, HAS DEVICE BEEN TESTED? ☒ YES, DATE TEST PASSED 10/18/2021 ☐ NO, DATE TEST SCHEDULED ☐ NO, REASON NOT SUBJECT			

DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.) Conveyor		DEVICE ID (Assign an identification number for this device) PCA-78	
MAKE AND MODEL Homebuilt 30"x80'		SERIAL NUMBER	MANUFACTURED DATE (year)
MAXIMUM RATED CAPACITY (tons per hour) 500	CONTROL? ☒ YES ☐ NO CONTROL TYPE water spray		
IS DEVICE SUBJECT TO NSPS? ☒ YES, HAS DEVICE BEEN TESTED? ☒ YES, DATE TEST PASSED 10/19/2021 ☐ NO, DATE TEST SCHEDULED ☐ NO, REASON NOT SUBJECT			

DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.) Screen		DEVICE ID (Assign an identification number for this device) PSS-52	
MAKE AND MODEL KPI-JCI 7203-32		SERIAL NUMBER S215350	MANUFACTURED DATE (year) 2021
MAXIMUM RATED CAPACITY (tons per hour) 700	CONTROL? ☒ YES ☐ NO CONTROL TYPE Water Spray		
IS DEVICE SUBJECT TO NSPS? ☒ YES, HAS DEVICE BEEN TESTED? ☒ YES, DATE TEST PASSED 10-19-2021 ☐ NO, DATE TEST SCHEDULED ☐ NO, REASON NOT SUBJECT			

DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.) Conveyor		DEVICE ID (Assign an identification number for this device) PSA-38	
MAKE AND MODEL Superior 36"x60' PRSC		SERIAL NUMBER 1824730	MANUFACTURED DATE (year) 2021
MAXIMUM RATED CAPACITY (tons per hour) 500	CONTROL? ☒ YES ☐ NO CONTROL TYPE Water Spray		
IS DEVICE SUBJECT TO NSPS? ☒ YES, HAS DEVICE BEEN TESTED? ☒ YES, DATE TEST PASSED 10/19/2021 ☐ NO, DATE TEST SCHEDULED ☐ NO, REASON NOT SUBJECT			

Michigan Department Of Environment, Great Lakes, and Energy - Air Quality Division

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DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.) Feeder		DEVICE ID (Assign an identification number for this device) PBF-4	
MAKE AND MODEL Superior Feeder 42"x12'		SERIAL NUMBER 1824735	MANUFACTURED DATE (year) 2021
MAXIMUM RATED CAPACITY (tons per hour) 800	CONTROL? ☐ YES ☒ NO CONTROL TYPE		
IS DEVICE SUBJECT TO NSPS? ☒ YES, HAS DEVICE BEEN TESTED? ☒ YES, DATE TEST PASSED 10/19/2021 ☐ NO, DATE TEST SCHEDULED ☐ NO, REASON NOT SUBJECT			

DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.) Conveyor		DEVICE ID (Assign an identification number for this device) PCA-70	
MAKE AND MODEL Homebuilt		SERIAL NUMBER	MANUFACTURED DATE (year)
MAXIMUM RATED CAPACITY (tons per hour) 500	CONTROL? ☐ YES ☒ NO CONTROL TYPE		
IS DEVICE SUBJECT TO NSPS? ☒ YES, HAS DEVICE BEEN TESTED? ☒ YES, DATE TEST PASSED 10/19/2021 ☐ NO, DATE TEST SCHEDULED ☐ NO, REASON NOT SUBJECT			

DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.) Conveyor		DEVICE ID (Assign an identification number for this device) PSA-23	
MAKE AND MODEL Kolberg 30"x125'		SERIAL NUMBER	MANUFACTURED DATE (year)
MAXIMUM RATED CAPACITY (tons per hour) 600	CONTROL? ☐ YES ☒ NO CONTROL TYPE		
IS DEVICE SUBJECT TO NSPS? ☒ YES, HAS DEVICE BEEN TESTED? ☒ YES, DATE TEST PASSED 10/19/2021 ☐ NO, DATE TEST SCHEDULED ☐ NO, REASON NOT SUBJECT			

DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.) Conveyor		DEVICE ID (Assign an identification number for this device) PSA-19A	
MAKE AND MODEL Homebuilt 42"x130'		SERIAL NUMBER	MANUFACTURED DATE (year)
MAXIMUM RATED CAPACITY (tons per hour) 1000	CONTROL? ☒ YES ☐ NO CONTROL TYPE Water Spray		
IS DEVICE SUBJECT TO NSPS? ☒ YES, HAS DEVICE BEEN TESTED? ☒ YES, DATE TEST PASSED 10/19/2021 ☐ NO, DATE TEST SCHEDULED ☐ NO, REASON NOT SUBJECT			

DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.) Feed Surge Bin		DEVICE ID (Assign an identification number for this device) PSB-4	
MAKE AND MODEL Homebuilt		SERIAL NUMBER	MANUFACTURED DATE (year)
MAXIMUM RATED CAPACITY (tons per hour) 700	CONTROL? ☐ YES ☒ NO CONTROL TYPE		
IS DEVICE SUBJECT TO NSPS? ☒ YES, HAS DEVICE BEEN TESTED? ☒ YES, DATE TEST PASSED 10/19/2021 ☐ NO, DATE TEST SCHEDULED ☐ NO, REASON NOT SUBJECT			

Michigan Department Of Environment, Great Lakes, and Energy - Air Quality Division

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DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.) Conveyor		DEVICE ID (Assign an identification number for this device) PCA-74	
MAKE AND MODEL homebuilt		SERIAL NUMBER	MANUFACTURED DATE (year)
MAXIMUM RATED CAPACITY (tons per hour) 500	CONTROL? ☐ YES ☒ NO CONTROL TYPE		
IS DEVICE SUBJECT TO NSPS? ☒ YES, HAS DEVICE BEEN TESTED? ☒ YES, DATE TEST PASSED 10/19/21 ☐ NO, DATE TEST SCHEDULED ☐ NO, REASON NOT SUBJECT			

DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.) Conveyor		DEVICE ID (Assign an identification number for this device) PCA-81	
MAKE AND MODEL Homebuilt		SERIAL NUMBER	MANUFACTURED DATE (year)
MAXIMUM RATED CAPACITY (tons per hour) 500	CONTROL? ☐ YES ☒ NO CONTROL TYPE		
IS DEVICE SUBJECT TO NSPS? ☒ YES, HAS DEVICE BEEN TESTED? ☒ YES, DATE TEST PASSED 10/19/2021 ☐ NO, DATE TEST SCHEDULED ☐ NO, REASON NOT SUBJECT			

DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.) Crusher		DEVICE ID (Assign an identification number for this device) PAC-17	
MAKE AND MODEL Telesmith 52S		SERIAL NUMBER	MANUFACTURED DATE (year)
MAXIMUM RATED CAPACITY (tons per hour) 600	CONTROL? ☒ YES ☐ NO CONTROL TYPE Water Spray		
IS DEVICE SUBJECT TO NSPS? ☒ YES, HAS DEVICE BEEN TESTED? ☒ YES, DATE TEST PASSED 10/19/2021 ☐ NO, DATE TEST SCHEDULED ☐ NO, REASON NOT SUBJECT			

DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.) Conveyor - Stacker		DEVICE ID (Assign an identification number for this device) PSA-25	
MAKE AND MODEL Superior 36"x125'		SERIAL NUMBER	MANUFACTURED DATE (year)
MAXIMUM RATED CAPACITY (tons per hour) 600	CONTROL? ☐ YES ☒ NO CONTROL TYPE		
IS DEVICE SUBJECT TO NSPS? ☒ YES, HAS DEVICE BEEN TESTED? ☒ YES, DATE TEST PASSED 10/19/2021 ☐ NO, DATE TEST SCHEDULED ☐ NO, REASON NOT SUBJECT			

DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.) Conveyor		DEVICE ID (Assign an identification number for this device) PCA-83	
MAKE AND MODEL Hartman Fabco		SERIAL NUMBER	MANUFACTURED DATE (year)
MAXIMUM RATED CAPACITY (tons per hour) 500	CONTROL? ☒ YES ☐ NO CONTROL TYPE Water Spray		
IS DEVICE SUBJECT TO NSPS? ☒ YES, HAS DEVICE BEEN TESTED? ☒ YES, DATE TEST PASSED 10/19/2021 ☐ NO, DATE TEST SCHEDULED ☐ NO, REASON NOT SUBJECT			

Michigan Department Of Environment, Great Lakes, and Energy - Air Quality Division

EGLE GENERAL PERMIT TO INSTALL APPLICATION NONMETALLIC MINERAL CRUSHING- (PAGE 2 OF 2)

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DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.) Screen		DEVICE ID (Assign an identification number for this device) PAS-9	
MAKE AND MODEL Elrus M6566		SERIAL NUMBER	MANUFACTURED DATE (year)
MAXIMUM RATED CAPACITY (tons per hour) 800	CONTROL? ☐ YES ☒ NO CONTROL TYPE		
IS DEVICE SUBJECT TO NSPS? ☒ YES, HAS DEVICE BEEN TESTED? ☒ YES, DATE TEST PASSED 10/19/2021 ☐ NO, DATE TEST SCHEDULED ☐ NO, REASON NOT SUBJECT			

DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.) Conveyor		DEVICE ID (Assign an identification number for this device) PCA-77	
MAKE AND MODEL		SERIAL NUMBER	MANUFACTURED DATE (year)
MAXIMUM RATED CAPACITY (tons per hour) 500	CONTROL? ☐ YES ☐ NO CONTROL TYPE		
IS DEVICE SUBJECT TO NSPS? ☒ YES, HAS DEVICE BEEN TESTED? ☒ YES, DATE TEST PASSED 10/19/2021 ☐ NO, DATE TEST SCHEDULED ☐ NO, REASON NOT SUBJECT			

DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.) Conveyoer		DEVICE ID (Assign an identification number for this device) PCA-73A	
MAKE AND MODEL Homebuild		SERIAL NUMBER	MANUFACTURED DATE (year)
MAXIMUM RATED CAPACITY (tons per hour) 500	CONTROL? ☐ YES ☒ NO CONTROL TYPE		
IS DEVICE SUBJECT TO NSPS? ☒ YES, HAS DEVICE BEEN TESTED? ☒ YES, DATE TEST PASSED 10/19/2021 ☐ NO, DATE TEST SCHEDULED ☐ NO, REASON NOT SUBJECT			

DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.) Conveyor		DEVICE ID (Assign an identification number for this device) PCA-76B	
MAKE AND MODEL Homebuild		SERIAL NUMBER 3327	MANUFACTURED DATE (year)
MAXIMUM RATED CAPACITY (tons per hour) 800	CONTROL? ☐ YES ☒ NO CONTROL TYPE		
IS DEVICE SUBJECT TO NSPS? ☒ YES, HAS DEVICE BEEN TESTED? ☒ YES, DATE TEST PASSED 10/19/2021 ☐ NO, DATE TEST SCHEDULED ☐ NO, REASON NOT SUBJECT			

DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.) Conveyor		DEVICE ID (Assign an identification number for this device) PCA-69	
MAKE AND MODEL Homebuild		SERIAL NUMBER	MANUFACTURED DATE (year)
MAXIMUM RATED CAPACITY (tons per hour) 500	CONTROL? ☒ YES ☐ NO CONTROL TYPE Water Spray		
IS DEVICE SUBJECT TO NSPS? ☒ YES, HAS DEVICE BEEN TESTED? ☒ YES, DATE TEST PASSED 7/6/2022 ☐ NO, DATE TEST SCHEDULED ☐ NO, REASON NOT SUBJECT			

Michigan Department Of Environment, Great Lakes, and Energy - Air Quality Division

EGLE GENERAL PERMIT TO INSTALL APPLICATION NONMETALLIC MINERAL CRUSHING- (PAGE 2 OF 2)

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DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.) Conveyor		DEVICE ID (Assign an identification number for this device) PSA-19B	
MAKE AND MODEL Homebuild 40"x130'		SERIAL NUMBER	MANUFACTURED DATE (year)
MAXIMUM RATED CAPACITY (tons per hour) 800	CONTROL? ☒ YES ☐ NO CONTROL TYPE Water Spray		
IS DEVICE SUBJECT TO NSPS? ☒ YES, HAS DEVICE BEEN TESTED? ☒ YES, DATE TEST PASSED 10/19/2021 ☐ NO, DATE TEST SCHEDULED ☐ NO, REASON NOT SUBJECT			

DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.) Conveyor		DEVICE ID (Assign an identification number for this device) PCA-80A	
MAKE AND MODEL Homebuild 24"x80'		SERIAL NUMBER	MANUFACTURED DATE (year)
MAXIMUM RATED CAPACITY (tons per hour) 500	CONTROL? ☐ YES ☒ NO CONTROL TYPE		
IS DEVICE SUBJECT TO NSPS? ☒ YES, HAS DEVICE BEEN TESTED? ☒ YES, DATE TEST PASSED 10/19/2021 ☐ NO, DATE TEST SCHEDULED ☐ NO, REASON NOT SUBJECT			

DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.) Conveyor		DEVICE ID (Assign an identification number for this device) PCA-80B	
MAKE AND MODEL Homebuild 24"x80'		SERIAL NUMBER	MANUFACTURED DATE (year)
MAXIMUM RATED CAPACITY (tons per hour) 500	CONTROL? ☐ YES ☒ NO CONTROL TYPE		
IS DEVICE SUBJECT TO NSPS? ☒ YES, HAS DEVICE BEEN TESTED? ☒ YES, DATE TEST PASSED 10/19/2021 ☐ NO, DATE TEST SCHEDULED ☐ NO, REASON NOT SUBJECT			

DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.) Conveyor		DEVICE ID (Assign an identification number for this device) PCA-89	
MAKE AND MODEL Superior 30X400ZL		SERIAL NUMBER 1824733	MANUFACTURED DATE (year) 2021
MAXIMUM RATED CAPACITY (tons per hour) 500	CONTROL? ☐ YES ☒ NO CONTROL TYPE		
IS DEVICE SUBJECT TO NSPS? ☒ YES, HAS DEVICE BEEN TESTED? ☒ YES, DATE TEST PASSED 10/18/2021 ☐ NO, DATE TEST SCHEDULED ☐ NO, REASON NOT SUBJECT			

DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.) Conveyor		DEVICE ID (Assign an identification number for this device) PSA-36	
MAKE AND MODEL Superior 36X125PC		SERIAL NUMBER 1824729	MANUFACTURED DATE (year) 2021
MAXIMUM RATED CAPACITY (tons per hour) 700	CONTROL? ☐ YES ☒ NO CONTROL TYPE		
IS DEVICE SUBJECT TO NSPS? ☒ YES, HAS DEVICE BEEN TESTED? ☒ YES, DATE TEST PASSED 10/18/2021 ☐ NO, DATE TEST SCHEDULED ☐ NO, REASON NOT SUBJECT			

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FOR EGLE USE ONLY

PERMIT NUMBER

Authorized under 1994 PA 451, as amended. Completion of form is required. Applicant may be subject to civil and /or criminal penalties for providing false information.

Instructions: Page 1 of this form must be completed and certified by an authorized employee. Provide an ID and complete all items for each piece of process equipment at the facility. If the equipment is shop built, the manufactured date may be estimated. This data is mandatory. Use as many copies of this page as needed to list all process equipment. Use Additional Information form EQP5729 if needed to describe why a device is not subject to NSPS.

For a Modification: Provide the information for all existing and new or additional process equipment. Submit pages 1 and 2 to the Permit Section and the appropriate district office. See map for district office locations.

DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.) Conveyor		DEVICE ID (Assign an identification number for this device) PCA-71	
MAKE AND MODEL Homebuilt 24"x200'		SERIAL NUMBER	MANUFACTURED DATE (year)
MAXIMUM RATED CAPACITY (tons per hour) 500	CONTROL? ☐ YES ☐ NO CONTROL TYPE		
IS DEVICE SUBJECT TO NSPS? ☐ YES, HAS DEVICE BEEN TESTED? ☐ YES, DATE TEST PASSED ☐ NO, DATE TEST SCHEDULED ☒ NO, REASON NOT SUBJECT Material is from wash plant			

DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.) Conveyor		DEVICE ID (Assign an identification number for this device) PCA-73B	
MAKE AND MODEL Homebuilt		SERIAL NUMBER	MANUFACTURED DATE (year)
MAXIMUM RATED CAPACITY (tons per hour) 500	CONTROL? ☐ YES ☐ NO CONTROL TYPE		
IS DEVICE SUBJECT TO NSPS? ☒ YES, HAS DEVICE BEEN TESTED? ☒ YES, DATE TEST PASSED 10/18/2021 ☐ NO, DATE TEST SCHEDULED ☐ NO, REASON NOT SUBJECT			

DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.) Conveyor		DEVICE ID (Assign an identification number for this device) PSA-22	
MAKE AND MODEL Nordberg 24"x80'		SERIAL NUMBER 345099	MANUFACTURED DATE (year)
MAXIMUM RATED CAPACITY (tons per hour) 500	CONTROL? ☐ YES ☐ NO CONTROL TYPE		
IS DEVICE SUBJECT TO NSPS? ☒ YES, HAS DEVICE BEEN TESTED? ☒ YES, DATE TEST PASSED 7/6/2022 ☐ NO, DATE TEST SCHEDULED ☐ NO, REASON NOT SUBJECT			

DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.) Coveyor		DEVICE ID (Assign an identification number for this device) PCA-76A	
MAKE AND MODEL Homebuilt 30"x 55'		SERIAL NUMBER	MANUFACTURED DATE (year)
MAXIMUM RATED CAPACITY (tons per hour) 500	CONTROL? ☒ YES ☐ NO CONTROL TYPE Water Spray		
IS DEVICE SUBJECT TO NSPS? ☒ YES, HAS DEVICE BEEN TESTED? ☒ YES, DATE TEST PASSED 10/19/2021 ☐ NO, DATE TEST SCHEDULED ☐ NO, REASON NOT SUBJECT			

DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.) VSI Crusher		DEVICE ID (Assign an identification number for this device) PAS-8	
MAKE AND MODEL Cedarapids 1145		SERIAL NUMBER	MANUFACTURED DATE (year)
MAXIMUM RATED CAPACITY (tons per hour) 400	CONTROL? ☒ YES ☐ NO CONTROL TYPE Water Spray		
IS DEVICE SUBJECT TO NSPS? ☒ YES, HAS DEVICE BEEN TESTED? ☒ YES, DATE TEST PASSED 6/16/2022 ☐ NO, DATE TEST SCHEDULED ☐ NO, REASON NOT SUBJECT			

Michigan Department Of Environment, Great Lakes, and Energy - Air Quality Division

EGLE GENERAL PERMIT TO INSTALL APPLICATION NONMETALLIC MINERAL CRUSHING- (PAGE 2 OF 2)

FOR EGLE USE ONLY
PERMIT NUMBER

Authorized under 1994 PA 451, as amended. Completion of form is required. Applicant may be subject to civil and /or criminal penalties for providing false information.

Instructions: Page 1 of this form must be completed and certified by an authorized employee. Provide an ID and complete all items for each piece of process equipment at the facility. If the equipment is shop built, the manufactured date may be estimated. This data is mandatory. Use as many copies of this page as needed to list all process equipment. Use Additional Information form EQP5729 if needed to describe why a device is not subject to NSPS.

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DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.) Conveyor		DEVICE ID (Assign an identification number for this device) PSA-35	
MAKE AND MODEL Superior 36X125PC		SERIAL NUMBER 1824728	MANUFACTURED DATE (year) 2020
MAXIMUM RATED CAPACITY (tons per hour) 500	CONTROL? ☐ YES ☒ NO CONTROL TYPE		
IS DEVICE SUBJECT TO NSPS? ☒ YES, HAS DEVICE BEEN TESTED? ☒ YES, DATE TEST PASSED 7/6/2022 ☐ NO, DATE TEST SCHEDULED ☐ NO, REASON NOT SUBJECT			

DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.) Conveyor		DEVICE ID (Assign an identification number for this device) PSA-37	
MAKE AND MODEL Superior 36X125PC		SERIAL NUMBER 1567538	MANUFACTURED DATE (year) 2020
MAXIMUM RATED CAPACITY (tons per hour) 500	CONTROL? ☐ YES ☒ NO CONTROL TYPE		
IS DEVICE SUBJECT TO NSPS? ☒ YES, HAS DEVICE BEEN TESTED? ☒ YES, DATE TEST PASSED 7/6/2022 ☐ NO, DATE TEST SCHEDULED ☐ NO, REASON NOT SUBJECT			

DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.) Conveyor		DEVICE ID (Assign an identification number for this device) PSA-40	
MAKE AND MODEL Superior 36X100PRSC		SERIAL NUMBER 1420820	MANUFACTURED DATE (year) 2020
MAXIMUM RATED CAPACITY (tons per hour) 500	CONTROL? ☐ YES ☒ NO CONTROL TYPE		
IS DEVICE SUBJECT TO NSPS? ☒ YES, HAS DEVICE BEEN TESTED? ☒ YES, DATE TEST PASSED 6/16/2022 ☐ NO, DATE TEST SCHEDULED ☐ NO, REASON NOT SUBJECT			

DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.) Conveyor		DEVICE ID (Assign an identification number for this device) PCA-88	
MAKE AND MODEL Superior 30X400ZL		SERIAL NUMBER 1824732	MANUFACTURED DATE (year) 2020
MAXIMUM RATED CAPACITY (tons per hour) 500	CONTROL? ☐ YES ☒ NO CONTROL TYPE		
IS DEVICE SUBJECT TO NSPS? ☒ YES, HAS DEVICE BEEN TESTED? ☒ YES, DATE TEST PASSED 7/6/2022 ☐ NO, DATE TEST SCHEDULED ☐ NO, REASON NOT SUBJECT			

DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.) Conveyor		DEVICE ID (Assign an identification number for this device) PCA-90	
MAKE AND MODEL Superior 30X400ZL		SERIAL NUMBER 1824734	MANUFACTURED DATE (year) 2020
MAXIMUM RATED CAPACITY (tons per hour) 500	CONTROL? ☐ YES ☒ NO CONTROL TYPE		
IS DEVICE SUBJECT TO NSPS? ☒ YES, HAS DEVICE BEEN TESTED? ☒ YES, DATE TEST PASSED 6/16/2022 ☐ NO, DATE TEST SCHEDULED ☐ NO, REASON NOT SUBJECT			

Michigan Department Of Environment, Great Lakes, and Energy - Air Quality Division

EGLE GENERAL PERMIT TO INSTALL APPLICATION NONMETALLIC MINERAL CRUSHING- (PAGE 2 OF 2)

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DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.) Conveyor With Feeder		DEVICE ID (Assign an identification number for this device) PCA-79	
MAKE AND MODEL Lippmann 24"x75'		SERIAL NUMBER	MANUFACTURED DATE (year)
MAXIMUM RATED CAPACITY (tons per hour) 500	CONTROL? ☐ YES ☒ NO CONTROL TYPE		
IS DEVICE SUBJECT TO NSPS? ☐ YES, HAS DEVICE BEEN TESTED? ☐ YES, DATE TEST PASSED ☐ NO, DATE TEST SCHEDULED ☒ NO, REASON NOT SUBJECT Material is wet from wash plant			

DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.) Conveyor		DEVICE ID (Assign an identification number for this device) PCA-80C	
MAKE AND MODEL Homebuild		SERIAL NUMBER	MANUFACTURED DATE (year)
MAXIMUM RATED CAPACITY (tons per hour) 500	CONTROL? ☐ YES ☒ NO CONTROL TYPE		
IS DEVICE SUBJECT TO NSPS? ☒ YES, HAS DEVICE BEEN TESTED? ☒ YES, DATE TEST PASSED 6/16/2022 ☐ NO, DATE TEST SCHEDULED ☐ NO, REASON NOT SUBJECT			

DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.) Conveyor		DEVICE ID (Assign an identification number for this device) PSA-24	
MAKE AND MODEL Lippmann 24"x75'		SERIAL NUMBER	MANUFACTURED DATE (year)
MAXIMUM RATED CAPACITY (tons per hour) 500	CONTROL? ☐ YES ☒ NO CONTROL TYPE		
IS DEVICE SUBJECT TO NSPS? ☐ YES, HAS DEVICE BEEN TESTED? ☐ YES, DATE TEST PASSED ☐ NO, DATE TEST SCHEDULED ☒ NO, REASON NOT SUBJECT this conveyor stock piles 2NS from a wash plant			

DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.) Screen		DEVICE ID (Assign an identification number for this device) PSS-44	
MAKE AND MODEL Cedarapids TSH5163-26		SERIAL NUMBER 54172	MANUFACTURED DATE (year)
MAXIMUM RATED CAPACITY (tons per hour) 600	CONTROL? ☒ YES ☐ NO CONTROL TYPE spray bars		
IS DEVICE SUBJECT TO NSPS? ☐ YES, HAS DEVICE BEEN TESTED? ☐ YES, DATE TEST PASSED ☐ NO, DATE TEST SCHEDULED ☒ NO, REASON NOT SUBJECT this is the wash plant screen			

DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.) Conveyor		DEVICE ID (Assign an identification number for this device) PCA-72B	
MAKE AND MODEL Homebuild		SERIAL NUMBER	MANUFACTURED DATE (year)
MAXIMUM RATED CAPACITY (tons per hour) 500	CONTROL? ☐ YES ☒ NO CONTROL TYPE		
IS DEVICE SUBJECT TO NSPS? ☒ YES, HAS DEVICE BEEN TESTED? ☒ YES, DATE TEST PASSED 10/18/2021 ☐ NO, DATE TEST SCHEDULED ☐ NO, REASON NOT SUBJECT			

Michigan Department Of Environment, Great Lakes, and Energy - Air Quality Division

EGLE GENERAL PERMIT TO INSTALL APPLICATION NONMETALLIC MINERAL CRUSHING- (PAGE 2 OF 2)

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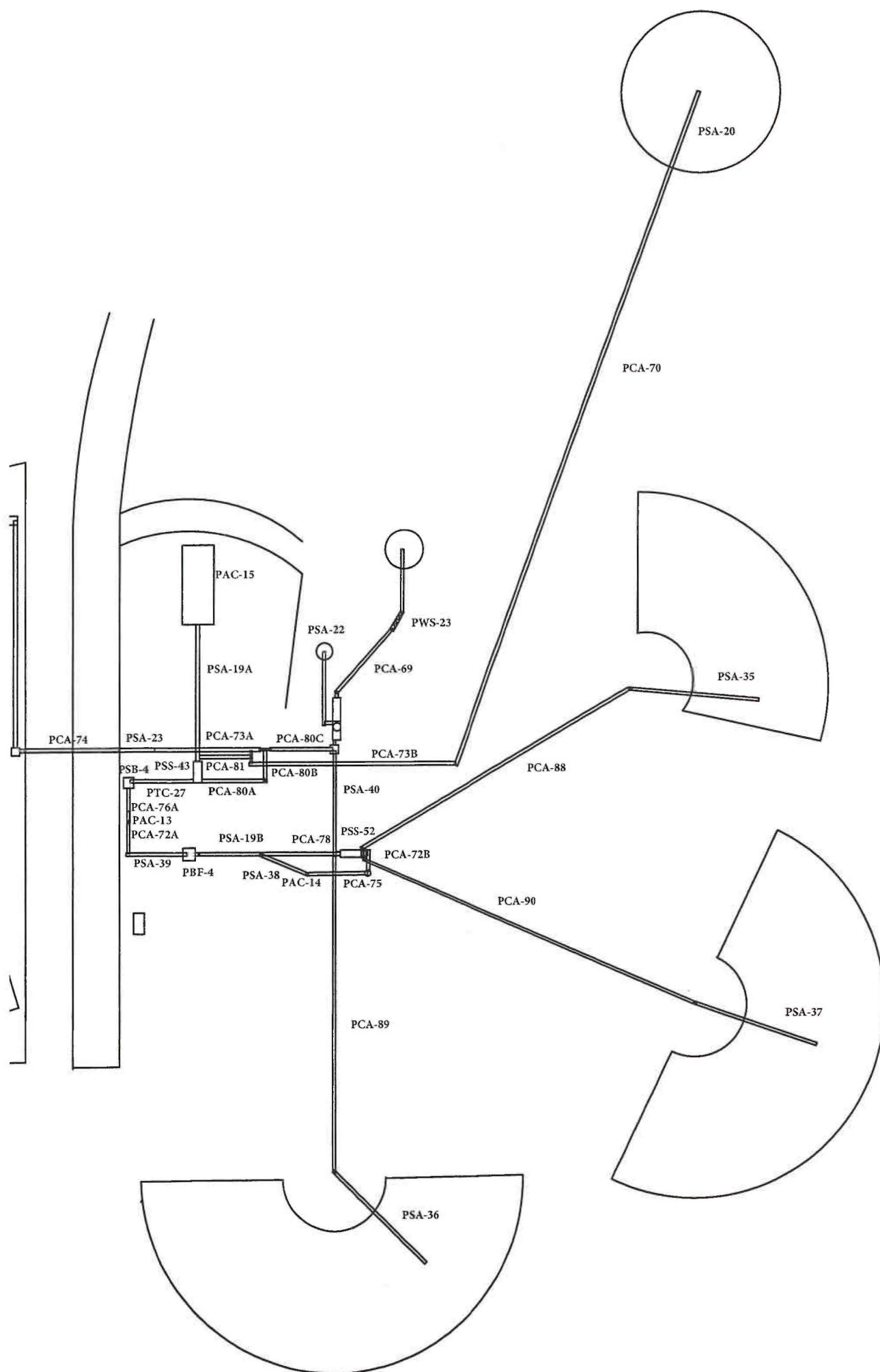
DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.) Fine Material Washing Screw		DEVICE ID (Assign an identification number for this device) PWS-22	
MAKE AND MODEL McLanahan 44"x33'		SERIAL NUMBER	MANUFACTURED DATE (year)
MAXIMUM RATED CAPACITY (tons per hour) 300	CONTROL? ☐ YES ☒ NO CONTROL TYPE		
IS DEVICE SUBJECT TO NSPS? ☐ YES, HAS DEVICE BEEN TESTED? ☐ YES, DATE TEST PASSED ☐ NO, DATE TEST SCHEDULED ☒ NO, REASON NOT SUBJECT			

DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.) Fine Material Washing Screw		DEVICE ID (Assign an identification number for this device) PWS-23	
MAKE AND MODEL Eagle 44"		SERIAL NUMBER A27756-636-JN	MANUFACTURED DATE (year)
MAXIMUM RATED CAPACITY (tons per hour) 300	CONTROL? ☐ YES ☒ NO CONTROL TYPE		
IS DEVICE SUBJECT TO NSPS? ☐ YES, HAS DEVICE BEEN TESTED? ☐ YES, DATE TEST PASSED ☐ NO, DATE TEST SCHEDULED ☒ NO, REASON NOT SUBJECT			

DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.)		DEVICE ID (Assign an identification number for this device)	
MAKE AND MODEL		SERIAL NUMBER	MANUFACTURED DATE (year)
MAXIMUM RATED CAPACITY (tons per hour)	CONTROL? ☐ YES ☐ NO CONTROL TYPE		
IS DEVICE SUBJECT TO NSPS? ☐ YES, HAS DEVICE BEEN TESTED? ☐ YES, DATE TEST PASSED ☐ NO, DATE TEST SCHEDULED ☐ NO, REASON NOT SUBJECT			

DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.)		DEVICE ID (Assign an identification number for this device)	
MAKE AND MODEL		SERIAL NUMBER	MANUFACTURED DATE (year)
MAXIMUM RATED CAPACITY (tons per hour)	CONTROL? ☐ YES ☐ NO CONTROL TYPE		
IS DEVICE SUBJECT TO NSPS? ☐ YES, HAS DEVICE BEEN TESTED? ☐ YES, DATE TEST PASSED ☐ NO, DATE TEST SCHEDULED ☐ NO, REASON NOT SUBJECT			

DEVICE DESCRIPTION (crusher-type, screen, conveyor, drill, etc.)		DEVICE ID (Assign an identification number for this device)	
MAKE AND MODEL		SERIAL NUMBER	MANUFACTURED DATE (year)
MAXIMUM RATED CAPACITY (tons per hour)	CONTROL? ☐ YES ☐ NO CONTROL TYPE		
IS DEVICE SUBJECT TO NSPS? ☐ YES, HAS DEVICE BEEN TESTED? ☐ YES, DATE TEST PASSED ☐ NO, DATE TEST SCHEDULED ☐ NO, REASON NOT SUBJECT			



VISIBLE EMISSION OBSERVATION FORM

No.

COMPANY NAME <i>Karson S+by</i>		
STREET ADDRESS		
CITY <i>Maple City</i>	STATE <i>MI</i>	ZIP
PHONE (KEY CONTACT)		SOURCE ID NUMBER

PROCESS EQUIPMENT <i>Converter</i>	OPERATING MODE <i>user</i>
CONTROL EQUIPMENT	OPERATING MODE

DESCRIBE EMISSION POINT <i>drop to transfer</i>		PCA-73B
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HEIGHT ABOVE GROUND LEVEL	HEIGHT RELATIVE TO OBSERVER Start End
DISTANCE FROM OBSERVER Start End	DIRECTION FROM OBSERVER Start End

DESCRIBE EMISSIONS	
Start	End
EMISSION COLOR	IF WATER DROPLET PLUME
Start End	Attached ☐ Detached ☐
POINT IN THE PLUME AT WHICH OPACITY WAS DETERMINED	
Start	End

DESCRIBE PLUME BACKGROUND	
Start	End
BACKGROUND COLOR	SKY CONDITIONS
Start End	Start End
WIND SPEED	WIND DIRECTION
Start End	Start End
AMBIENT TEMP	WET BULB TEMP RH, percent
Start End	

Stack with Plume Sun Wind	SOURCE LAYOUT SKETCH Draw North Arrow

ADDITIONAL INFORMATION

OBSERVATION DATE		START TIME		END TIME	
10-18-21		3:50		4:50	
SEC	0	15	30	45	COMMENTS
MIN					
1	0	0	0	0	0
2	0	0	0	0	0
3	0	0	0	0	0
4	0	0	0	0	0
5	0	0	0	0	0
6	0	0	0	0	0
7	0	0	0	0	0
8	0	0	0	0	0
9	0	0	0	0	0
10	0	0	0	0	0
11	0	0	0	0	0
12	0	0	0	0	0
13	0	0	0	0	0
14	0	0	0	0	0
15	0	0	0	0	0
16	0	0	0	0	0
17	0	0	0	0	0
18	0	0	0	0	0
19	0	0	0	0	0
20	0	0	0	0	0
21	0	0	0	0	0
22	0	0	0	0	0
23	0	0	0	0	0
24	0	0	0	0	0
25	0	0	0	0	0
26	0	0	0	0	0
27	0	0	0	0	0
28	0	0	0	0	0
29	0	0	0	0	0
30	0	0	0	0	0

OBSERVER'S NAME (PRINT)	
OBSERVER'S SIGNATURE <i>John Bensheit</i>	DATE 10-18-21
ORGANIZATION	
CERTIFIED BY <i>Singleton</i>	DATE 9-25-21
CONTINUED ON VEO FORM NUMBER	

VISIBLE EMISSION OBSERVATION FORM

No.

COMPANY NAME <i>Kasson S+G</i>		
STREET ADDRESS		
CITY <i>Maple City</i>	STATE <i>MI</i>	ZIP
PHONE (KEY CONTACT)	SOURCE ID NUMBER	

PROCESS EQUIPMENT <i>conveyors</i>	OPERATING MODE <i>idle</i>
CONTROL EQUIPMENT	OPERATING MODE

DESCRIBE EMISSION POINT <i>drop to transfer conv.</i> <i>PCA- 72 B</i>	
HEIGHT ABOVE GROUND LEVEL	HEIGHT RELATIVE TO OBSERVER Start End
DISTANCE FROM OBSERVER Start End	DIRECTION FROM OBSERVER Start End

DESCRIBE EMISSIONS	
Start End	IF WATER DROPLET PLUME Attached ☐ Detached ☐
POINT IN THE PLUME AT WHICH OPACITY WAS DETERMINED Start End	

DESCRIBE PLUME BACKGROUND	
Start End	SKY CONDITIONS Start End
BACKGROUND COLOR Start End	WIND DIRECTION Start End
WIND SPEED Start End	WET BULB TEMP RH, percent Start End

Stack with Plume Sun Wind	SOURCE LAYOUT SKETCH Draw North Arrow

ADDITIONAL INFORMATION

OBSERVATION DATE					START TIME	END TIME				
					3:50	4:50				
SEC MIN	0	15	30	45	COMMENTS					
1	0	0	0	0	0	0	0	0	31	
2	0	0	0	0	0	0	0	0	32	
3	0	0	0	0	0	0	0	0	33	
4	0	0	0	0	0	0	0	0	34	
5	0	0	0	0	0	0	0	0	35	
6	0	0	0	0	0	0	0	0	36	
7	0	0	0	0	0	0	0	0	37	
8	0	0	0	0	0	0	0	0	38	
9	0	0	0	0	0	0	0	0	39	
10	0	0	0	0	0	0	0	0	40	
11	0	0	0	0	0	0	0	0	41	
12	0	0	0	0	0	0	0	0	42	
13	0	0	0	0	0	0	0	0	43	
14	0	0	0	0	0	0	0	0	44	
15	0	0	0	0	0	0	0	0	45	
16	0	0	0	0	0	0	0	0	46	
17	0	0	0	0	0	0	0	0	47	
18	0	0	0	0	0	0	0	0	48	
19	0	0	0	0	0	0	0	0	49	
20	0	0	0	0	0	0	0	0	50	
21	0	0	0	0	0	0	0	0	51	
22	0	0	0	0	0	0	0	0	52	
23	0	0	0	0	0	0	0	0	53	
24	0	0	0	0	0	0	0	0	54	
25	0	0	0	0	0	0	0	0	55	
26	0	0	0	0	0	0	0	0	56	
27	0	0	0	0	0	0	0	0	57	
28	0	0	0	0	0	0	0	0	58	
29	0	0	0	0	0	0	0	0	59	
30	0	0	0	0	0	0	0	0	60	

OBSERVER'S NAME (PRINT)	
OBSERVER'S SIGNATURE <i>John Bernhardt</i>	DATE <i>10-18-21</i>
ORGANIZATION	
CERTIFIED BY <i>Singleton</i>	DATE <i>9-25-21</i>
CONTINUED ON VEO FORM NUMBER	

VISIBLE EMISSION OBSERVATION FORM

No.

COMPANY NAME <i>Kasson</i>		
EET ADDRESS		
CITY	STATE	ZIP
PHONE (KEY CONTACT)	SOURCE ID NUMBER	

PROCESS EQUIPMENT	OPERATING MODE
CONTROL EQUIPMENT	OPERATING MODE

DESCRIBE EMISSION POINT <i>N. Primary screen discharge</i>	
PCASOA	
HEIGHT ABOVE GROUND LEVEL <i>9'</i>	HEIGHT RELATIVE TO OBSERVER Start <i>+3</i> End
DISTANCE FROM OBSERVER Start <i>50</i> End	DIRECTION FROM OBSERVER Start <i>NE</i> End

DESCRIBE EMISSIONS Start <i>Travel/Stone dust</i> End	
EMISSION COLOR	IF WATER DROPLET PLUME Attached ☐ Detached ☐
Start End	IT IN THE PLUME AT WHICH OPACITY WAS DETERMINED Start <i>hopper</i> End

DESCRIBE PLUME BACKGROUND Start <i>sky</i> End	
BACKGROUND COLOR	SKY CONDITIONS Start <i>sun</i> End
WIND SPEED Start <i>lt</i> End	WIND DIRECTION Start <i>var</i> End
AMBIENT TEMP Start <i>45</i> End	WET BULB TEMP RH, percent

Slack with Plume ☐ Sun ☒ Wind ☐	SOURCE LAYOUT SKETCH Draw North Arrow X Emission Point Observer's Position Sun Location Line 140°
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OBSERVATION DATE <i>10-19-21</i>					START TIME <i>9:00</i>	END TIME <i>10:00</i>			
SEC	0	15	30	45		COMMENTS			
MIN	0	15	30	45		0	15	30	45
1	0	0	0	0	31	0	0	0	0
2	0	0	0	0	32	0	0	0	0
3	0	0	0	0	33	0	0	0	0
4	0	0	0	0	34	0	0	0	0
5	0	0	0	0	35	0	0	0	0
6	0	0	0	0	36	0	0	0	0
7	0	0	0	0	37	0	0	0	0
8	0	0	0	0	38	0	0	0	0
9	0	0	0	0	39	0	0	0	0
10	0	0	0	0	40	0	0	0	0
11	0	0	0	0	41	0	0	0	0
12	0	0	0	0	42	0	0	0	0
13	0	0	0	0	43	0	0	0	0
14	0	0	0	0	44	0	0	0	0
15	0	0	0	0	45	0	0	0	0
16	0	0	0	0	46	0	0	0	0
17	0	0	0	0	47	0	0	0	0
18	0	0	0	0	48	0	0	0	0
19	0	0	0	0	49	0	0	0	0
20	0	0	0	0	50	0	0	0	0
21	0	0	0	0	51	0	0	0	0
22	0	0	0	0	52	0	0	0	0
23	0	0	0	0	53	0	0	0	0
24	0	0	0	0	54	0	0	0	0
25	0	0	0	0	55	0	0	0	0
26	0	0	0	0	56	0	0	0	0
27	0	0	0	0	57	0	0	0	0
28	0	0	0	0	58	0	0	0	0
29	0	0	0	0	59	0	0	0	0
30	0	0	0	0	00	0	0	0	0

OBSERVER'S NAME (PRINT)	
OBSERVER'S SIGNATURE <i>John Bernhardt</i>	DATE <i>10-19-21</i>
ORGANIZATION	
CERTIFIED BY <i>Single En</i>	DATE <i>9-25-21</i>
CONTINUED ON VEO FORM NUMBER	

VISIBLE EMISSION OBSERVATION FORM

No.

COMPANY NAME		
STREET ADDRESS		
CITY	STATE	ZIP
PHONE (KEY CONTACT)	SOURCE ID NUMBER	

PROCESS EQUIPMENT	OPERATING MODE
CONTROL EQUIPMENT	OPERATING MODE

DESCRIBE EMISSION POINT <i>E. split chute off N PCA-80B</i>	
<i>Primary screen conveyor</i>	
HEIGHT ABOVE GROUND LEVEL <i>5</i>	HEIGHT RELATIVE TO OBSERVER Start — End
DISTANCE FROM OBSERVER Start <i>30</i> End	DIRECTION FROM OBSERVER Start <i>N</i> End

DESCRIBE EMISSIONS Start <i>Gravel/Stone dust</i>	
EMISSION COLOR	IF WATER DROPLET PLUME
Start — End	Attached ☐ Detached ☐
IF IN THE PLUME AT WHICH OPACITY WAS DETERMINED Start <i>hopper</i> End	

DESCRIBE PLUME BACKGROUND Start <i>sky</i> End	
BACKGROUND COLOR	SKY CONDITIONS
Start — End	Start — End
WIND SPEED	WIND DIRECTION
Start — End	Start — End
AMBIENT TEMP	WET BULB TEMP
Start — End	Start — End

Stack with Plume Sun Wind	SOURCE LAYOUT SKETCH 	Draw North Arrow
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ADDITIONAL INFORMATION

OBSERVATION DATE				START TIME		END TIME			
10-19-21				9:00		10:00			
SEC	0	15	30	45		COMMENTS			
MIN									
1	0	0	0	0	31	0	0	0	0
2	0	0	0	0	32	0	0	0	0
3	0	0	0	0	33	0	0	0	0
4	0	0	0	0	34	0	0	0	0
5	0	0	0	0	35	0	0	0	0
6	0	0	0	0	36	0	0	0	0
7	0	0	0	0	37	0	0	0	0
8	0	0	0	0	38	0	0	0	0
9	0	0	0	0	39	0	0	0	0
10	0	0	0	0	40	0	0	0	0
11	0	0	0	0	41	0	0	0	0
12	0	0	0	0	42	0	0	0	0
13	0	0	0	0	43	0	0	0	0
14	0	0	0	0	44	0	0	0	0
15	0	0	0	0	45	0	0	0	0
16	0	0	0	0	46	0	0	0	0
17	0	0	0	0	47	0	0	0	0
18	0	0	0	0	48	0	0	0	0
19	0	0	0	0	49	0	0	0	0
20	0	0	0	0	50	0	0	0	0
21	0	0	0	0	51	0	0	0	0
22	0	0	0	0	52	0	0	0	0
23	0	0	0	0	53	0	0	0	0
24	0	0	0	0	54	0	0	0	0
25	0	0	0	0	55	0	0	0	0
26	0	0	0	0	56	0	0	0	0
27	0	0	0	0	57	0	0	0	0
28	0	0	0	0	58	0	0	0	0
29	0	0	0	0	59	0	0	0	0
30	0	0	0	0	60	0	0	0	0

OBSERVER'S NAME (PRINT)	
OBSERVER'S SIGNATURE	DATE
<i>John Bennett</i>	<i>10-19-21</i>
ORGANIZATION	
CERTIFIED BY	DATE
<i>Singleton</i>	<i>9-25-21</i>

CONTINUED ON VEO FORM NUMBER

VISIBLE EMISSION OBSERVATION FORM

No.

COMPANY NAME <i>Rieth-Riley Kasson St. Co.</i>		
STREET ADDRESS		
CITY	STATE	ZIP
PHONE (KEY CONTACT)		SOURCE ID NUMBER

PROCESS EQUIPMENT	OPERATING MODE
CONTROL EQUIPMENT	OPERATING MODE

DESCRIBE EMISSION POINT <i>PAC-14 EL-Jay Cone Crusher.</i>	
HEIGHT ABOVE GROUND LEVEL <i>15'</i>	HEIGHT RELATIVE TO OBSERVER Start <i>15'</i> End
DISTANCE FROM OBSERVER Start <i>30'</i> End	DIRECTION FROM OBSERVER Start <i>East</i> End

DESCRIBE EMISSIONS	
Start <i>Stone</i> End	IF WATER DROPLET PLUME
EMISSION COLOR	Attached ☐ Detached ☐
Start <i>Hopper</i> End	IN THE PLUME AT WHICH OPACITY WAS DETERMINED

DESCRIBE PLUME BACKGROUND	
Start <i>sky</i> End	SKY CONDITIONS
BACKGROUND COLOR	Start <i>clear</i> End
WIND SPEED	WIND DIRECTION
Start <i>5-10</i> End	Start <i>SW</i> End
AMBIENT TEMP	WET BULB TEMP
Start <i>65°F</i> End	Rel. percent

Stack with Plume	SOURCE LAYOUT SKETCH Draw North Arrow
Sun	
Wind	

OBSERVATION DATE					START TIME	END TIME				
10-18-21					1:50 PM	2:00 PM				
SEC MIN	0	15	30	45	COMMENTS					
1	5	5	5	5	31	5	5	5	0	
2	5	5	5	5	32	5	5	5	5	
3	5	5	5	5	33	5	5	5	5	
4	5	5	5	5	34	5	5	5	5	
5	5	5	5	5	35	5	5	5	5	
6	5	5	5	5	36	5	5	5	5	
7	5	5	5	5	37	5	5	5	5	
8	5	5	5	5	38	5	5	5	5	
9	5	5	5	5	39	5	5	5	0	
10	5	5	5	5	40	5	5	5	5	
11	5	10	5	5	41	5	5	5	5	
12	5	5	5	10	42	5	5	5	5	
13	5	5	5	5	43	5	5	5	5	
14	10	20	5	5	44	5	5	5	5	
15	5	5	5	5	45	5	5	5	5	
16	5	5	5	5	46	5	5	5	5	
17	5	5	5	5	47	5	5	5	5	
18	5	5	5	5	48	5	5	5	5	
19	5	5	5	5	49	5	5	5	5	
20	5	5	5	5	50	5	5	5	5	
21	5	5	5	5	51	5	5	5	5	
22	5	5	5	5	52	5	5	5	5	
23	5	5	5	5	53	5	5	5	5	
24	5	5	5	5	54	5	5	5	5	
25	5	5	5	5	55	5	5	5	5	
26	5	5	5	5	56	5	5	5	5	
27	10	5	5	5	57	5	5	5	5	
28	5	5	5	5	58	5	5	5	5	
29	5	0	5	5	59	5	5	5	5	
30	5	5	5	5	60	5	5	5	5	

OBSERVER'S NAME (PRINT) <i>PAUL Clotzkobu</i>	
OBSERVER'S SIGNATURE <i>Paul Clotzkobu</i>	DATE <i>10-18-21</i>
ORGANIZATION	
CERTIFIED BY <i>Single kn</i>	DATE <i>9-28-21</i>

CONTINUED ON VEO FORM NUMBER

VISIBLE EMISSION OBSERVATION FORM

No.

COMPANY NAME
Rieth-Riley : Kasson S & C.

STREET ADDRESS

CITY STATE ZIP

PHONE (KEY CONTACT) SOURCE ID NUMBER

PROCESS EQUIPMENT OPERATING MODE

CONTROL EQUIPMENT OPERATING MODE

DESCRIBE EMISSION POINT
PAC-13 Metso GP 220

HEIGHT ABOVE GROUND LEVEL
6'

HEIGHT RELATIVE TO OBSERVER
Start **10'** End

DISTANCE FROM OBSERVER
Start **20'** End

DIRECTION FROM OBSERVER
Start **N** End

DESCRIBE EMISSIONS
Start **Stone & Dust.** End

EMISSION COLOR IF WATER DROPLET PLUME
Start End Attached ☐ Detached ☐

IT IN THE PLUME AT WHICH OPACITY WAS DETERMINED
Start **In let of machine.** End

DESCRIBE PLUME BACKGROUND
Start **sky** End

BACKGROUND COLOR SKY CONDITIONS
Start **Blue.** End Start **clear.** End

WIND SPEED WIND DIRECTION
Start **5-10 mph.** End Start **SE** End

AMBIENT TEMP WET BULB TEMP RH, percent
Start **60°F** End

Stack with Plume
Sun
Wind

SOURCE LAYOUT SKETCH Draw North Arrow

ADDITIONAL INFORMATION

OBSERVATION DATE				START TIME	END TIME				
10-18-21				9:35 AM	10:35 AM				
SEC	0	15	30	45	COMMENTS				
MIN									
1	5	5	5	5	--				
2	5	5	5	5	31	5	10	10	10
3	5	5	5	5	32	5	0	5	5
4	5	5	5	5	33	0	0	5	5
5	5	5	5	5	34	0	5	0	0
6	5	5	5	5	35	0	5	0	0
7	5	5	5	5	36	0	0	5	0
8	5	0	0	0	37	0	5	0	0
9	0	5	5	0	38	0	0	5	0
10	5	5	5	0	39	0	0	0	0
11	0	5	0	5	40	0	0	0	0
12	0	5	5	5	41	5	0	0	5
13	0	5	0	0	42	0	0	0	0
14	0	5	0	0	43	0	0	0	0
15	0	5	0	0	44	0	0	0	0
16	0	5	5	0	45	0	0	0	0
17	0	5	5	0	46	0	0	0	0
18	0	5	0	5	47	0	0	0	0
19	0	5	0	5	48	0	0	0	0
20	0	0	5	10	49	0	0	0	0
21	0	0	5	5	50	0	0	0	0
22	0	0	5	5	51	0	5	0	0
23	0	0	0	0	52	5	0	5	5
24	0	0	0	0	53	5	5	5	5
25	0	0	0	5	54	0	0	0	0
26	0	0	0	0	55	0	0	0	0
27	0	5	10	5	56	0	0	5	0
28	5	0	5	0	57	0	0	0	0
29	0	5	0	0	58	0	0	0	0
30	0	10	5	5	59	0	0	0	0

OBSERVER'S NAME (PRINT)
Paul Glatzhofer

OBSERVER'S SIGNATURE
Paul Glatzhofer DATE
10-18-21

ORGANIZATION

CERTIFIED BY
Singleton DATE
9-25-21

CONTINUED ON VEO FORM NUMBER

VISIBLE EMISSION OBSERVATION FORM

No.

COMPANY NAME <i>Rieth - Riley & Kasson S & C.</i>		
STREET ADDRESS		
CITY	STATE	ZIP
PHONE (KEY CONTACT)	SOURCE ID NUMBER	

PROCESS EQUIPMENT	OPERATING MODE
CONTROL EQUIPMENT	OPERATING MODE

DESCRIBE EMISSION POINT <i>PAC-15 Saw Crusher</i>	
HEIGHT ABOVE GROUND LEVEL <i>8'</i>	HEIGHT RELATIVE TO OBSERVER Start End
DISTANCE FROM OBSERVER Start <i>60'</i> End	DIRECTION FROM OBSERVER Start <i>NW</i> End

DESCRIBE EMISSIONS Start <i>Stone & Sand</i> End	
EMISSION COLOR Start End	IF WATER DROPLET PLUME Attached ☐ Detached ☐
T IN THE PLUME AT WHICH OPACITY WAS DETERMINED Start End	

DESCRIBE PLUME BACKGROUND Start <i>Sky</i> End	
BACKGROUND COLOR Start <i>Blue</i> End	SKY CONDITIONS Start <i>Clear</i> End <i>Clear</i>
WIND SPEED Start <i>5-10 mph</i> End	WIND DIRECTION Start <i>SE</i> End
AMBIENT TEMP Start <i>55°F</i> End <i>60°F</i>	WET BULB TEMP RH, percent

Stack with Plume Sun Wind	SOURCE LAYOUT SKETCH Draw North Arrow

ADDITIONAL INFORMATION

OBSERVATION DATE					START TIME	END TIME				
10-18-21					8:30 AM	9:30 AM				
SEC	0	15	30	45	COMMENTS					
MIN										
1	0	0	0	0	31	0	0	0	0	
2	0	0	0	0	32	0	0	0	0	
3	0	0	5	0	33	0	0	0	0	
4	0	0	0	5	34	0	0	0	0	
5	0	5	0	0	35	0	0	0	0	
6	0	0	0	0	36	0	0	5	0	
7	0	0	0	0	37	0	0	0	0	
8	0	0	5	0	38	0	0	0	0	
9	0	0	0	0	39	0	0	0	0	
10	5	0	0	0	40	0	0	0	0	
11	0	0	0	0	41	0	0	0	0	
12	0	5	5	0	42	0	0	0	5	
13	0	5	0	0	43	0	0	0	0	
14	0	0	0	0	44	5	0	0	0	
15	0	0	0	0	45	0	5	0	0	
16	0	0	0	5	46	0	0	0	0	
17	0	0	0	0	47	0	0	0	0	
18	0	0	0	0	48	0	0	0	0	
19	0	0	0	0	49	0	0	0	0	
20	0	0	0	0	50	0	0	0	0	
21	5	0	0	0	51	0	0	0	0	
22	0	0	0	0	52	0	0	0	0	
23	0	0	0	5	53	0	0	0	0	
24	5	0	0	0	54	0	0	0	0	
25	0	0	0	0	55	0	0	0	0	
26	0	0	0	0	56	5	5	0	0	
27	0	0	0	0	57	5	5	0	0	
28	0	0	0	0	58	0	0	0	0	
29	0	0	0	0	59	0	5	0	0	
30	0	5	5	0	60	5	0	0	0	

OBSERVER'S NAME (PRINT) <i>Paul Glatzhofer</i>	DATE <i>10-18-21</i>
OBSERVER'S SIGNATURE <i>Paul Glatzhofer</i>	
ORGANIZATION <i>Rieth - Riley Con.</i>	
CERTIFIED BY <i>Singleton</i>	DATE <i>9.25.21</i>

CONTINUED ON VEO FORM NUMBER

VISIBLE EMISSION OBSERVATION FORM

No.

COMPANY NAME <i>Kasson</i>		
EET ADDRESS		
CITY	STATE	ZIP
PHONE (KEY CONTACT)	SOURCE ID NUMBER	

PROCESS EQUIPMENT	OPERATING MODE
CONTROL EQUIPMENT	OPERATING MODE

DESCRIBE EMISSION POINT <i>screened sand transfer</i> <i>PCA-81</i>	
HEIGHT ABOVE GROUND LEVEL	HEIGHT RELATIVE TO OBSERVER Start <i>3'</i> End
DISTANCE FROM OBSERVER Start <i>20'</i> End	DIRECTION FROM OBSERVER Start End

DESCRIBE EMISSIONS Start <i>Gravel/Stone dust</i> End	
EMISSION COLOR	IF WATER DROPLET PLUME Start End Attached ☐ Detached ☐
T IN THE PLUME AT WHICH OPACITY WAS DETERMINED Start <i>hopper</i> End	

DESCRIBE PLUME BACKGROUND Start <i>sky</i> End	
BACKGROUND COLOR	SKY CONDITIONS Start <i>sun</i> End
WIND SPEED Start <i>lt</i> End	WIND DIRECTION Start <i>var</i> End
AMBIENT TEMP Start End	WET BULB TEMP RH, percent

Stack with Plume Sun Wind	SOURCE LAYOUT SKETCH Draw North Arrow

ADDITIONAL INFORMATION

OBSERVATION DATE <i>10-19-21</i>				START TIME <i>10:01</i>		END TIME <i>11:01</i>		COMMENTS	
SEC	0	15	30	45					
MIN									
1	0	0	0	0	31	0	0	0	0
2	0	0	0	0	32	0	0	0	0
3	0	0	0	0	33	0	0	0	0
4	0	0	0	0	34	0	0	0	0
5	0	0	0	0	35	0	0	0	0
6	0	0	0	0	36	0	0	0	0
7	0	0	0	0	37	0	0	0	0
8	0	0	0	0	38	0	0	0	0
9	0	0	0	0	39	0	0	0	0
10	0	0	0	0	40	0	0	0	0
11	0	0	0	0	41	0	0	0	0
12	0	0	0	0	42	0	0	0	0
13	0	0	0	0	43	0	0	0	0
14	0	0	0	0	44	0	0	0	0
15	0	0	0	0	45	0	0	0	0
16	0	0	0	0	46	0	0	0	0
17	0	0	0	0	47	0	0	0	0
18	0	0	0	0	48	0	0	0	0
19	0	0	0	0	49	0	0	0	0
20	0	0	0	0	50	0	0	0	0
21	0	0	0	0	51	0	0	0	0
22	0	0	0	0	52	0	0	0	0
23	0	0	0	0	53	0	0	0	0
24	0	0	0	0	54	0	0	0	0
25	0	0	0	0	55	0	0	0	0
26	0	0	0	0	56	0	0	0	0
27	0	0	0	0	57	0	0	0	0
28	0	0	0	0	58	0	0	0	0
29	0	0	0	0	59	0	0	0	0
30	0	0	0	0	60	0	0	0	0

OBSERVER'S NAME (PRINT)	
OBSERVER'S SIGNATURE <i>John Bennett</i>	DATE <i>10-19-21</i>
ORGANIZATION	
CERTIFIED BY <i>Sinkston</i>	DATE <i>9-25-21</i>
CONTINUED ON VEO FORM NUMBER	

VISIBLE EMISSION OBSERVATION FORM

No.

COMPANY NAME Karson St-G

STREET ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE (KEY CONTACT) _____ SOURCE ID NUMBER _____

PROCESS EQUIPMENT _____ OPERATING MODE _____

CONTROL EQUIPMENT _____ OPERATING MODE _____

DESCRIBE EMISSION POINT
Orange conveyor to bridge
Kolberg stacker PSA-23

HEIGHT ABOVE GROUND LEVEL 20 HEIGHT RELATIVE TO OBSERVER
Start 15 End _____

DISTANCE FROM OBSERVER 50 DIRECTION FROM OBSERVER
Start NNE End _____

DESCRIBE EMISSIONS
Start Gravel/Stone dust End _____

EMISSION COLOR _____ IF WATER DROPLET PLUME
Attached ☐ Detached ☐

Y IN THE PLUME AT WHICH OPACITY WAS DETERMINED
Start hopper End _____

DESCRIBE PLUME BACKGROUND
Start sky End _____

BACKGROUND COLOR Blue SKY CONDITIONS
Start _____ End _____

WIND SPEED 10 WIND DIRECTION
Start SW End _____

AMBIENT TEMP 60 WET BULB TEMP _____ RH. percent _____

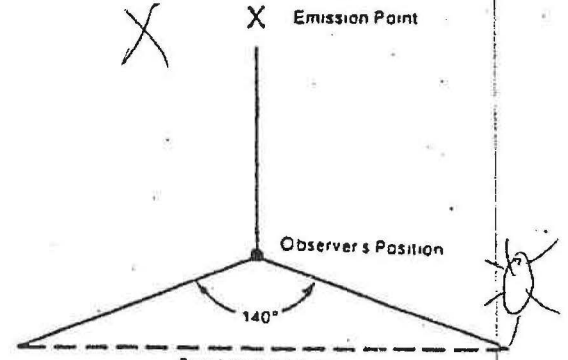
Stack with Plume 

Sun 

Wind 

SOURCE LAYOUT SKETCH

Draw North Arrow 

Emission Point 

Observer's Position

Sun Location Line

ADDITIONAL INFORMATION _____

OBSERVATION DATE					START TIME	END TIME				
10-19-21					1:16	2:16				
SEC	0	15	30	45	COMMENTS					
MIN										
1	0	0	0	0	31	0	0	0	0	
2	0	0	0	0	32	0	0	0	0	
3	0	0	0	0	33	0	0	0	0	
4	0	0	0	0	34	0	0	0	0	
5	0	0	0	0	35	0	0	0	0	
6	0	0	0	0	36	0	0	0	0	
7	0	0	0	0	37	0	0	0	0	
8	0	0	0	0	38	0	0	0	0	
9	0	0	0	0	39	0	0	0	0	
10	0	0	0	0	40	0	0	0	0	
11	0	0	0	0	41	0	0	0	0	
12	0	0	0	0	42	0	0	0	0	
13	0	0	0	0	43	0	0	0	0	
14	0	0	0	0	44	0	0	0	0	
15	0	0	0	0	45	0	0	0	0	
16	0	0	0	0	46	0	0	0	0	
17	0	0	0	0	47	0	0	0	0	
18	0	0	0	0	48	0	0	0	0	
19	0	0	0	0	49	0	0	0	0	
20	0	0	0	0	50	0	0	0	0	
21	0	0	0	0	51	0	0	0	0	
22	0	0	0	0	52	0	0	0	0	
23	0	0	0	0	53	0	0	0	0	
24	0	0	0	0	54	0	0	0	0	
25	0	0	0	0	55	0	0	0	0	
26	0	0	0	0	56	0	0	0	0	
27	0	0	0	0	57	0	0	0	0	
28	0	0	0	0	58	0	0	0	0	
29	0	0	0	0	59	0	0	0	0	
30	0	0	0	0	60	0	0	0	0	

OBSERVER'S NAME (PRINT) _____

OBSERVER'S SIGNATURE John Beirscheit DATE 10-19-21

ORGANIZATION _____

CERTIFIED BY Single for DATE 9-25-21

CONTINUED ON VEO FORM NUMBER _____

VISIBLE EMISSION OBSERVATION FORM

No.

COMPANY NAME Kasson

STREET ADDRESS

CITY STATE ZIP

PHONE (KEY CONTACT) SOURCE ID NUMBER

PROCESS EQUIPMENT OPERATING MODE

CONTROL EQUIPMENT OPERATING MODE

DESCRIBE EMISSION POINT
Stone surge bin discharge
PSB-4

HEIGHT ABOVE GROUND LEVEL 5' HEIGHT RELATIVE TO OBSERVER
Start — End

DISTANCE FROM OBSERVER DIRECTION FROM OBSERVER
Start End Start End

DESCRIBE EMISSIONS
Start Gravel/Stone dust End

EMISSION COLOR IF WATER DROPLET PLUME
Start End Attached ☐ Detached ☐

TIME IN THE PLUME AT WHICH OPACITY WAS DETERMINED
Start happen End

DESCRIBE PLUME BACKGROUND
Start bin End

BACKGROUND COLOR SKY CONDITIONS
Start End Start End

WIND SPEED WIND DIRECTION
Start End Start End

AMBIENT TEMP WET BULB TEMP RH, percent
Start End

Stack with Plume Sun Wind

SOURCE LAYOUT SKETCH Draw North Arrow

ADDITIONAL INFORMATION

OBSERVATION DATE				START TIME		END TIME		
10-19-21				11:05		11:15		
SEC	0	15	30	45	COMMENTS			
MIN								
1	0	0	0	0	31	0	0	0
2	0	0	0	0	32	0	0	0
3	0	0	0	0	33	0	0	0
4	0	0	0	0	34	0	0	0
5	0	0	0	0	35	0	0	0
6	0	0	0	0	36	0	0	0
7	0	0	0	0	37	0	0	0
8	0	0	0	0	38	0	0	0
9	0	0	0	0	39	0	0	0
10	0	0	0	0	40	0	0	0
11	0	0	0	0	41	0	0	0
12	0	0	0	0	42	0	0	0
13	0	0	0	0	43	0	0	0
14	0	0	0	0	44	0	0	0
15	0	0	0	0	45	0	0	0
16	0	0	0	0	46	0	0	0
17	0	0	0	0	47	0	0	0
18	0	0	0	0	48	0	0	0
19	0	0	0	0	49	0	0	0
20	0	0	0	0	50	0	0	0
21	0	0	0	0	51	0	0	0
22	0	0	0	0	52	0	0	0
23	0	0	0	0	53	0	0	0
24	0	0	0	0	54	0	0	0
25	0	0	0	0	55	0	0	0
26	0	0	0	0	56	0	0	0
27	0	0	0	0	57	0	0	0
28	0	0	0	0	58	0	0	0
29	0	0	0	0	59	0	0	0
30	0	0	0	0	60	0	0	0

OBSERVER'S NAME (PRINT)

OBSERVER'S SIGNATURE John Bernhardt DATE 10-19-21

ORGANIZATION

CERTIFIED BY Single ton DATE 9-25-21

CONTINUED ON VEO FORM NUMBER

VISIBLE EMISSION OBSERVATION FORM

No.

COMPANY NAME <i>Dieth Riley : Kasson</i>		
CITY		
STATE		
ZIP		
PHONE (KEY CONTACT)		SOURCE ID NUMBER

PROCESS EQUIPMENT	OPERATING MODE
CONTROL EQUIPMENT	OPERATING MODE

DESCRIBE EMISSION POINT <i>PCA-78 : Conveyor : Material</i>	
<i>From under screen of PSS-52</i>	
HEIGHT ABOVE GROUND LEVEL <i>8'</i>	HEIGHT RELATIVE TO OBSERVER Start <i>4'</i> End
DISTANCE FROM OBSERVER Start <i>30'</i> End	DIRECTION FROM OBSERVER Start <i>West</i> End

DESCRIBE EMISSIONS Start <i>Dust : stone.</i> End	
EMISSION COLOR Start <i>Gray</i> End	IF WATER DROPLET PLUME Attached ☒ Detached ☐
IN THE PLUME AT WHICH OPACITY WAS DETERMINED Start <i>Printer Discharge.</i> End	

DESCRIBE PLUME BACKGROUND Start <i>SKY</i> End	
BACKGROUND COLOR Start <i>Blue.</i> End	SKY CONDITIONS Start <i>Clear</i> End
WIND SPEED Start <i>10-15 mph</i> End	WIND DIRECTION Start <i>SW</i> End
AMBIENT TEMP Start <i>60°F</i> End	WET BULB TEMP RH, percent

Stack with Plume Sun Wind	SOURCE LAYOUT SKETCH 	Draw North Arrow
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ADDITIONAL INFORMATION

OBSERVATION DATE				START TIME		END TIME			
10-19-21				12:00		1200pm-			
SEC	0	15	30	45	COMMENTS				
MIN									
1	5	5	5	5	31	0	0	0	0
2	0	5	5	0	32	0	0	0	0
3	0	0	0	0	33	0	0	0	0
4	0	0	0	0	34	0	0	0	0
5	0	0	0	0	35	0	0	0	0
6	0	0	0	0	36	0	0	0	0
7	0	0	0	0	37	0	0	0	0
8	0	0	0	0	38	0	0	0	0
9	0	0	0	0	39	0	0	0	0
10	0	0	0	5	40	0	5	0	0
11	5	0	0	0	41	0	0	0	0
12	5	0	0	0	42	0	0	0	0
13	0	0	0	0	43	0	0	0	0
14	0	0	0	0	44	0	0	0	0
15	0	5	0	0	45	0	0	0	0
16	0	5	0	5	46	0	0	0	0
17	0	0	0	0	47	0	0	0	0
18	0	0	0	0	48	0	0	0	0
19	0	5	0	0	49	0	0	0	0
20	0	0	0	0	50	0	0	0	0
21	0	0	0	0	51	0	0	0	0
22	0	0	0	0	52	0	0	5	0
23	0	0	0	0	53	0	0	0	0
24	0	0	0	0	54	0	0	0	0
25	0	0	0	0	55	0	0	0	0
26	0	0	0	0	56	0	0	0	0
27	0	0	0	0	57	0	0	0	0
28	0	0	0	0	58	0	0	0	0
29	0	0	0	0	59	0	0	5	0
30	0	0	0	0	60	0	0	0	0

OBSERVER'S NAME (PRINT) <i>PAUL Glatkoher</i>	
OBSERVER'S SIGNATURE <i>Paul Glatkoher</i>	DATE <i>10-19-21</i>
ORGANIZATION	
CERTIFIED BY <i>Singleton</i>	DATE <i>9-25-21</i>
CONTINUED ON VEO FORM NUMBER	

VISIBLE EMISSION OBSERVATION FORM

No.

COMPANY NAME Reth - Riley : Kasson StC.		
STREET ADDRESS		
CITY	STATE	ZIP
PHONE (KEY CONTACT)		SOURCE ID NUMBER

PROCESS EQUIPMENT	OPERATING MODE
CONTROL EQUIPMENT	OPERATING MODE

DESCRIBE EMISSION POINT PCA-17.5 Conveyer - Feeding	
EL-Say Cone Crusher, Stone.	
HEIGHT ABOVE GROUND LEVEL 20'	HEIGHT RELATIVE TO OBSERVER Start 25' End
DISTANCE FROM OBSERVER Start 40' End	DIRECTION FROM OBSERVER Start East. End

DESCRIBE EMISSIONS Start Stone Dust. End	
EMISSION COLOR Start End	IF WATER DROPLET PLUME Attached ☒ Detached ☐
DISTANCE IN THE PLUME AT WHICH OPACITY WAS DETERMINED Start 12" From Head Pulley. End	

DESCRIBE PLUME BACKGROUND Start sky End	
BACKGROUND COLOR Start Blue. End	SKY CONDITIONS Start End
WIND SPEED Start 5-10 End	WIND DIRECTION Start SW End
AMBIENT TEMP Start 65°F End	WET BULB TEMP Rel. percent

Stack with Plume	Sun	Wind
SOURCE LAYOUT SKETCH		
Draw North Arrow		
The sketch shows an 'X' for the Emission Point and a circle for the Observer's Position. A dashed line labeled 'Sun Location Line' connects them at a 140° angle. An arrow labeled 'Wind' points towards the observer. A north arrow is also present.		

ADDITIONAL INFORMATION

OBSERVATION DATE					START TIME	END TIME				
10-18-21					2:00pm	3:00pm				
SEC	0	15	30	45	COMMENTS					
MIN										
1	5	5	5	5	31	5	5	5	5	
2	5	5	5	5	32	5	5	5	5	
3	5	5	5	5	33	5	5	5	5	
4	5	5	5	5	34	5	5	5	5	
5	5	5	5	5	35	5	5	5	5	
6	10	10	5	5	36	5	5	5	5	
7	5	5	5	5	37	5	5	5	5	
8	5	5	5	5	38	5	5	5	5	
9	5	5	5	5	39	5	5	5	0	
10	5	5	5	5	40	5	5	5	0	
11	5	10	5	5	41	5	5	5	5	
12	5	5	5	5	42	5	5	5	5	
13	5	5	5	5	43	5	5	5	5	
14	10	10	5	5	44	5	5	5	5	
15	5	10	5	5	45	5	5	5	5	
16	5	5	5	5	46	5	5	5	5	
17	5	5	5	5	47	5	5	5	5	
18	5	5	5	5	48	5	5	5	5	
19	5	5	5	5	49	5	5	5	5	
20	5	5	5	5	50	5	5	5	5	
21	5	5	5	5	51	5	5	5	5	
22	5	5	5	5	52	5	5	5	5	
23	5	5	5	5	53	5	5	5	5	
24	10	5	5	5	54	5	5	5	5	
25	5	5	5	5	55	5	5	5	5	
26	5	5	5	5	56	5	5	5	5	
27	5	5	5	5	57	5	5	5	5	
28	5	5	5	5	58	5	5	5	5	
29	0	0	5	5	59	5	5	5	5	
30	5	5	5	5	60	5	5	5	5	

OBSERVER'S NAME (PRINT) Paul Glatzke	
OBSERVER'S SIGNATURE <i>Paul Glatzke</i>	DATE 10-18-21
ORGANIZATION	
CERTIFIED BY Singleton	DATE 9-25-21
CONTINUED ON VEO FORM NUMBER	

VISIBLE EMISSION OBSERVATION FORM

No.

COMPANY NAME Kasson

STREET ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE (KEY CONTACT) _____ SOURCE ID NUMBER _____

PROCESS EQUIPMENT _____ OPERATING MODE _____

CONTROL EQUIPMENT _____ OPERATING MODE _____

DESCRIBE EMISSION POINT
Bridge conveyor to surge bin
PCA-74

HEIGHT ABOVE GROUND LEVEL 15' HEIGHT RELATIVE TO OBSERVER
Start 10' End _____

DISTANCE FROM OBSERVER Start 50' End _____ DIRECTION FROM OBSERVER
Start NE End _____

DESCRIBE EMISSIONS
Start Gravel/Stone dust End _____

EMISSION COLOR _____ IF WATER DROPLET PLUME
Start _____ End _____ Attached ☐ Detached ☐

POINT IN THE PLUME AT WHICH OPACITY WAS DETERMINED
deflector End _____

DESCRIBE PLUME BACKGROUND
Start sky End _____

BACKGROUND COLOR Blue SKY CONDITIONS
Start clear End _____

WIND SPEED 10 WIND DIRECTION
Start SW End _____

AMBIENT TEMP 60 WET BULB TEMP _____ RH, percent _____

Stack with Plume _____

Sun  Wind 

SOURCE LAYOUT SKETCH

Draw North Arrow 

X Emission Point

Observer's Position

140°

Sun Location Line

ADDITIONAL INFORMATION _____

OBSERVATION DATE					START TIME	END TIME			
10-19-21					1:16	2:16			
SEC	0	15	30	45	COMMENTS				
MIN									
1	0	0	0	0	31	0	0	0	0
2	0	0	0	0	32	0	0	0	0
3	0	0	0	0	33	0	0	0	0
4	0	0	0	0	34	0	0	0	0
5	0	0	0	0	35	0	0	0	0
6	0	0	0	0	36	0	0	0	0
7	0	0	0	0	37	0	0	0	0
8	0	0	0	0	38	0	0	0	0
9	0	0	0	0	39	0	0	0	0
10	0	0	0	0	40	0	0	0	0
11	0	0	0	0	41	0	0	0	0
12	0	0	0	0	42	0	0	0	0
13	0	0	0	0	43	0	0	0	0
14	0	0	0	0	44	0	0	0	0
15	0	0	0	0	45	0	0	0	0
16	0	0	0	0	46	0	0	0	0
17	0	0	0	0	47	0	0	0	0
18	0	0	0	0	48	0	0	0	0
19	0	0	0	0	49	0	0	0	0
20	0	0	0	0	50	0	0	0	0
21	0	0	0	0	51	0	0	0	0
22	0	0	0	0	52	0	0	0	0
23	0	0	0	0	53	0	0	0	0
24	0	0	0	0	54	0	0	0	0
25	0	0	0	0	55	0	0	0	0
26	0	0	0	0	56	0	0	0	0
27	0	0	0	0	57	0	0	0	0
28	0	0	0	0	58	0	0	0	0
29	0	0	0	0	59	0	0	0	0
30	0	0	0	0	60	0	0	0	0

OBSERVER'S NAME (PRINT) _____

OBSERVER'S SIGNATURE John Benzheit DATE 10-19-21

ORGANIZATION _____

CERTIFIED BY Singleton DATE 9-25-21

CONTINUED ON VEO FORM NUMBER _____

VISIBLE EMISSION OBSERVATION FORM

No.

COMPANY NAME Karson

STREET ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE (KEY CONTACT) _____ SOURCE ID NUMBER _____

PROCESS EQUIPMENT _____ OPERATING MODE _____

CONTROL EQUIPMENT _____ OPERATING MODE _____

DESCRIBE EMISSION POINT
feed to primary screen
PSA-19A

HEIGHT ABOVE GROUND LEVEL 20 HEIGHT RELATIVE TO OBSERVER
Start 15 End _____

DISTANCE FROM OBSERVER 75 DIRECTION FROM OBSERVER
Start _____ End _____

DESCRIBE EMISSIONS
Start Gravel/Stone dust End _____

EMISSION COLOR _____ IF WATER DROPLET PLUME
Start _____ End _____ Attached ☐ Detached ☐

POINT IN THE PLUME AT WHICH OPACITY WAS DETERMINED
top of deck End _____

DESCRIBE PLUME/BACKGROUND
Start sky End _____

BACKGROUND COLOR _____ SKY CONDITIONS
Start _____ End _____

WIND SPEED _____ WIND DIRECTION
Start _____ End _____

AMBIENT TEMP _____ WET BULB TEMP _____ RH, percent _____

Stack with Plume 

Sun 

Wind 

SOURCE LAYOUT SKETCH

Draw North Arrow 

X Emission Point

Observer's Position

Sun Location Line

140°

ADDITIONAL INFORMATION

OBSERVATION DATE				START TIME		END TIME	
10-19-21				11:05		1:15	
SEC	0	15	30	45	COMMENTS		
MIN							
1	0	0	0	0	31	0	0
2	0	0	0	0	32	0	0
3	0	0	0	0	33	0	0
4	0	0	0	0	34	0	0
5	0	0	0	0	35	0	0
6	0	0	0	0	36	0	0
7	0	0	0	0	37	0	0
8	0	0	0	0	38	0	0
9	0	0	0	0	39	0	0
10	0	0	0	0	40	0	0
11	0	0	0	0	41	0	0
12	0	0	0	0	42	0	0
13	0	0	0	0	43	0	0
14	0	0	0	0	44	0	0
15	0	0	0	0	45	0	0
16	0	0	0	0	46	0	0
17	0	0	0	0	47	0	0
18	0	0	0	0	48	0	0
19	0	0	0	0	49	0	0
20	0	0	0	0	50	0	0
21	0	0	0	0	51	0	0
22	0	0	0	0	52	0	0
23	0	0	0	0	53	0	0
24	0	0	0	0	54	0	0
25	0	0	0	0	55	0	0
26	0	0	0	0	56	0	0
27	0	0	0	0	57	0	0
28	0	0	0	0	58	0	0
29	0	0	0	0	59	0	0
30	0	0	0	0	60	0	0

OBSERVER'S NAME (PRINT) _____

OBSERVER'S SIGNATURE John Bernhardt DATE 10-19-21

ORGANIZATION _____

CERTIFIED BY Singleton DATE 9-25-21

CONTINUED ON VEO FORM NUMBER _____

VISIBLE EMISSION OBSERVATION FORM

No.

COMPANY NAME
Rieth-Riley : Kesson Stg.

LET ADDRESS

CITY STATE ZIP

PHONE (KEY CONTACT) SOURCE ID NUMBER

PROCESS EQUIPMENT OPERATING MODE

CONTROL EQUIPMENT OPERATING MODE

DESCRIBE EMISSION POINT
PSA-19 Conveyor Feeding

Screen P-55-52 42" X 130' / PCA19B

HEIGHT ABOVE GROUND LEVEL 25' HEIGHT RELATIVE TO OBSERVER Start 20' End

DISTANCE FROM OBSERVER Start 110' End DIRECTION FROM OBSERVER Start North End

DESCRIBE EMISSIONS
Start Stoned Dust End

EMISSION COLOR IF WATER DROPLET PLUME Attached ☒ Detached ☐

T IN THE PLUME AT WHICH OPACITY WAS DETERMINED Start Head Poly End

DESCRIBE PLUME BACKGROUND
Start Sky End

BACKGROUND COLOR Start Blue End Blue SKY CONDITIONS Start Clear End Clear

WIND SPEED Start 10-15 mph End 10-15 WIND DIRECTION Start SW End

AMBIENT TEMP Start 60°F End WET BULB TEMP RH, percent

Stack with Plume Sun Wind

SOURCE LAYOUT SKETCH Draw North Arrow

X Emission Point

Observer's Position

140°

Sun Location Line

ADDITIONAL INFORMATION

OBSERVATION DATE 10-19-72		START TIME 10:00 AM		END TIME 11:00 AM	
SEC	0	15	30	45	COMMENTS
1	0	0	0	0	31 0 0 0 0
2	0	0	0	0	32 0 0 0 0
3	0	0	0	0	33 0 0 0 0
4	0	0	0	0	34 0 0 0 0
5	0	0	5	0	35 0 0 0 0
6	0	0	5	5	36 0 0 0 0
7	0	5	0	0	37 0 0 0 0
8	5	0	5	0	38 0 0 0 0
9	0	0	0	0	39 0 0 0 0
10	0	0	0	0	40 0 0 0 0
11	0	0	0	0	41 0 0 0 0
12	0	0	0	0	42 0 0 0 0
13	0	0	0	0	43 0 0 0 0
14	0	0	0	0	44 0 0 0 0
15	0	0	0	0	45 0 0 0 0
16	0	0	0	0	46 0 0 0 0
17	0	0	0	0	47 0 0 0 0
18	0	0	0	0	48 0 0 0 0
19	0	0	0	0	49 0 0 0 0
20	0	0	0	0	50 0 0 0 0
21	0	0	0	0	51 0 0 0 0
22	0	0	0	0	52 5 0 0 0
23	0	0	0	0	53 0 0 0 0
24	0	5	0	0	54 0 0 0 0
25	0	0	0	0	55 0 0 0 0
26	0	0	0	0	56 0 0 0 0
27	0	0	0	0	57 0 0 0 0
28	0	0	0	0	58 0 0 0 0
29	0	0	0	0	59 0 0 0 0
30	0	0	0	0	60 0 0 0 0

OBSERVER'S NAME (PRINT) **Paul C. Chober**

OBSERVER'S SIGNATURE **Paul C. Chober** DATE **10-19-72**

ORGANIZATION

CERTIFIED BY **Smyleton** DATE **9-25-72**

CONTINUED ON VEO FORM NUMBER

VISIBLE EMISSION OBSERVATION FORM

No.

COMPANY NAME Kasim S+G

SET ADDRESS

CITY STATE ZIP

PHONE (KEY CONTACT) SOURCE ID NUMBER

PROCESS EQUIPMENT OPERATING MODE

CONTROL EQUIPMENT OPERATING MODE

DESCRIBE EMISSION POINT
Gravel transfer conveyor to mobile stacker PCA-70

HEIGHT ABOVE GROUND LEVEL 3' HEIGHT RELATIVE TO OBSERVER Start — End

DISTANCE FROM OBSERVER 50' DIRECTION FROM OBSERVER Start NE End

DESCRIBE EMISSIONS
Start Gravel/Stone dust

EMISSION COLOR IF WATER DROPLET PLUME
Start End Attached ☐ Detached ☐

IT IN THE PLUME AT WHICH OPACITY WAS DETERMINED
End

DESCRIBE PLUME/BACKGROUND
Start Blue End

BACKGROUND COLOR SKY CONDITIONS
Start Blue End Start End

WIND SPEED 10 WIND DIRECTION 15
Start SW End

AMBIENT TEMP 60 WET BULB TEMP RH, percent
Start End

Stack with Plume Sun Wind

SOURCE LAYOUT SKETCH Draw North Arrow

X Emission Point

Observer's Position

140°

Sun Location Line

ADDITIONAL INFORMATION

OBSERVATION DATE		START TIME		END TIME	
10-19-21		2:18		3:20 PM	
SEC	0	15	30	45	COMMENTS
MIN					
1	0	0	0	0	31 0 0 0 0
2	0	0	0	0	32 0 0 0 0
3	0	0	0	0	33 0 0 0 0
4	0	0	0	0	34 0 0 0 0
5	0	0	0	0	35 0 0 0 0
6	0	0	0	0	36 0 0 0 0
7	0	0	0	0	37 0 0 0 0
8	0	0	0	0	38 0 0 0 0
9	0	0	0	0	39 0 0 0 0
10	0	0	0	0	40 0 0 0 0
11	0	0	0	0	41 0 0 0 0
12	0	0	0	0	42 0 0 0 0
13	0	0	0	0	43 0 0 0 0
14	0	0	0	0	44 0 0 0 0
15	0	0	0	0	45 0 0 0 0
16	0	0	0	0	46 0 0 0 0
17	0	0	0	0	47 0 0 0 0
18	0	0	0	0	48 0 0 0 0
19	0	0	0	0	49 0 0 0 0
20	0	0	0	0	50 0 0 0 0
21	0	0	0	0	51 0 0 0 0
22	0	0	0	0	52 0 0 0 0
23	0	0	0	0	53 0 0 0 0
24	0	0	0	0	54 0 0 0 0
25	0	0	0	0	55 0 0 0 0
26	0	0	0	0	56 0 0 0 0
27	0	0	0	0	57 0 0 0 0
28	0	0	0	0	58 0 0 0 0
29	0	0	0	0	59 0 0 0 0
30	0	0	0	0	60 0 0 0 0

OBSERVER'S NAME (PRINT)

OBSERVER'S SIGNATURE John Bernhardt DATE 10-19-21

ORGANIZATION

CERTIFIED BY Singleton DATE 9-25-21

CONTINUED ON VEO FORM NUMBER

VISIBLE EMISSION OBSERVATION FORM

No.

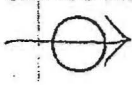
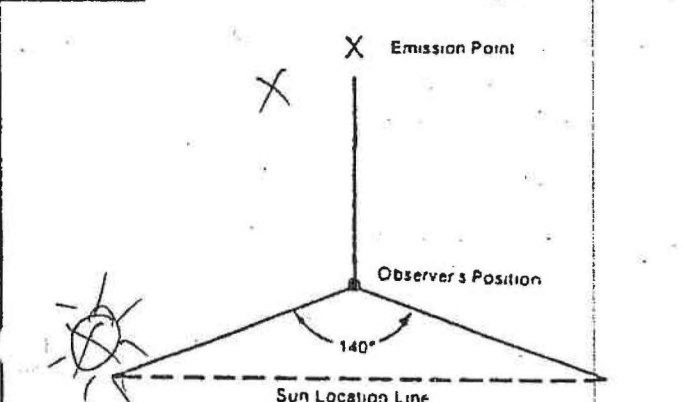
COMPANY NAME <i>Karron</i>		
STREET ADDRESS		
CITY	STATE	ZIP
PHONE (KEY CONTACT)		SOURCE ID NUMBER

PROCESS EQUIPMENT	OPERATING MODE
CONTROL EQUIPMENT	OPERATING MODE

DESCRIBE EMISSION POINT <i>Stone Conveyor to surge bin</i> <i>PTC-27</i>	
HEIGHT ABOVE GROUND LEVEL <i>15</i>	HEIGHT RELATIVE TO OBSERVER Start <i>10</i> End
DISTANCE FROM OBSERVER Start <i>50</i> End	DIRECTION FROM OBSERVER Start End

DESCRIBE EMISSIONS Start <i>Gravel/Stone dust</i> End			
EMISSION COLOR		IF WATER DROPLET PLUME	
Start End	Attached ☐	Detached ☐	
IT IN THE PLUME AT WHICH OPACITY WAS DETERMINED			
Start <i>Bin top</i> End			

DESCRIBE PLUME BACKGROUND			
Start <i>Sky</i> End		SKY CONDITIONS	
BACKGROUND COLOR		Start <i>clear</i> End	
WIND SPEED		WIND DIRECTION	
Start End	Start End		
AMBIENT TEMP		WET BULB TEMP RH, percent	
Start End			

Stack with Plume	
Sun	
Wind	
	

OBSERVATION DATE					START TIME		END TIME		
10-19-21					11:05		11:15		
SEC	0	15	30	45	COMMENTS				
MIN									
1	0	0	0	0	31	0	0	0	0
2	0	0	0	0	32	0	0	0	0
3	0	0	0	0	33	0	0	0	0
4	0	0	0	0	34	0	0	0	0
5	0	0	0	0	35	0	0	0	0
6	0	0	0	0	36	0	0	0	0
7	0	0	0	0	37	0	0	0	0
8	0	0	0	0	38	0	0	0	0
9	0	0	0	0	39	0	0	0	0
10	0	0	0	0	40	0	0	0	0
11	0	0	0	0	41	0	0	0	0
12	0	0	0	0	42	0	0	0	0
13	0	0	0	0	43	0	0	0	0
14	0	0	0	0	44	0	0	0	0
15	0	0	0	0	45	0	0	0	0
16	0	0	0	0	46	0	0	0	0
17	0	0	0	0	47	0	0	0	0
18	0	0	0	0	48	0	0	0	0
19	0	0	0	0	49	0	0	0	0
20	0	0	0	0	50	0	0	0	0
21	0	0	0	0	51	0	0	0	0
22	0	0	0	0	52	0	0	0	0
23	0	0	0	0	53	0	0	0	0
24	0	0	0	0	54	0	0	0	0
25	0	0	0	0	55	0	0	0	0
26	0	0	0	0	56	0	0	0	0
27	0	0	0	0	57	0	0	0	0
28	0	0	0	0	58	0	0	0	0
29	0	0	0	0	59	0	0	0	0
30	0	0	0	0	60	0	0	0	0

OBSERVER'S NAME (PRINT)	
OBSERVER'S SIGNATURE <i>John Bernhart</i>	DATE <i>10-19-21</i>
ORGANIZATION	
CERTIFIED BY <i>Simpleton</i>	DATE <i>9-28-21</i>
CONTINUED ON VEO FORM NUMBER	

VISIBLE EMISSION OBSERVATION FORM

No.

COMPANY NAME <i>Kasim S+br</i>		
STREET ADDRESS		
CITY	STATE	ZIP
PHONE (KEY CONTACT)	SOURCE ID NUMBER	

PROCESS EQUIPMENT	OPERATING MODE
CONTROL EQUIPMENT	OPERATING MODE

DESCRIBE EMISSION POINT <i>Musaba stacker</i> <i>PSA-20</i>	
HEIGHT ABOVE GROUND LEVEL <i>25</i>	HEIGHT RELATIVE TO OBSERVER Start <i>20</i> End
DISTANCE FROM OBSERVER Start <i>100</i> End	DIRECTION FROM OBSERVER Start <i>NNW</i> End

DESCRIBE EMISSIONS Start <i>Gravel / Stone dust</i> End	
EMISSION COLOR Start End	IF WATER DROPLET PLUME Attached ☐ Detached ☐
T IN THE PLUME AT WHICH OPACITY WAS DETERMINED Start <i>top of pile</i> End	

DESCRIBE PLUME BACKGROUND Start <i>Blue</i> End	
BACKGROUND COLOR Start <i>Blue</i> End	SKY CONDITIONS Start End
WIND SPEED Start <i>10</i> End <i>15</i>	WIND DIRECTION Start <i>SW</i> End
AMBIENT TEMP Start <i>60</i> End	WET BULB TEMP RH, percent

Stack with Plume Sun Wind	SOURCE LAYOUT SKETCH Draw North Arrow X Emission Point Observer's Position 140° Sun Location Line
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ADDITIONAL INFORMATION

OBSERVATION DATE # 10-19-21					START TIME 4:00 PM	END TIME 5:00 PM			
SEC MIN	0	15	30	45	COMMENTS				
1	0	0	0	0	31	0	0	0	0
2	0	0	0	0	32	0	0	0	0
3	0	0	0	0	33	0	0	0	0
4	0	0	0	0	34	0	0	0	0
5	0	0	0	0	35	0	0	0	0
6	0	0	0	0	36	0	0	0	0
7	0	0	0	0	37	0	0	0	0
8	0	0	0	0	38	0	0	0	0
9	0	0	0	0	39	0	0	0	0
10	0	0	0	0	40	0	0	0	0
11	0	0	0	0	41	0	0	0	0
12	0	0	0	0	42	0	0	0	0
13	0	0	0	0	43	0	0	0	0
14	0	0	0	0	44	0	0	0	0
15	0	0	0	0	45	0	0	0	0
16	0	0	0	0	46	0	0	0	0
17	0	0	0	0	47	0	0	0	0
18	0	0	0	0	48	0	0	0	0
19	0	0	0	0	49	0	0	0	0
20	0	0	0	0	50	0	0	0	0
21	0	0	0	0	51	0	0	0	0
22	0	0	0	0	52	0	0	0	0
23	0	0	0	0	53	0	0	0	0
24	0	0	0	0	54	0	0	0	0
25	0	0	0	0	55	0	0	0	0
26	0	0	0	0	56	0	0	0	0
27	0	0	0	0	57	0	0	0	0
28	0	0	0	0	58	0	0	0	0
29	0	0	0	0	59	0	0	0	0
30	0	0	0	0	60	0	0	0	0

OBSERVER'S NAME (PRINT)	
OBSERVER'S SIGNATURE <i>John Berschert</i>	DATE <i>10-19-21</i>
ORGANIZATION	
CERTIFIED BY <i>Singleton</i>	DATE <i>9-25-21</i>
CONTINUED ON VEO FORM NUMBER	

VISIBLE EMISSION OBSERVATION FORM

No.

COMPANY NAME
Rieth-Riley : Kasson S & G

STREET ADDRESS

CITY STATE ZIP

PHONE (KEY CONTACT) SOURCE ID NUMBER

PROCESS EQUIPMENT OPERATING MODE

CONTROL EQUIPMENT OPERATING MODE

DESCRIBE EMISSION POINT
PSS-43 SCI 7'x20' Screen
(Primary)

HEIGHT ABOVE GROUND LEVEL
25'

HEIGHT RELATIVE TO OBSERVER
Start **25'** End

DISTANCE FROM OBSERVER
Start **60'** End

DIRECTION FROM OBSERVER
Start **NW** End

DESCRIBE EMISSIONS

Start End

EMISSION COLOR IF WATER DROPLET PLUME
Start End Attached ☐ Detached ☐

POINT IN THE PLUME AT WHICH OPACITY WAS DETERMINED
Start **Over entire Screen** End

DESCRIBE PLUME BACKGROUND

Start **sky** End

BACKGROUND COLOR SKY CONDITIONS
Start **Blue** End Start End

WIND SPEED WIND DIRECTION
Start **5-10** End Start **SE** End

AMBIENT TEMP WET BULB TEMP RH. percent
Start **60°F** End

Stack with Plume
Sun
Wind

SOURCE LAYOUT SKETCH Draw North Arrow

North

X Emission Point

Observer's Position

140°

Sun Location Line

ADDITIONAL INFORMATION

OBSERVATION DATE					START TIME		END TIME			
10-18-21					10:35 AM		11:35 AM			
SEC	0	15	30	45	COMMENTS					
MIN										
1	0	0	0	0	31	0	0	5	0	
2	0	0	0	0	32	0	0	5	0	
3	0	5	0	0	34	5	0	5	0	
4	0	0	0	0	35	0	0	0	0	
5	5	5	0	0	36	0	0	0	0	
6	0	0	0	0	37	0	5	0	0	
7	0	0	0	0	38	0	0	0	0	
8	5	0	0	0	39	0	5	0	0	
9	0	0	0	0	40	0	0	0	0	
10	5	0	0	0	41	0	0	0	5	
11	5	5	0	5	42	0	0	0	0	
12	0	0	0	0	43	0	0	0	0	
13	0	0	5	0	44	0	0	0	0	
14	0	0	5	0	45	0	0	0	0	
15	0	0	5	0	46	0	0	0	0	
16	5	5	0	0	47	0	0	0	0	
17	0	5	5	0	48	0	0	0	0	
18	0	0	0	0	49	0	0	0	0	
19	0	0	0	0	50	0	0	0	0	
20	0	5	0	5	51	0	0	0	0	
21	0	0	0	0	52	5	0	0	0	
22	0	0	0	0	53	0	0	0	0	
23	0	0	0	0	54	0	0	0	0	
24	0	0	0	0	55	0	0	0	0	
25	0	0	0	0	56	0	0	0	0	
26	0	0	0	0	57	0	0	0	0	
27	0	0	5	10	58	0	0	0	0	
28	5	5	10	5	59	0	0	0	0	
29	5	5	0	0	33	0	0	0	0	
30	0	0	0	5	60	0	0	0	0	

OBSERVER'S NAME (PRINT)
Paul Glatzhofer

OBSERVER'S SIGNATURE
Paul Glatzhofer

DATE
10-18-21

ORGANIZATION

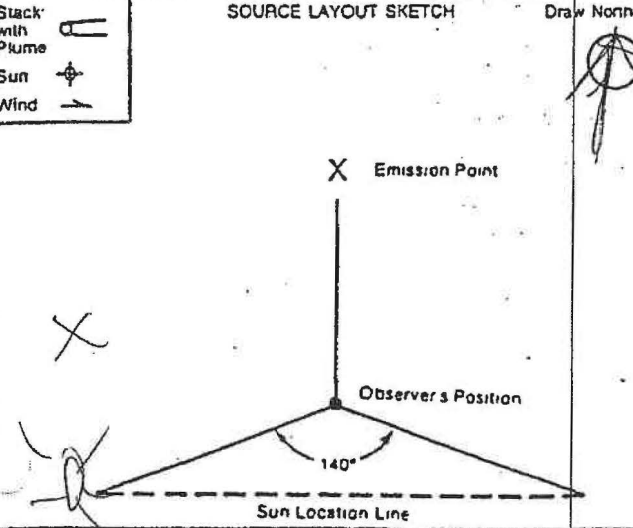
CERTIFIED BY
Single km

DATE
9-25-21

CONTINUED ON VEO FORM NUMBER

VISIBLE EMISSION OBSERVATION FORM

No.

COMPANY NAME <i>Karron</i>		
STREET ADDRESS		
CITY STATE ZIP		
PHONE (KEY CONTACT)		SOURCE ID NUMBER
PROCESS EQUIPMENT		OPERATING MODE
CONTROL EQUIPMENT		OPERATING MODE
DESCRIBE EMISSION POINT <i>SW. primary screen discharge</i>		<i>Sand Wash Plant</i>
HEIGHT ABOVE GROUND LEVEL <i>3</i>	HEIGHT RELATIVE TO OBSERVER Start — End	
DISTANCE FROM OBSERVER Start <i>30</i> End	DIRECTION FROM OBSERVER Start <i>EVE</i> End	
DESCRIBE EMISSIONS Start <i>gravel/stone dust</i> End		
EMISSION COLOR		IF WATER DROPLET PLUME Attached ☐ Detached ☐
T IN THE PLUME AT WHICH OPACITY WAS DETERMINED Start <i>hopper</i> End		
DESCRIBE PLUME BACKGROUND Start <i>sky</i> End		
BACKGROUND COLOR		SKY CONDITIONS
WIND SPEED		WIND DIRECTION
AMBIENT TEMP		WET BULB TEMP RH, percent
Stack with Plume Sun Wind SOURCE LAYOUT SKETCH 		
ADDITIONAL INFORMATION		

OBSERVATION DATE <i>10-19-21</i>				START TIME <i>9:00</i>		END TIME <i>10:00</i>		
SEC	0	15	30	45	COMMENTS			
MIN								
1	0	0	0	0	31	0	0	0
2	0	0	0	0	32	0	0	0
3	0	0	0	0	33	0	0	0
4	0	0	0	0	34	0	0	0
5	0	0	0	0	35	0	0	0
6	0	0	0	0	36	0	0	0
7	0	0	0	0	37	0	0	0
8	0	0	0	0	38	0	0	0
9	0	0	0	0	39	0	0	0
10	0	0	0	0	40	0	0	0
11	0	0	0	0	41	0	0	0
12	0	0	0	0	42	0	0	0
13	0	0	0	0	43	0	0	0
14	0	0	0	0	44	0	0	0
15	0	0	0	0	45	0	0	0
16	0	0	0	0	46	0	0	0
17	0	0	0	0	47	0	0	0
18	0	0	0	0	48	0	0	0
19	0	0	0	0	49	0	0	0
20	0	0	0	0	50	0	0	0
21	0	0	0	0	51	0	0	0
22	0	0	0	0	52	0	0	0
23	0	0	0	0	53	0	0	0
24	0	0	0	0	54	0	0	0
25	0	0	0	0	55	0	0	0
26	0	0	0	0	56	0	0	0
27	0	0	0	0	57	0	0	0
28	0	0	0	0	58	0	0	0
29	0	0	0	0	59	0	0	0
30	0	0	0	0	60	0	0	0
OBSERVER'S NAME (PRINT)								
OBSERVER'S SIGNATURE <i>John Bencheit</i>							DATE <i>10-19-21</i>	
ORGANIZATION								
CERTIFIED BY <i>Singleton</i>							DATE <i>9-28-21</i>	
CONTINUED ON VEO FORM NUMBER								

VISIBLE EMISSION OBSERVATION FORM

No.

COMPANY NAME
O'Brien-Riley Kerson S&C

STREET ADDRESS

CITY STATE ZIP

PHONE (KEY CONTACT) SOURCE ID NUMBER

PROCESS EQUIPMENT OPERATING MODE

CONTROL EQUIPMENT OPERATING MODE

DESCRIBE EMISSION POINT
PCA-72 : Conveyor: Metso 220

Discharge slow

HEIGHT ABOVE GROUND LEVEL HEIGHT RELATIVE TO OBSERVER
4' Start End

DISTANCE FROM OBSERVER DIRECTION FROM OBSERVER
Start *20'* End Start *SE* End

DESCRIBE EMISSIONS
Start *Crushed stone + Dust* End

EMISSION COLOR IF WATER DROPLET PLUME
Start End Attached ☒ Detached ☐

POINT IN THE PLUME AT WHICH OPACITY WAS DETERMINED
Start *Hard Pulley* End

DESCRIBE PLUME BACKGROUND
Start *sky* End

BACKGROUND COLOR SKY CONDITIONS
Start *Blue* End Start End

WIND SPEED WIND DIRECTION
Start *5-10* End Start *SW* End

AMBIENT TEMP WET BULB TEMP RH, percent
Start *65°F* End

Stack with Plume
Sun
Wind

SOURCE LAYOUT SKETCH Draw North Arrow

X Emission Point

Observer's Position

140°

Sun Location Line

ADDITIONAL INFORMATION

OBSERVATION DATE					START TIME	END TIME				
10-18-21					3:05 PM	4:05 PM				
SEC	0	15	30	45	COMMENTS					
MIN										
1	5	5	5	5	37	5	5	5	5	
2	5	5	5	5	32	5	5	5	5	
3	5	5	5	5	33	5	5	5	5	
4	5	5	5	5	34	5	5	5	5	
5	5	5	5	5	35	5	5	5	5	
6	5	5	5	5	36	5	5	5	5	
7	5	5	5	5	37	5	5	5	5	
8	5	5	5	5	38	5	5	5	5	
9	5	5	5	5	39	5	5	5	5	
10	5	5	5	5	40	5	5	5	5	
11	5	5	5	5	41	5	5	5	5	
12	5	5	5	5	42	5	5	5	5	
13	5	5	5	5	43	5	5	5	5	
14	5	5	5	5	44	5	5	5	5	
15	5	5	5	5	45	5	5	5	5	
16	5	5	5	5	46	5	5	5	5	
17	5	5	5	5	47	5	5	5	5	
18	5	5	5	5	48	5	5	5	5	
19	5	5	5	5	49	5	5	5	5	
20	5	5	5	5	50	5	5	5	5	
21	5	5	5	5	51	5	5	5	5	
22	5	5	5	5	52	5	5	5	5	
23	5	5	5	5	53	5	5	5	5	
24	5	5	5	5	54	5	5	5	5	
25	5	5	5	5	55	0	0	5	5	
26	5	5	5	5	56	0	5	0	0	
27	5	5	5	5	57	0	0	0	5	
28	5	5	5	5	58	0	0	0	5	
29	5	5	5	5	59	0	0	5	0	
30	5	5	5	5	60	5	0	0	0	

OBSERVER'S NAME (PRINT)
Paul Glatzhofer

OBSERVER'S SIGNATURE
Paul Glatzhofer

DATE
10-18-21

ORGANIZATION

CERTIFIED BY
Single km

DATE
9-25-21

CONTINUED ON VEO FORM NUMBER

VISIBLE EMISSION OBSERVATION FORM

No.

COMPANY NAME <i>Karron 5+6</i>		
STREET ADDRESS		
CITY <i>Maple City</i>	STATE <i>MI</i>	ZIP
PHONE (KEY CONTACT)	SOURCE ID NUMBER	

PROCESS EQUIPMENT <i>slacker PSA-36</i>	OPERATING MODE <i>yes</i>
CONTROL EQUIPMENT <i>N/A</i>	OPERATING MODE

DESCRIBE EMISSION POINT <i>drop to stockpile</i>	
HEIGHT ABOVE GROUND LEVEL <i>15</i>	HEIGHT RELATIVE TO OBSERVER Start <i>10</i> End
DISTANCE FROM OBSERVER Start End	DIRECTION FROM OBSERVER Start End

DESCRIBE EMISSIONS	
Start End	IF WATER DROPLET PLUME Attached ☐ Detached ☐
POINT IN THE PLUME AT WHICH OPACITY WAS DETERMINED Start End	

DESCRIBE PLUME BACKGROUND	
Start End	SKY CONDITIONS Start End
BACKGROUND COLOR Start End	WIND DIRECTION Start End
WIND SPEED Start End	AMBIENT TEMP Start End
WET BULB TEMP Start End	RH, percent

Stack with Plume Sun Wind	SOURCE LAYOUT SKETCH Draw North Arrow
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ADDITIONAL INFORMATION

OBSERVATION DATE <i>10-18-21</i>		START TIME <i>2:45</i>		END TIME <i>3:45</i>					
SEC	MIN	0	15	30	45	COMMENTS			
1	0	5	0	0	5	0	5	0	31
2	5	5	10	5	0	0	5	0	32
3	5	5	5	5	10	5	0	5	33
4	5	5	5	5	0	5	5	0	34
5	5	0	5	5	5	0	0	5	35
6	5	0	5	5	5	0	5	5	36
7	0	0	0	0	5	0	10	5	37
8	0	0	0	0	5	0	0	10	38
9	5	0	5	0	5	5	5	5	39
10	0	0	0	5	0	0	5	0	40
11	5	10	5	5	0	5	0	0	41
12	5	0	0	0	10	5	5	5	42
13	0	0	5	0	0	5	5	5	43
14	0	0	0	0	5	0	5	0	44
15	5	0	5	0	0	0	5	5	45
16	0	5	5	0	0	5	0	0	46
17	0	0	0	5	0	0	5	0	47
18	0	0	0	0	5	0	0	5	48
19	0	0	0	0	0	0	5	0	49
20	0	0	0	0	5	0	10	5	50
21	0	0	0	0	0	0	0	0	51
22	0	0	0	0	0	5	0	0	52
23	0	0	0	0	0	0	0	0	53
24	0	0	5	0	0	0	0	0	54
25	0	0	0	0	0	5	0	0	55
26	0	0	0	0	5	10	5	10	56
27	0	5	5	0	5	0	5	5	57
28	0	0	0	5	5	5	0	5	58
29	0	0	5	0	5	0	5	5	59
30	0	0	0	0	0	5	0	0	60

OBSERVER'S NAME (PRINT)	
OBSERVER'S SIGNATURE <i>John Bernhart</i>	DATE <i>10-18-21</i>
ORGANIZATION	
CERTIFIED BY <i>Singleton</i>	DATE <i>9-25-21</i>
CONTINUED ON VED FORM NUMBER	

VISIBLE EMISSION OBSERVATION FORM

No.

COMPANY NAME Brieth-Riley (Kasson St)

STREET ADDRESS

CITY Maple City STATE MI ZIP

PHONE (KEY CONTACT) SOURCE ID NUMBER

PROCESS EQUIPMENT Conversion PCA-89 OPERATING MODE yes

CONTROL EQUIPMENT water spray OPERATING MODE yes

DESCRIBE EMISSION POINT drop to stacker

HEIGHT ABOVE GROUND LEVEL 5 HEIGHT RELATIVE TO OBSERVER Start 5 End

DISTANCE FROM OBSERVER Start End DIRECTION FROM OBSERVER Start End

DESCRIBE EMISSIONS

Start End

EMISSION COLOR IF WATER DROPLET PLUME Attached ☐ Detached ☐

POINT IN THE PLUME AT WHICH OPACITY WAS DETERMINED Start End

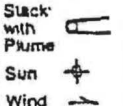
DESCRIBE PLUME BACKGROUND

Start sky End

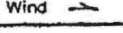
BACKGROUND COLOR SKY CONDITIONS Start p. cloudy End same

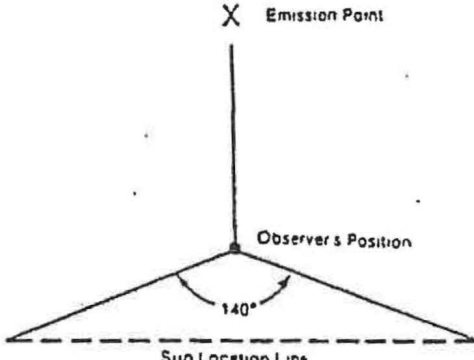
WIND SPEED 5 WIND DIRECTION Start End

AMBIENT TEMP 10 WET BULB TEMP RH, percent

Stack with Plume 

Sun 

Wind 

SOURCE LAYOUT SKETCH Draw North Arrow 

OBSERVATION DATE		START TIME				END TIME			
10-18-21		2:45				3:45			
SEC	0	15	30	45	COMMENTS				
MIN									
1	0	0	0	0	-0	0	0	0	31
2	0	0	0	0	0	0	0	0	32
3	0	0	0	0	0	0	0	0	33
4	0	0	0	0	0	0	0	0	34
5	0	0	0	0	0	0	0	0	35
6	0	0	0	0	0	0	0	0	36
7	0	0	0	0	0	0	0	0	37
8	0	0	0	0	5	0	5	0	38
9	0	0	0	0	5	0	0	0	39
10	0	0	0	0	0	0	0	0	40
11	0	0	0	0	0	0	5	0	41
12	0	0	0	0	5	0	5	0	42
13	0	0	0	0	0	5	0	0	43
14	0	0	0	0	0	0	0	5	44
15	0	0	0	0	0	0	0	0	45
16	0	0	0	0	0	0	0	0	46
17	0	0	0	0	0	5	0	0	47
18	0	0	0	0	0	0	0	0	48
19	0	0	0	0	0	0	0	0	49
20	0	0	0	0	0	0	0	0	50
21	0	0	0	0	0	0	0	0	51
22	0	0	0	0	0	0	0	5	52
23	0	0	0	0	0	0	0	0	53
24	0	0	0	0	0	0	0	0	54
25	0	0	0	0	0	0	0	0	55
26	0	5	0	0	5	5	0	5	56
27	0	0	0	0	5	5	5	5	57
28	0	0	0	0	5	0	0	5	58
29	0	0	0	0	0	5	0	5	59
30	0	0	0	0	0	0	5	0	60

OBSERVER'S NAME (PRINT)

OBSERVER'S SIGNATURE John Berscheid DATE 10-18-21

ORGANIZATION

CERTIFIED BY Singleton DATE 9-25-21

CONTINUED ON VEO FORM NUMBER

VISIBLE EMISSION OBSERVATION FORM

No.

COMPANY NAME <i>Kasson</i>		
STREET ADDRESS		
CITY	STATE	ZIP
PHONE (KEY CONTACT)		SOURCE ID NUMBER

PROCESS EQUIPMENT	OPERATING MODE
CONTROL EQUIPMENT	OPERATING MODE

DESCRIBE EMISSION POINT <i>Primary screen SE discharge</i> <i>(Stone) Feeding Metso 220° PCA-76A</i>	
HEIGHT ABOVE GROUND LEVEL <i>10</i>	HEIGHT RELATIVE TO OBSERVER Start <i>5</i> End
DISTANCE FROM OBSERVER Start <i>50</i> End	DIRECTION FROM OBSERVER Start End

DESCRIBE EMISSIONS Start <i>Travel/Stone dust</i> End	
EMISSION COLOR	IF WATER DROPLET PLUME Attached ☐ Detached ☐
T IN THE PLUME AT WHICH OPACITY WAS DETERMINED Start <i>hopper</i> End	

DESCRIBE PLUME BACKGROUND Start <i>sky</i> End	
BACKGROUND COLOR	SKY CONDITIONS
Start End	Start End
WIND SPEED Start <i>lt</i> End	WIND DIRECTION Start <i>var</i> End
AMBIENT TEMP Start <i>55</i> End	WET BULB TEMP RH, percent

Stack with Plume Sun Wind	SOURCE LAYOUT SKETCH
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ADDITIONAL INFORMATION

OBSERVATION DATE					START TIME		END TIME		
10-19-21					11:05		1:15		
SEC MIN	0	15	30	45	COMMENTS				
1	0	0	0	0	31	0	0	0	0
2	0	0	0	0	32	0	0	0	0
3	0	0	0	0	33	0	0	0	0
4	0	0	0	0	34	0	0	0	0
5	0	0	0	0	35	0	0	0	0
6	0	0	0	0	36	0	0	0	0
7	0	0	0	0	37	0	0	0	0
8	0	0	0	0	38	0	0	0	0
9	0	0	0	0	39	0	0	0	0
10	0	0	0	0	40	0	0	0	0
11	0	0	0	0	41	0	0	0	0
12	0	0	0	0	42	0	0	0	0
13	0	0	0	0	43	0	0	0	0
14	0	0	0	0	44	0	0	0	0
15	0	0	0	0	45	0	0	0	0
16	0	0	0	0	46	0	0	0	0
17	0	0	0	0	47	0	0	0	0
18	0	0	0	0	48	0	0	0	0
19	0	0	0	0	49	0	0	0	0
20	0	0	0	0	50	0	0	0	0
21	0	0	0	0	51	0	0	0	0
22	0	0	0	0	52	0	0	0	0
23	0	0	0	0	53	0	0	0	0
24	0	0	0	0	54	0	0	0	0
25	0	0	0	0	55	0	0	0	0
26	0	0	0	0	56	0	0	0	0
27	0	0	0	0	57	0	0	0	0
28	0	0	0	0	58	0	0	0	0
29	0	0	0	0	59	0	0	0	0
30	0	0	0	0	60	0	0	0	0

OBSERVER'S NAME (PRINT)	
OBSERVER'S SIGNATURE <i>John Bernhardt</i>	DATE <i>10-19-21</i>
ORGANIZATION	
CERTIFIED BY <i>Schlefer</i>	DATE <i>9-25-21</i>
CONTINUED ON VED FORM NUMBER	

VISIBLE EMISSION OBSERVATION FORM

No.

COMPANY NAME
Rieth-Riley : Kasson S & C.

STREET ADDRESS

CITY STATE ZIP

PHONE (KEY CONTACT) SOURCE ID NUMBER

PROCESS EQUIPMENT OPERATING MODE

CONTROL EQUIPMENT OPERATING MODE

DESCRIBE EMISSION POINT
PSA-39 - Superior Conv.

36" X 60"

HEIGHT ABOVE GROUND LEVEL HEIGHT RELATIVE TO OBSERVER
20' Start **18'** End

DISTANCE FROM OBSERVER DIRECTION FROM OBSERVER
Start **40'** End Start **East** End

DESCRIBE EMISSIONS
Start **Stone & Dust** End

EMISSION COLOR IF WATER DROPLET PLUME
Start End Attached ☐ Detached ☐

POINT IN THE PLUME AT WHICH OPACITY WAS DETERMINED
Start **Head Pully** End

DESCRIBE PLUME BACKGROUND
Start **sky** End

BACKGROUND COLOR SKY CONDITIONS
Start **Blue** End Start End

WIND SPEED WIND DIRECTION
Start **5-10 mph** End Start **SW** End

AMBIENT TEMP WET BULB TEMP RH, percent
Start **65°F** End

Stack with Plume
Sun ☒
Wind ☒

SOURCE LAYOUT SKETCH Draw North Arrow

North

X - Emission Point

Observer's Position

140°

Sun Location Line

wind.

ADDITIONAL INFORMATION

OBSERVATION DATE				START TIME		END TIME			
10-18-21				4:05 PM		5:05 PM			
SEC MIN	0	15	30	45	COMMENTS				
1	0	5	5	5	31	5	5	5	5
2	5	5	5	5	32	5	5	5	5
3	0	0	0	0	33	5	5	5	5
4	0	0	0	0	34	5	5	5	5
5	5	5	5	5	35	5	5	5	5
6	5	5	5	5	36	5	5	5	5
7	5	5	5	5	37	5	5	5	5
8	5	5	5	5	38	5	5	5	5
9	5	5	5	5	39	5	5	5	5
10	5	5	5	5	40	5	5	5	5
11	5	5	5	5	41	5	5	5	5
12	5	5	5	5	42	5	5	5	5
13	5	5	5	5	43	5	5	5	5
14	5	5	5	5	44	5	5	5	5
15	5	5	5	5	45	5	5	5	5
16	5	5	5	5	46	5	5	5	5
17	5	5	5	5	47	5	5	5	5
18	5	5	5	5	48	5	5	5	5
19	5	5	5	5	49	5	5	5	5
20	5	5	5	5	50	5	5	5	5
21	5	5	5	5	51	5	5	5	5
22	5	5	5	5	52	5	5	5	5
23	5	5	5	5	53	5	5	5	5
24	5	5	5	5	54	5	5	5	5
25	5	5	5	5	55	5	5	5	5
26	5	5	5	5	56	0	0	0	5
27	5	5	5	5	57	0	0	0	0
28	5	5	5	5	58	0	0	0	0
29	5	5	5	5	59	0	0	0	0
30	5	5	5	5	60	0	0	0	0

OBSERVER'S NAME (PRINT)
Paul Clotzhober

OBSERVER'S SIGNATURE
Paul Clotzhober

DATE
10-18-21

ORGANIZATION

CERTIFIED BY
Sinclair

DATE
9-25-21

CONTINUED ON VEO FORM NUMBER

VISIBLE EMISSION OBSERVATION FORM

No.

COMPANY NAME Rieth - Riley : Kasser SGL		
STREET ADDRESS		
CITY	STATE	ZIP
PHONE (KEY CONTACT)		SOURCE ID NUMBER
PROCESS EQUIPMENT		OPERATING MODE
CONTROL EQUIPMENT		OPERATING MODE
DESCRIBE EMISSION POINT PSS - 52 SCI Screen		
HEIGHT ABOVE GROUND LEVEL Secondary 25'		HEIGHT RELATIVE TO OBSERVER 7'x20' Start 19' End
DISTANCE FROM OBSERVER Start 120' End		DIRECTION FROM OBSERVER Start North End
DESCRIBE EMISSIONS Start Stone & Dust End		
EMISSION COLOR Start End		IF WATER DROPLET PLUME Attached ☒ Detached ☐
POINT IN THE PLUME AT WHICH OPACITY WAS DETERMINED Start Over Screen Area End		
DESCRIBE PLUME BACKGROUND Start sky End		
BACKGROUND COLOR Start Blue End		SKY CONDITIONS Start clear End
WIND SPEED Start 10-15 End		WIND DIRECTION Start SW End
AMBIENT TEMP Start 60°F End		WET BULB TEMP RH, percent
Stack with Plume Sun Wind SOURCE LAYOUT SKETCH X Emission Point Observer's Position Sun Location Line 140° Draw North Arrow		
ADDITIONAL INFORMATION		

OBSERVATION DATE		START TIME		END TIME	
10-19-2021		11:00 AM		12:00 PM	
SEC	0	15	30	45	COMMENTS
MIN					
1	0	0	0	31	0 0 0 0
2	0	0	0	32	0 0 0 0
3	0	0	0	33	0 0 0 0
4	0	0	0	34	0 0 0 0
5	0	0	0	35	0 0 0 0
6	0	0	0	36	0 0 0 0
7	0	0	0	37	0 0 0 0
8	0	0	0	38	0 0 0 0
9	0	0	0	39	0 0 0 0
10	0	0	0	40	0 0 0 0
11	0	0	0	41	0 0 0 0
12	0	0	0	42	0 0 0 0
13	0	0	0	43	0 0 0 0
14	0	0	0	44	0 0 0 0
15	0	0	0	45	0 0 0 0
16	0	0	0	46	0 0 0 0
17	0	0	0	47	0 0 0 0
18	0	0	0	48	0 0 0 0
19	0	0	0	49	0 0 0 0
20	0	0	0	50	0 0 0 0
21	0	0	0	51	0 0 0 0
22	0	0	0	52	0 0 0 0
23	0	0	0	53	0 0 0 0
24	0	0	0	54	0 0 0 0
25	0	0	0	55	0 0 0 0
26	0	0	0	56	0 0 0 0
27	0	0	0	57	0 0 0 0
28	0	0	0	58	0 0 0 0
29	0	0	0	59	0 0 0 0
30	0	0	0	60	0 0 0 0

OBSERVER'S NAME (PRINT) Paul Chotchob	
OBSERVER'S SIGNATURE Paul	DATE
ORGANIZATION	
CERTIFIED BY Singleton	DATE 9-25-21
CONTINUED ON VEO FORM NUMBER	

VISIBLE EMISSION OBSERVATION FORM

No.

COMPANY NAME
Rieth-Riley : Kasson S. & Co.

STREET ADDRESS

CITY STATE ZIP

PHONE (KEY CONTACT) SOURCE ID NUMBER

PROCESS EQUIPMENT OPERATING MODE

CONTROL EQUIPMENT OPERATING MODE

DESCRIBE EMISSION POINT
PSA-38 - Superior Con

36" X 60"

HEIGHT ABOVE GROUND LEVEL HEIGHT RELATIVE TO OBSERVER
8' Start *4'* End

DISTANCE FROM OBSERVER DIRECTION FROM OBSERVER
Start *53'* End Start *NW* End

DESCRIBE EMISSIONS

Start *Stone & Dust* End

EMISSION COLOR IF WATER DROPLET PLUME
Start End Attached ☒ Detached ☐

POINT IN THE PLUME AT WHICH OPACITY WAS DETERMINED
Start *Head Pulley Area* End

DESCRIBE PLUME BACKGROUND

Start *sky* End

BACKGROUND COLOR SKY CONDITIONS
Start *Blue* End Start End

WIND SPEED WIND DIRECTION
Start *10-15 mph* End Start End

AMBIENT TEMP WET BULB TEMP RH, percent
Start *60°F* End

Stack with Plume

Sun

Wind

SOURCE LAYOUT SKETCH

Draw North Arrow

X Emission Point

Observer's Position

140°

Sun Location Line

ADDITIONAL INFORMATION

OBSERVATION DATE		START TIME		END TIME					
<i>10-19-21</i>		<i>9:00 AM</i>		<i>10:00 AM</i>					
SEC	MIN	0	15	30	45	COMMENTS			
1		0	0	0	31	0	0	0	0
2		0	0	5	32	0	5	5	5
3		0	0	0	33	0	0	0	0
4		0	0	0	34	0	0	0	0
5		0	0	0	35	0	0	0	0
6		5	5	0	36	0	0	0	0
7		0	5	0	37	0	0	0	0
8		5	5	0	38	0	0	0	0
9		0	0	0	39	0	0	0	0
10		0	0	0	40	0	0	0	0
11		0	0	0	41	0	0	0	0
12		0	5	5	42	0	0	0	0
13		0	0	5	43	0	0	0	0
14		5	0	0	44	0	0	0	0
15		5	0	0	45	0	0	0	0
16		0	0	0	46	0	0	0	0
17		0	0	0	47	0	0	0	0
18		5	0	0	48	0	0	0	5
19		0	0	0	49	0	0	0	0
20		5	0	0	50	0	0	0	0
21		5	5	0	51	5	0	0	0
22		0	5	0	52	0	5	0	0
23		0	0	0	53	0	0	0	0
24		0	5	0	54	0	0	0	0
25		0	5	0	55	0	0	0	0
26		0	0	0	56	0	0	0	0
27		0	0	0	57	0	0	0	0
28		0	0	5	58	0	0	0	0
29		0	0	0	59	0	0	0	0
30		0	0	0	60	0	0	0	0

OBSERVER'S NAME (PRINT)
Paul Clotzko

OBSERVER'S SIGNATURE
Paul Clotzko

DATE
10-19-21

ORGANIZATION

CERTIFIED BY
Single ton

DATE
9-25-21

CONTINUED ON VEO FORM NUMBER

VISIBLE EMISSION OBSERVATION FORM

No.

COMPANY NAME
Rieth-Riley : Kasson St. Co.

STREET ADDRESS

CITY STATE ZIP

PHONE (KEY CONTACT) SOURCE ID NUMBER

PROCESS EQUIPMENT OPERATING MODE

CONTROL EQUIPMENT OPERATING MODE

DESCRIBE EMISSION POINT
PBF-4 Superior Feeder

HEIGHT ABOVE GROUND LEVEL
6'

HEIGHT RELATIVE TO OBSERVER
Start **6'** End

DISTANCE FROM OBSERVER
Start **50'** End

DIRECTION FROM OBSERVER
Start **West** End

DESCRIBE EMISSIONS
Start **Stone Dst.** End

EMISSION COLOR IF WATER DROPLET PLUME
Start End Attached ☐ Detached ☐

IT IN THE PLUME AT WHICH OPACITY WAS DETERMINED
Start **Feed Discharge** End

DESCRIBE PLUME BACKGROUND
Start **sky** End

BACKGROUND COLOR SKY CONDITIONS
Start **Blue** End Start End

WIND SPEED WIND DIRECTION
Start **10-15** End Start **SW** End

AMBIENT TEMP WET BULB TEMP RH. percent
Start **50°F** End

Stack with Plume
Sun
Wind

SOURCE LAYOUT SKETCH Draw North Arrow

X Emission Point

Observer's Position

140°

Sun Location Line

ADDITIONAL INFORMATION

OBSERVATION DATE		START TIME		END TIME	
10-19-21		08:00 AM		9:00 AM	
SEC	0	15	30	45	COMMENTS
MIN					
1	0	0	0	0	31 0 0 0 0
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4	0	0	0	0	34 0 5 0 0
5	0	0	0	0	35 0 0 0 0
6	0	0	0	0	36 0 0 0 0
7	0	0	0	0	37 0 0 0 0
8	0	0	0	0	38 0 0 0 0
9	0	0	0	0	39 0 0 0 0
10	0	0	0	0	40 0 0 0 0
11	0	0	0	0	41 0 0 5 0
12	0	0	0	0	42 0 0 0 0
13	0	0	0	0	43 0 0 0 0
14	0	0	0	0	44 0 0 0 0
15	0	0	0	0	45 0 0 0 0
16	0	0	0	0	46 0 0 0 0
17	0	5	0	0	47 0 0 0 0
18	0	0	0	0	48 0 0 0 0
19	0	0	0	0	49 0 0 0 0
20	0	0	0	0	50 0 0 0 0
21	0	0	0	0	51 5 0 0 0
22	0	0	0	0	52 0 0 0 0
23	0	0	0	0	53 0 0 0 0
24	0	0	0	0	54 0 0 0 0
25	0	0	5	0	55 0 0 0 0
26	0	0	0	0	56 0 0 0 5
27	0	0	0	0	57 0 0 0 0
28	0	0	0	0	58 0 0 0 0
29	0	0	0	0	59 0 0 0 0
30	0	0	0	0	60 0 0 0 0

OBSERVER'S NAME (PRINT)
Paul Celertzhuber

OBSERVER'S SIGNATURE
Paul Celertzhuber

DATE
10-19-21

ORGANIZATION

CERTIFIED BY
Schyleton

DATE
9-25-21

CONTINUED ON VEO FORM NUMBER

VISIBLE EMISSION OBSERVATION FORM

No.

COMPANY NAME <i>Pietz - Riley - Kasson</i>		
STREET ADDRESS		
CITY	STATE	ZIP
PHONE (KEY CONTACT)		SOURCE ID NUMBER

PROCESS EQUIPMENT	OPERATING MODE
CONTROL EQUIPMENT	OPERATING MODE

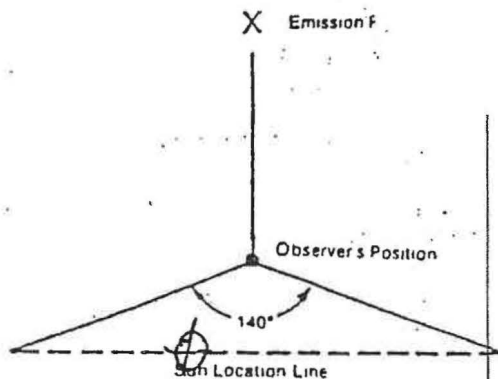
DESCRIBE EMISSION POINT <i>PAC-17: Telesmith Crusher</i>	
HEIGHT ABOVE GROUND LEVEL <i>12'</i>	HEIGHT RELATIVE TO OBSERVER Start <i>10'</i> End
DISTANCE FROM OBSERVER Start <i>50'</i> End	DIRECTION FROM OBSERVER Start <i>135°</i> End

DESCRIBE EMISSIONS Start <i>Sand: stone: gravel</i> End	
EMISSION COLOR Start <i>Blue</i> End	IF WATER DROPLET PLUME Attached ☐ Detached ☐
AT IN THE PLUME AT WHICH OPACITY WAS DETERMINED Start <i>above inlet cone</i> End	

DESCRIBE PLUME BACKGROUND Start <i>sky</i> End	
BACKGROUND COLOR Start <i>Blue</i> End	SKY COLOR Start
WIND SPEED Start <i>10-15</i> End	WIND DIRECTION Start
AMBIENT TEMP Start <i>60°F</i> End	WET BULB

Stack with Plume	☐
Sun	☒
Wind	☒

SOURCE LAYOUT SKETCH



ADDITIONAL INFORMATION

OBSERVATION DATE					START TIME	END TIME				
10-19-21					1:00 PM	2:00 PM				
SEC	0	15	30	45	COMMENTS					
MIN										
1	0	0	0	0	31	0	0	0	0	
2	0	0	0	0	32	0	0	0	0	
3	0	0	0	0	33	0	0	0	0	
4	0	0	0	0	34	0	0	0	0	
5	0	0	0	0	35	0	0	0	0	
6	0	0	0	0	36	0	0	0	0	
7	0	0	0	0	37	0	0	0	0	
8	0	0	0	0	38	0	0	0	0	
9	0	0	0	0	39	0	0	0	0	
10	0	0	0	0	40	0	0	0	0	
11	0	0	0	0	41	0	0	0	0	
12	0	0	0	0	42	0	0	0	0	
13	0	0	0	0	43	0	0	0	0	
14	0	0	5	0	44	0	0	0	0	
15	0	0	0	0	45	0	0	0	0	
16	0	5	0	0	46	0	0	0	0	
					47	0	0	0	0	
					48	0	0	0	0	
					49	0	0	0	0	
					50	5	5	0	0	
					51	0	0	0	0	
					52	0	0	0	0	
					53	0	0	0	0	
					54	5	5	5	0	
					55	5	0	0	0	
					56	0	0	0	0	
					57	5	5	5	0	
					58	5	0	5	0	
29	5	5	0	0	59	5	0	0	0	
30	5	0	0	0	60	0	0	0	0	

Gravel pit

OBSERVER'S NAME (PRINT) <i>Paul C. Btzhobu</i>	
OBSERVER'S SIGNATURE <i>Paul C. Btzhobu</i>	DATE <i>10-19-21</i>
ORGANIZATION	

CERTIFIED BY <i>Single ton</i>	DATE <i>9-25-21</i>
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CONTINUED ON VEO FORM NUMBER

VISIBLE EMISSION OBSERVATION FORM

No.

COMPANY NAME <i>Pieth-Riley : Kgsan SFC</i>		
STREET ADDRESS		
CITY	STATE	ZIP
PHONE (KEY CONTACT)		SOURCE ID NUMBER

PROCESS EQUIPMENT	OPERATING MODE
CONTROL EQUIPMENT	OPERATING MODE

DESCRIBE EMISSION POINT <i>PSA-25 : Superior Stacker</i>	
HEIGHT ABOVE GROUND LEVEL <i>50'</i>	HEIGHT RELATIVE TO OBSERVER Start <i>50'</i> End
DISTANCE FROM OBSERVER Start <i>100'</i> End	DIRECTION FROM OBSERVER Start <i>West</i> End

DESCRIBE EMISSIONS Start <i>Gravel / Stone</i> End	
EMISSION COLOR Start End	IF WATER DROPLET PLUME Attached ☐ Detached ☐
IN THE PLUME AT WHICH OPACITY WAS DETERMINED Start End	

DESCRIBE PLUME BACKGROUND Start <i>SKY</i> End	
BACKGROUND COLOR Start <i>Blue</i> End	SKY CONDITIONS Start <i>Clear</i> End
WIND SPEED Start <i>10-15</i> End	WIND DIRECTION Start <i>SW</i> End
AMBIENT TEMP Start <i>60°F</i> End	WET BULB TEMP RH, percent

Stack with Plume Sun Wind	SOURCE LAYOUT SKETCH Draw North Arrow

ADDITIONAL INFORMATION

OBSERVATION DATE 10-19-21					START TIME 2:00	END TIME 3:00				
SEC MIN	0	15	30	45	COMMENTS					
1	0	0	0	0	31	0	0	0	0	
2	0	0	0	0	32	0	0	0	0	
3	0	0	0	0	33	0	0	5	0	
4	0	0	0	0	34	0	0	0	0	
5	0	0	0	0	35	0	0	0	0	
6	0	0	0	0	36	0	0	0	0	
7	0	0	0	0	37	0	0	0	0	
8	0	0	0	0	38	0	0	0	6	
9	0	0	0	0	39	0	0	0	0	
10	0	0	0	0	40	0	0	0	0	
11	0	0	0	0	41	0	0	0	0	
12	0	0	0	0	42	0	0	0	0	
13	0	0	0	0	43	0	0	0	0	
14	0	0	0	0	44	0	0	0	0	
15	0	0	0	0	45	0	0	0	0	
16	0	0	0	0	46	0	0	0	0	
17	0	0	0	0	47	0	0	0	0	
18	0	0	0	0	48	0	0	0	0	
19	0	0	0	0	49	0	0	0	0	
20	0	0	0	0	50	0	0	0	0	
21	0	0	0	0	51	0	0	0	0	
22	0	0	0	0	52	0	0	0	0	
23	0	0	0	0	53	0	0	0	0	
24	0	0	0	0	54	0	0	0	0	
25	0	0	0	0	55	0	0	0	0	
26	0	0	0	0	56	0	0	0	0	
27	0	0	0	0	57	0	0	0	0	
28	0	0	0	0	58	0	0	0	0	
29	0	0	0	0	59	0	0	0	0	
30	0	0	5	0	60	0	0	0	0	

OBSERVER'S NAME (PRINT) <i>Paul Calotchube</i>	
OBSERVER'S SIGNATURE <i>Paul Calotchube</i>	DATE <i>10-19-21</i>
ORGANIZATION	
CERTIFIED BY <i>Single for</i>	DATE <i>9-25-21</i>
CONTINUED ON VEO FORM NUMBER	

VISIBLE EMISSION OBSERVATION FORM

No.

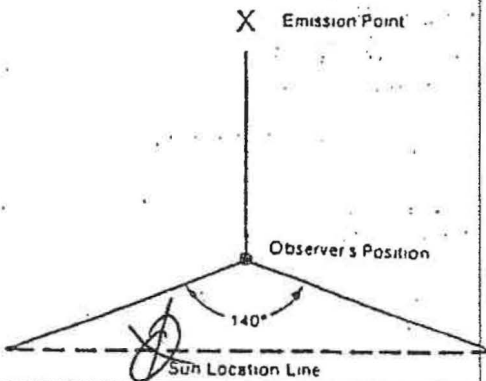
COMPANY NAME <i>Peth-Riley : Kisson</i>		
STREET ADDRESS		
CITY	STATE	ZIP
PHONE (KEY CONTACT)	SOURCE ID NUMBER	

PROCESS EQUIPMENT	OPERATING MODE
CONTROL EQUIPMENT	OPERATING MODE

DESCRIBE EMISSION POINT <i>PAS-9 : ELRUS MG566</i>	
<i>Screen Plant.</i>	
HEIGHT ABOVE GROUND LEVEL <i>15'</i>	HEIGHT RELATIVE TO OBSERVER Start <i>16'</i> End
DISTANCE FROM OBSERVER Start <i>50'</i> End	DIRECTION FROM OBSERVER Start <i>N</i> End

DESCRIBE EMISSIONS Start <i>Gravel, Sand, Stone</i> End	
EMISSION COLOR Start End	IF WATER DROPLET PLUME Attached ☐ Detached ☐
T IN THE PLUME AT WHICH OPACITY WAS DETERMINED Start <i>over entire Machine</i> End	

DESCRIBE PLUME BACKGROUND Start <i>sky</i> End	
BACKGROUND COLOR Start <i>Blue</i> End	SKY CONDITIONS Start <i>Clear</i> End
WIND SPEED Start <i>10-15</i> End	WIND DIRECTION Start <i>SW</i> End
AMBIENT TEMP Start <i>60°F</i> End	WET BULB TEMP Rpt. percent

Slack with Plume ☐ Sun ☐ Wind ☐	SOURCE LAYOUT SKETCH Draw North Arrow  
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OBSERVATION DATE <i>10-19-21</i>				START TIME <i>1:00 PM</i>	END TIME <i>2:00 PM</i>
SEC MIN	0	15	30	45	COMMENTS
1	0	0	0	31	0 0 0 0
2	0	0	0	32	0 0 0 0
3	0	0	0	33	0 0 0 0
4	0	0	0	34	0 0 0 0
5	0	0	0	35	0 0 0 0
6	0	0	0	36	0 0 0 0
7	0	0	0	37	0 0 0 0
8	0	0	0	38	0 0 0 0
9	0	0	0	39	0 0 0 0
10	0	0	0	40	0 0 0 0
11	0	0	0	41	0 0 0 0
12	0	0	0	42	0 0 0 0
13	0	0	5	43	0 0 0 0
14	0	0	0	44	0 0 0 0
15	0	5	0	45	0 0 0 0
16	0	0	0	46	0 0 0 0
17	0	0	0	47	0 0 0 0
18	0	0	0	48	0 0 0 0
19	0	0	0	49	0 0 0 0
20	0	0	0	50	5 5 0 0
21	0	0	0	51	0 0 0 0
22	0	0	0	52	0 0 0 0
23	0	0	0	53	0 0 0 0
24	0	5	5	54	5 5 5 0
25	0	0	0	55	5 0 0 0
26	0	0	5	56	5 5 5 0
27	0	5	5	57	0 0 0 0
28	5	5	0	58	5 5 5 0
29	5	5	0	59	5 0 0 0
30	5	0	0	60	0 0 0 0

OBSERVER'S NAME (PRINT) <i>Paul Alotekobe</i>	
OBSERVER'S SIGNATURE <i>Paul</i>	DATE <i>10-19-21</i>
ORGANIZATION	

CERTIFIED BY <i>Simpleton</i>	DATE <i>9-25-21</i>
CONTINUED ON VEO FORM NUMBER	

VISIBLE EMISSION OBSERVATION FORM

No.

COMPANY NAME <i>Dieth-Riley : Kesson</i>		
STREET ADDRESS		
CITY	STATE	ZIP
PHONE (KEY CONTACT)		SOURCE ID NUMBER

PROCESS EQUIPMENT	OPERATING MODE
CONTROL EQUIPMENT	OPERATING MODE

DESCRIBE EMISSION POINT <i>PCA-83 : Hartman Fabco Conveyor</i>	
HEIGHT ABOVE GROUND LEVEL <i>8'</i>	HEIGHT RELATIVE TO OBSERVER Start <i>6'</i> End
DISTANCE FROM OBSERVER Start <i>50'</i> End	DIRECTION FROM OBSERVER Start <i>West</i> End

DESCRIBE EMISSIONS Start <i>Gravel</i> End	
EMISSION COLOR Start End	IF WATER DROPLET PLUME Attached ☐ Detached ☐
IN THE PLUME AT WHICH OPACITY WAS DETERMINED Start End	

DESCRIBE PLUME BACKGROUND Start <i>sky</i> End	
BACKGROUND COLOR Start <i>Blue</i> End	SKY CONDITIONS Start <i>Clear</i> End
WIND SPEED Start <i>10-15</i> End	WIND DIRECTION Start End
AMBIENT TEMP Start <i>60°F</i> End	WET BULB TEMP RH, percent

Stack with Plume Sun Wind	SOURCE LAYOUT SKETCH Draw North Arrow <i>West</i> <i>South</i> <i>North</i>
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OBSERVATION DATE		START TIME				END TIME			
<i>10-19-21</i>		<i>2:00 PM</i>				<i>3:00 PM</i>			
SEC	MIN	0	15	30	45	COMMENTS			
1	0	0	5	0	31	0	0	0	0
2	5	0	0	0	32	0	0	0	0
3	0	0	0	0	33	0	0	0	0
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5	0	0	0	0	35	0	0	0	0
6	0	0	0	0	36	0	0	0	0
7	0	0	0	0	37	0	0	0	0
8	0	0	0	0	38	0	0	0	0
9	0	0	0	0	39	0	0	0	0
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12	0	0	0	0	42	0	0	0	0
13	0	0	0	0	43	0	0	0	0
14	0	0	0	0	44	0	0	0	0
15	0	0	0	0	45	0	0	0	0
16	0	0	0	0	46	0	0	0	0
17	0	0	0	0	47	0	0	0	0
18	0	0	0	0	48	0	0	0	0
19	0	0	0	0	49	0	0	0	0
20	0	0	0	0	50	0	0	0	0
21	0	0	0	0	51	0	0	0	0
22	0	0	0	0	52	0	0	0	0
23	0	0	0	0	53	0	0	0	0
24	0	0	0	0	54	0	0	0	0
25	0	0	0	0	55	0	0	0	0
26	0	0	0	0	56	0	0	0	0
27	0	0	0	0	57	0	0	0	0
28	0	0	0	0	58	0	0	0	0
29	0	0	0	0	59	0	0	0	0
30	0	0	0	0	60	0	0	0	0

OBSERVER'S NAME (PRINT) <i>Paul Glotzhaber</i>	
OBSERVER'S SIGNATURE <i>Paul Glotzhaber</i>	DATE <i>10-19-21</i>
ORGANIZATION	
CERTIFIED BY <i>Singleton</i>	DATE <i>9-25-21</i>

CONTINUED ON VEO FORM NUMBER

VISIBLE EMISSION OBSERVATION FORM

No.

COMPANY NAME
D. Keith-Riley : Karson & Gravel PLT

STREET ADDRESS

CITY STATE ZIP

PHONE (KEY CONTACT) SOURCE ID NUMBER

PROCESS EQUIPMENT OPERATING MODE

CONTROL EQUIPMENT OPERATING MODE

DESCRIBE EMISSION POINT
PCA-83 : Conveyor
PCA-77

HEIGHT ABOVE GROUND LEVEL HEIGHT RELATIVE TO OBSERVER
10' Start *8'* End

DISTANCE FROM OBSERVER DIRECTION FROM OBSERVER
Start *40'* End Start *N* End

DESCRIBE EMISSIONS
Start *Stone : Dust : Sand* End

EMISSION COLOR IF WATER DROPLET PLUME
Start End Attached ☐ Detached ☐

TIME IN THE PLUME AT WHICH OPACITY WAS DETERMINED
Start End

DESCRIBE PLUME BACKGROUND
Start *sky* End

BACKGROUND COLOR SKY CONDITIONS
Start *Blue* End Start *Clear* End

WIND SPEED WIND DIRECTION
Start *10-15* End Start *SW* End

AMBIENT TEMP WET BULB TEMP RH, percent
Start *60°F* End

Stack with Plume
Sun
Wind

SOURCE LAYOUT SKETCH Draw North Arrow

X Emission Point

Observer's Position

140°

Sun Location Line

ADDITIONAL INFORMATION

OBSERVATION DATE		START TIME		END TIME					
10-19-21		1:00 PM		2:00 PM					
SEC	0	15	30	45	COMMENTS				
MIN									
1	0	0	0	0	31	0	0	0	0
2	0	0	0	0	32	0	0	0	0
3	0	0	0	0	33	0	0	0	0
4	0	0	0	0	34	0	0	0	0
5	0	0	0	0	35	0	0	0	0
6	0	0	0	0	36	0	0	0	0
7	0	0	0	0	37	0	0	0	0
8	0	0	0	0	38	0	0	0	0
9	0	0	0	0	39	0	0	0	0
10	0	0	0	0	40	0	0	0	0
11	0	0	0	0	41	0	0	0	0
12	0	0	0	0	42	0	0	0	0
13	0	5	0	0	43	0	0	0	0
14	0	0	0	0	44	0	0	0	0
15	0	0	0	0	45	0	0	0	0
16	0	0	0	0	46	0	0	0	0
17	0	0	0	0	47	0	0	0	0
18	0	0	0	0	48	0	0	0	0
19	0	0	0	0	49	0	0	0	0
20	0	0	0	0	50	0	0	0	0
21	0	0	0	0	51	0	0	0	0
22	0	0	0	0	52	0	0	0	0
23	0	0	0	0	53	0	0	0	0
24	0	0	0	0	54	0	0	0	0
25	0	0	0	0	55	0	0	0	0
26	0	0	0	0	56	0	0	0	0
27	0	0	0	0	57	0	0	0	0
28	0	0	0	0	58	0	0	0	0
29	0	0	0	0	59	0	0	0	0
30	0	0	0	0	60	0	0	0	0

OBSERVER'S NAME (PRINT)
Paul G. Glatz

OBSERVER'S SIGNATURE
Paul G. Glatz

DATE
10-19-21

ORGANIZATION

CERTIFIED BY
Singleton

DATE
9-25-21

CONTINUED ON VEO FORM NUMBER

VISIBLE EMISSION OBSERVATION FORM

No.

COMPANY NAME <i>Rieth Riley Co. Kason StC.</i>		
STREET ADDRESS		
CITY <i>Maple City</i>	STATE <i>MI</i>	ZIP
PHONE (KEY CONTACT)		SOURCE ID NUMBER

PROCESS EQUIPMENT <i>PSA-37</i>	OPERATING MODE
CONTROL EQUIPMENT	OPERATING MODE

DESCRIBE EMISSION POINT <i>Hopper</i>	
HEIGHT ABOVE GROUND LEVEL <i>6'</i>	HEIGHT RELATIVE TO OBSERVER Start <i>1'</i> End <i>1'</i>
DISTANCE FROM OBSERVER Start <i>35'</i> End <i>35'</i>	DIRECTION FROM OBSERVER Start <i>South</i> End

DESCRIBE EMISSIONS Start <i>Stone Dust</i> End	
EMISSION COLOR Start End	IF WATER DROPLET PLUME Attached ☐ Detached ☐
IN THE PLUME AT WHICH OPACITY WAS DETERMINED Start <i>2 to 3' above Hopper</i> End	

DESCRIBE PLUME BACKGROUND Start <i>sky</i> End <i>sky</i>	
BACKGROUND COLOR Start <i>Blue</i> End <i>Blue</i>	SKY CONDITIONS Start <i>Clear</i> End <i>Clear</i>
WIND SPEED Start <i>5 mph</i> End	WIND DIRECTION Start <i>East</i> End
AMBIENT TEMP Start <i>72°F</i> End <i>72°F</i>	WET BULB TEMP RH, percent

Stack with Plume Sun Wind	SOURCE LAYOUT SKETCH Draw North Arrow
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OBSERVATION DATE <i>6-16-22</i>		START TIME <i>3:05</i>		END TIME <i>4:05</i>					
SEC	MIN	0	15	30	45	COMMENTS			
1	0	0	0	0	31	0	0	0	0
2	0	0	0	0	32	0	0	0	0
3	0	0	0	0	33	0	0	0	0
4	0	0	0	0	34	0	0	0	0
5	0	0	0	0	35	0	0	0	0
6	0	0	0	0	36	0	0	0	0
7	0	0	0	0	37	0	0	0	0
8	0	0	0	0	38	0	0	0	0
9	0	0	0	0	39	0	0	0	0
10	0	0	0	0	40	0	0	0	0
11	0	0	0	0	41	0	0	0	0
12	0	0	0	0	42	0	0	0	0
13	0	0	0	0	43	0	0	0	0
14	0	0	0	0	44	0	0	0	0
15	0	0	0	0	45	0	0	0	0
16	0	0	0	0	46	0	0	0	0
17	0	0	0	0	47	0	0	0	0
18	0	0	0	0	48	0	0	0	0
19	0	0	0	0	49	0	0	0	0
20	0	0	0	0	50	0	0	0	0
21	0	0	0	0	51	0	0	0	0
22	0	0	0	0	52	0	0	0	0
23	0	0	0	0	53	0	0	0	0
24	0	0	0	0	54	0	0	0	0
25	0	0	0	0	55	0	0	0	0
26	0	0	0	0	56	0	0	0	0
27	0	0	0	0	57	0	0	0	0
28	0	0	0	0	58	0	0	0	0
29	0	0	0	0	59	0	0	0	0
30	0	0	0	0	60	0	0	0	0

OBSERVER'S NAME (PRINT) <i>Paul Cilotehor</i>	
OBSERVER'S SIGNATURE <i>Paul</i>	DATE <i>6-16-22</i>
ORGANIZATION <i>Rieth Riley</i>	
CERTIFIED BY <i>Singh</i>	DATE <i>3-26-22</i>
CONTINUED ON VEO FORM NUMBER	

VISIBLE EMISSION OBSERVATION FORM

No.

COMPANY NAME <i>Rieth Riley : Kasson S/C.</i>		
STREET ADDRESS		
CITY <i>Maple City</i>	STATE <i>MT</i>	ZIP
PHONE (KEY CONTACT)		SOURCE ID NUMBER

PROCESS EQUIPMENT <i>PCA-800C</i>	OPERATING MODE
CONTROL EQUIPMENT	OPERATING MODE

DESCRIBE EMISSION POINT <i>Hopper @ Tail Pulley</i>	
HEIGHT ABOVE GROUND LEVEL <i>4'</i>	HEIGHT RELATIVE TO OBSERVER Start ☒ End ☒
DISTANCE FROM OBSERVER Start <i>30'</i> End <i>30'</i>	DIRECTION FROM OBSERVER Start <i>West</i> End

DESCRIBE EMISSIONS Start <i>Sand & Gravel</i> End	
EMISSION COLOR	IF WATER DROPLET PLUME Attached ☐ Detached ☐
IN THE PLUME AT WHICH OPACITY WAS DETERMINED Start End	

DESCRIBE PLUME BACKGROUND Start <i>6 Borm</i> End	
BACKGROUND COLOR Start <i>Brown</i> End <i>Brown</i>	SKY CONDITIONS Start <i>cler</i> End <i>cler</i>
WIND SPEED Start <i>5 mph</i> End	WIND DIRECTION Start <i>East</i> End
AMBIENT TEMP Start <i>70°F</i> End	WET BULB TEMP RH, percent

Stack with Plume Sun Wind	SOURCE LAYOUT SKETCH Draw North Arrow

ADDITIONAL INFORMATION

OBSERVATION DATE <i>6-16-22</i>		START TIME <i>2:00</i>		END TIME <i>3:00 PM</i>	
SEC MIN	0	15	30	45	COMMENTS
1					<i>31</i>
2					<i>32</i>
3					<i>33</i>
4					<i>34</i>
5					<i>35</i>
6					<i>36</i>
7					<i>37</i>
8					<i>38</i>
9					<i>39</i>
10					<i>40</i>
11					<i>41</i>
12					<i>42</i>
13					<i>43</i>
14					<i>44</i>
15					<i>45</i>
16					<i>46</i>
17					<i>47</i>
18					<i>48</i>
19					<i>49</i>
20					<i>50</i>
21					<i>51</i>
22					<i>52</i>
23					<i>53</i>
24					<i>54</i>
25					<i>55</i>
26					<i>56</i>
27					<i>57</i>
28					<i>58</i>
29					<i>59</i>
30					<i>60</i>

OBSERVER'S NAME (PRINT) <i>Paul A. Schreiber</i>	
OBSERVER'S SIGNATURE <i>Paul A. Schreiber</i>	DATE <i>6-16-22</i>
ORGANIZATION <i>Rieth Riley Co.</i>	
CERTIFIED BY <i>Shirley Ann</i>	DATE <i>3-26-22</i>
CONTINUED ON VEO FORM NUMBER	

VISIBLE EMISSION OBSERVATION FORM

No.

COMPANY NAME <i>Rie-th-Riley Co. Kasaan Gold Mine</i>		
STREET ADDRESS		
CITY	STATE	ZIP
PHONE (KEY CONTACT)		SOURCE ID NUMBER

PROCESS EQUIPMENT <i>Screen to PCA-80C</i>	OPERATING MODE
CONTROL EQUIPMENT	OPERATING MODE

DESCRIBE EMISSION POINT <i>Hopper @ tail Rely.</i>	
HEIGHT ABOVE GROUND LEVEL <i>6</i>	HEIGHT RELATIVE TO OBSERVER Start <i>3'</i> End
DISTANCE FROM OBSERVER Start <i>50</i> End	DIRECTION FROM OBSERVER Start <i>West</i> End <i>Cent.</i>

DESCRIBE EMISSIONS Start <i>Sand & steel dust</i> End	
EMISSION COLOR Start End	IF WATER DROPLET PLUME Attached ☐ Detached ☐
IN THE PLUME AT WHICH OPACITY WAS DETERMINED Start <i>2' Above Hopper</i> End	

DESCRIBE PLUME BACKGROUND Start <i>sky</i> End <i>sky</i>	
BACKGROUND COLOR Start <i>Blue</i> End <i>Blue</i>	SKY CONDITIONS Start <i>clear</i> End <i>clear</i>
WIND SPEED Start <i>5 mph</i> End	WIND DIRECTION Start <i>East</i> End
AMBIENT TEMP Start <i>70°F</i> End	WET BULB TEMP RH, percent

Stack with Plume Sun Wind	SOURCE LAYOUT SKETCH Draw North Arrow

ADDITIONAL INFORMATION

OBSERVATION DATE <i>6-16-22</i>		START TIME <i>1:00 PM</i>		END TIME <i>2:00 PM</i>		COMMENTS			
SEC	MIN	0	15	30	45				
1	0	0	0	0	31	0	0	0	0
2	0	5	0	0	32	0	0	0	0
3	0	0	0	0	33	0	0	0	0
4	0	0	0	0	34	0	0	0	0
5	0	0	0	0	35	0	0	0	0
6	0	0	0	0	36	0	0	0	0
7	0	0	0	0	37	0	0	0	0
8	0	0	0	0	38	0	0	0	0
9	0	0	0	0	39	0	0	0	0
10	0	0	0	0	40	0	0	0	0
11	0	0	0	0	41	0	0	0	0
12	0	0	0	0	42	0	0	0	0
13	0	0	0	0	43	0	0	0	0
14	0	0	0	0	44	0	0	0	0
15	0	0	0	0	45	0	0	0	0
16	0	0	0	0	46	0	0	0	0
17	0	5	0	0	47	0	0	0	0
18	0	5	0	0	48	0	0	0	0
19	0	0	0	0	49	0	0	0	0
20	0	0	0	0	50	0	0	0	0
21	0	0	0	0	51	0	0	0	0
22	0	0	0	0	52	0	0	0	0
23	0	0	0	0	53	0	0	0	0
24	0	0	0	0	54	0	0	0	0
25	0	0	0	0	55	0	0	0	0
26	0	0	0	0	56	0	0	0	0
27	0	0	0	0	57	0	0	0	0
28	0	0	0	0	58	0	0	0	0
29	0	0	0	0	59	0	0	0	0
30	0	0	0	0	60	0	0	0	0

OBSERVER'S NAME (PRINT) <i>Paul Glotchok</i>	DATE <i>6-16-22</i>
OBSERVER'S SIGNATURE <i>Paul</i>	DATE <i>6-16-22</i>
ORGANIZATION <i>Rie-th-Riley</i>	
CERTIFIED BY <i>Singleton</i>	DATE <i>3-26-22</i>
CONTINUED ON VEO FORM NUMBER	

VISIBLE EMISSION OBSERVATION FORM

No.

COMPANY NAME <i>Rieth - Riley: Kasson Sand Gravel</i>		
STREET ADDRESS		
CITY <i>Maple City</i>	STATE <i>MI</i>	ZIP
PHONE (KEY CONTACT)		SOURCE ID NUMBER

PROCESS EQUIPMENT <i>PCA-90</i>	OPERATING MODE
CONTROL EQUIPMENT	OPERATING MODE

DESCRIBE EMISSION POINT <i>Head Pully</i>	
HEIGHT ABOVE GROUND LEVEL <i>8'</i>	HEIGHT RELATIVE TO OBSERVER Start <i>3'</i> End <i>3'</i>
DISTANCE FROM OBSERVER Start <i>30'</i> End <i>30'</i>	DIRECTION FROM OBSERVER Start <i>South</i> End <i>South</i>

DESCRIBE EMISSIONS Start <i>Stone Dust</i> End	
EMISSION COLOR	IF WATER DROPLET PLUME Attached ☐ Detached ☐
T IN THE PLUME AT WHICH OPACITY WAS DETERMINED Start <i>2' above Head Pully</i> End	

DESCRIBE PLUME BACKGROUND Start <i>sky</i> End <i>sky</i>	
BACKGROUND COLOR Start <i>Blue</i> End <i>Blue</i>	SKY CONDITIONS Start <i>clear</i> End <i>clear</i>
WIND SPEED Start <i>5mph</i> End	WIND DIRECTION Start <i>East</i> End
AMBIENT TEMP Start <i>70°F</i> End <i>72°F</i>	WET BULB TEMP RH, percent

Stack with Plume Sun Wind	SOURCE LAYOUT SKETCH Draw North Arrow
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ADDITIONAL INFORMATION

OBSERVATION DATE <i>6-16-22</i>		START TIME <i>3:05</i>		END TIME <i>4:05</i>	
SEC	0	15	30	45	COMMENTS
MIN					
1	0	0	0	0	31
2	0	0	0	0	32
3	0	0	0	0	33
4	0	0	0	0	34
5	0	0	0	0	35
6	0	0	0	0	36
7	0	0	0	0	37
8	0	0	0	0	38
9	0	0	0	0	39
10	0	0	0	0	40
11	0	0	0	0	41
12	0	0	0	0	42
13	0	0	0	0	43
14	0	0	0	0	44
15	0	0	0	0	45
16	0	0	0	0	46
17	0	0	0	0	47
18	0	0	0	0	48
19	0	0	0	0	49
20	0	0	0	0	50
21	0	0	0	0	51
22	0	0	0	0	52
23	0	0	0	0	53
24	0	0	0	0	54
25	0	0	0	0	55
26	0	0	0	0	56
27	0	0	0	0	57
28	0	0	0	0	58
29	0	0	0	0	59
30	0	0	0	0	60

OBSERVER'S NAME (PRINT) <i>Paul Glatzko</i>	DATE <i>6-16-22</i>
OBSERVER'S SIGNATURE <i>Paul G</i>	DATE <i>6-16-22</i>
ORGANIZATION <i>Rieth - Riley Co.</i>	
CERTIFIED BY <i>Single to</i>	DATE <i>3-26-22</i>
CONTINUED ON VEO FORM NUMBER	

VISIBLE EMISSION OBSERVATION FORM

No.

COMPANY NAME
Rieth-Riley - Kasson Sand & Gravel

STREET ADDRESS

CITY
Naples City

STATE
MS

ZIP

PHONE (KEY CONTACT)

SOURCE ID NUMBER

PROCESS EQUIPMENT
PCA-88

OPERATING MODE

CONTROL EQUIPMENT
Gray Box

OPERATING MODE

DESCRIBE EMISSION POINT
Gravel Stone-Pest

HEIGHT ABOVE GROUND LEVEL
10'

HEIGHT RELATIVE TO OBSERVER
Start *5'* End *5'*

DISTANCE FROM OBSERVER
Start *20'* End *30'*

DIRECTION FROM OBSERVER
Start *West* End *West*

DESCRIBE EMISSIONS
Start *Dust/Gravel* End

EMISSION COLOR
Start End

IF WATER DROPLET PLUME
Attached ☐ Detached ☐

IN THE PLUME AT WHICH OPACITY WAS DETERMINED
Start End

DESCRIBE PLUME BACKGROUND
Start *sky* End *sky*

BACKGROUND COLOR
Start *Blue* End *Blue*

SKY CONDITIONS
Start *clear* End *clear*

WIND SPEED
Start *0 mph* End *10 mph*

WIND DIRECTION
Start *North* End *North*

AMBIENT TEMP
Start *90°F* End *80°F*

WET BULB TEMP RH, percent

Stack with Plume

Sun

Wind

SOURCE LAYOUT SKETCH

Draw North Arrow

Emission Point

Observer's Position

140°

Sun Location Line

OBSERVATION DATE		START TIME		END TIME	
7-6-22		2:05		3:05	
SEC	0	15	30	45	COMMENTS
MIN					
1	0	0	0	0	31 0 0 0
2	0	0	0	0	32 0 0 0
3	0	0	0	0	33 0 0 0
4	0	0	0	0	34 0 0 0
5	0	0	0	0	35 0 0 0
6	0	0	0	0	36 0 0 0
7	0	0	0	0	37 0 0 0
8	5	0	0	0	38 0 0 0
9	0	0	0	0	39 0 0 0
10	0	0	0	0	40 0 0 0
11	0	0	0	0	41 0 0 0
12	0	0	0	5	42 0 0 0
13	0	0	0	0	43 0 0 0
14	5	5	0	0	44 0 0 0
15	0	0	0	0	45 0 0 0
16	0	0	0	0	46 5 0 0
17	0	0	0	0	47 5 0 0
18	0	0	0	0	48 0 0 0
19	0	0	0	0	49 0 0 0
20	0	0	5	5	50 0 0 0
21	0	0	0	0	51 0 0 0
22	0	0	5	0	52 0 0 0
23	0	5	5	0	53 0 0 0
24	0	0	0	5	54 5 0 0
25	0	0	0	0	55 5 0 0
26	5	0	0	0	56 5 0 0
27	0	0	0	0	57 0 0 0
28	0	0	0	0	58 0 0 0
29	0	0	0	0	59 5 0 0
30	5	0	0	0	60 5 0 0

OBSERVER'S NAME (PRINT)
Paul C. Lutzko

OBSERVER'S SIGNATURE
Paul C. Lutzko

DATE
7-6-22

ORGANIZATION
Singleton Smoke Rieth-Riley

CERTIFIED BY
Singleton

DATE
3-26-22

CONTINUED ON VEO FORM NUMBER

VISIBLE EMISSION OBSERVATION FORM

No.

COMPANY NAME <i>Richt-Riley Kasson Sawdust</i>		
ST ADDRESS		
CITY <i>Maple City</i>	STATE <i>MD</i>	ZIP
PHONE (KEY CONTACT)		SOURCE ID NUMBER

PROCESS EQUIPMENT <i>Conveyor</i>	PSA-40	OPERATING MODE
CONTROL EQUIPMENT <i>Spray Bars</i>		OPERATING MODE

DESCRIBE EMISSION POINT <i>Hopper @ Tail Pulley</i>
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HEIGHT ABOVE GROUND LEVEL	HEIGHT RELATIVE TO OBSERVER Start End
DISTANCE FROM OBSERVER Start <i>60</i> End	DIRECTION FROM OBSERVER Start End

DESCRIBE EMISSIONS	
Start	End
EMISSION COLOR	IF WATER DROPLET PLUME Attached ☒ Detached ☐
Start	End
P IN THE PLUME AT WHICH OPACITY WAS DETERMINED	
Start	End

DESCRIBE PLUME BACKGROUND	
Start <i>Screen Structure</i>	End
BACKGROUND COLOR	SKY CONDITIONS
Start <i>Brown</i> End <i>Brown</i>	Start <i>Clear</i> End <i>Clear</i>
WIND SPEED	WIND DIRECTION
Start <i>5</i> End	Start <i>East</i> End
AMBIENT TEMP	WET BULB TEMP
Start <i>70°F</i> End	Rel. percent

Stack with Plume	Sun	Wind
SOURCE LAYOUT SKETCH		
Draw North Arrow		

ADDITIONAL INFORMATION

OBSERVATION DATE				START TIME		END TIME			
6-16-22				1:00 PM		2:00 PM			
SEC	0	15	30	45	COMMENTS				
MIN									
1	0	0	0	0	31	0	0	0	5
2	0	5	0	0	32	0	0	0	5
3	0	0	0	0	33	0	0	0	0
4	0	0	0	0	34	0	0	0	0
5	0	0	0	0	35	5	0	0	0
6	0	0	5	0	36	0	0	0	0
7	0	0	0	0	37	0	0	0	0
8	0	0	5	0	38	0	0	0	0
9	0	5	0	0	39	0	0	0	0
10	0	0	0	0	40	0	0	0	0
11	0	0	0	5	41	0	0	0	0
12	0	0	5	5	42	0	0	0	0
13	0	5	0	5	43	0	0	0	0
14	0	0	5	0	44	0	0	0	0
15	0	0	0	0	45	0	0	0	0
16	0	5	0	0	46	0	0	0	0
17	5	0	0	0	47	0	0	0	0
18	0	0	0	0	48	0	0	0	0
19	0	5	5	0	49	0	0	0	0
20	0	0	5	5	50	0	0	0	0
21	0	0	5	0	51	0	0	0	0
22	0	0	5	0	52	0	0	0	0
23	5	0	0	0	53	0	0	0	0
24	0	5	0	0	54	0	0	0	0
25	0	0	0	0	55	0	0	0	0
26	0	5	0	0	56	0	0	0	0
27	0	0	0	0	57	0	0	0	0
28	0	0	0	0	58	0	0	0	0
29	0	0	0	0	59	0	0	0	0
30	0	0	0	0	60	0	0	0	0

OBSERVER'S NAME (PRINT) <i>Paul Clotzho</i>	
OBSERVER'S SIGNATURE <i>Paul</i>	DATE <i>6-16-22</i>
ORGANIZATION <i>Richt-Riley Co.</i>	
CERTIFIED BY <i>Singleton</i>	DATE <i>3-26-22</i>
CONTINUED ON VEO FORM NUMBER	

VISIBLE EMISSION OBSERVATION FORM

No.

COMPANY NAME <i>Rieth-Riley Kelson Sand Gravel</i>		
STREET ADDRESS		
CITY <i>Madison City</i>	STATE <i>MS</i>	ZIP
PHONE (KEY CONTACT)	SOURCE ID NUMBER	

PROCESS EQUIPMENT <i>PSA-35</i>	OPERATING MODE
CONTROL EQUIPMENT	OPERATING MODE

DESCRIBE EMISSION POINT <i>Head Pully</i>
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HEIGHT ABOVE GROUND LEVEL <i>40'</i>	HEIGHT RELATIVE TO OBSERVER Start <i>35'</i> End <i>35'</i>
DISTANCE FROM OBSERVER Start <i>80'</i> End	DIRECTION FROM OBSERVER Start <i>80'</i> End

DESCRIBE EMISSIONS Start <i>Sand Gravel / Dust</i> End	
EMISSION COLOR Start End	IF WATER DROPLET PLUME Attached ☐ Detached ☐
P IN THE PLUME AT WHICH OPACITY WAS DETERMINED Start End	

DESCRIBE PLUME BACKGROUND Start <i>SKY - Blue</i> End <i>SKY - Blue</i>	
BACKGROUND COLOR Start <i>Blue</i> End <i>Blue</i>	SKY CONDITIONS Start <i>Clear</i> End <i>Clear</i>
WIND SPEED Start <i>5-10 mph</i> End <i>5-10 mph</i>	WIND DIRECTION Start <i>North</i> End <i>North</i>
AMBIENT TEMP Start <i>80°F</i> End <i>80°F</i>	WET BULB TEMP Start End

Stack with Plume Sun Wind	SOURCE LAYOUT SKETCH Draw North Arrow

ADDITIONAL INFORMATION

OBSERVATION DATE <i>7-6-22</i>		START TIME <i>2:08</i>		END TIME <i>3:08</i>	
SEC	0	15	30	45	COMMENTS
MIN					
1	0	0	0	0	31 0 0 0 0
2	0	0	0	0	32 0 0 0 0
3	0	0	0	0	33 0 0 0 0
4	0	0	0	0	34 0 0 0 0
5	0	0	0	0	35 0 0 0 0
6	0	0	0	0	36 0 0 0 0
7	0	0	0	0	37 0 0 0 0
8	0	0	0	0	38 0 0 0 0
9	0	0	0	0	39 0 0 0 0
10	0	0	0	0	40 0 0 0 0
11	0	0	0	0	41 0 0 0 0
12	0	0	0	0	42 5 5 0 0
13	0	0	0	0	43 5 0 0 0
14	0	0	0	0	44 0 0 0 0
15	0	0	0	0	45 0 0 0 0
16	0	0	0	0	46 0 0 0 0
17	0	0	0	0	47 0 0 0 0
18	0	0	0	0	48 0 0 0 0
19	0	0	0	0	49 0 0 0 0
20	0	0	0	0	50 0 0 0 0
21	0	0	0	0	51 0 0 0 0
22	5	5	0	0	52 0 0 0 0
23	0	0	0	0	53 0 0 0 0
24	0	0	0	0	54 0 0 0 0
25	0	0	0	0	55 0 0 0 0
26	0	0	0	0	56 0 0 0 0
27	0	0	0	0	57 0 0 0 0
28	0	0	0	0	58 0 0 0 0
29	0	0	0	0	59 0 0 0 0
30	0	0	0	0	60 0 0 0 0

OBSERVER'S NAME (PRINT) <i>Paul Clotzko</i>	
OBSERVER'S SIGNATURE <i>Paul</i>	DATE <i>7-6-22</i>
ORGANIZATION <i>Rieth-Riley Co.</i>	
CERTIFIED BY <i>Singleton</i>	DATE <i>3-26-22</i>

CONTINUED ON VEO FORM NUMBER

VISIBLE EMISSION OBSERVATION FORM

No.

COMPANY NAME <i>Rieth Riley</i>		
ST ADDRESS		
CITY	STATE	ZIP
PHONE (KEY CONTACT)		SOURCE ID NUMBER

PROCESS EQUIPMENT <i>Conveyor PAS-8</i>	OPERATING MODE
CONTROL EQUIPMENT <i>SPM Buss</i>	OPERATING MODE

DESCRIBE EMISSION POINT
Supply Conveyor

HEIGHT ABOVE GROUND LEVEL <i>18'</i>	HEIGHT RELATIVE TO OBSERVER Start <i>15'</i> End
DISTANCE FROM OBSERVER Start <i>80</i> End <i>80</i>	DIRECTION FROM OBSERVER Start <i>West-NW</i> End <i>West-NW</i>

DESCRIBE EMISSIONS

Start *Sand & Gravel* End

EMISSION COLOR	IF WATER DROPLET PLUME
Start End	Attached ☐ Detached ☐
P IN THE PLUME AT WHICH OPACITY WAS DETERMINED	
Start <i>1' Above Supply Con</i> End <i>2' Above Supply Con</i>	

DESCRIBE PLUME BACKGROUND

Start *sky* End *sky*

BACKGROUND COLOR	SKY CONDITIONS
Start <i>Blue</i> End <i>Blue</i>	Start <i>Clear</i> End <i>Clear</i>
WIND SPEED	WIND DIRECTION
Start <i>SW</i> End	Start <i>East</i> End
AMBIENT TEMP	WET BULB TEMP RH, percent
Start <i>70°F</i> End	

Stack with Plume

Sun

Wind

SOURCE LAYOUT SKETCH

Draw North Arrow

X Emission Point

Observer's Position

140°

Sun Location Line

OBSERVATION DATE		START TIME		END TIME	
<i>6-16-22</i>		<i>1:00 PM</i>		<i>2:00 PM</i>	
SEC	0	15	30	45	COMMENTS
MIN					
1	0	0	0	0	<i>31 0 0 0 0</i>
2	0	5	0	0	<i>32 0 0 0 0</i>
3	0	0	0	0	<i>33 0 0 0 0</i>
4	0	0	0	0	<i>34 0 0 0 0</i>
5	0	0	0	0	<i>35 0 0 0 0</i>
6	0	0	0	0	<i>36 0 0 0 0</i>
7	0	0	0	0	<i>37 0 0 0 0</i>
8	0	0	0	0	<i>38 0 0 0 0</i>
9	0	0	0	0	<i>39 0 0 0 0</i>
10	0	0	0	0	<i>40 0 0 0 0</i>
11	0	0	0	0	<i>41 0 0 0 0</i>
12	0	0	0	0	<i>42 0 0 0 0</i>
13	0	0	0	0	<i>43 0 0 0 0</i>
14	0	0	0	0	<i>44 0 0 0 0</i>
15	0	0	0	0	<i>45 0 0 0 0</i>
16	0	0	0	0	<i>46 0 0 0 0</i>
17	0	0	0	0	<i>47 0 0 0 0</i>
18	0	0	0	0	<i>48 0 0 0 0</i>
19	0	5	0	0	<i>49 0 0 0 0</i>
20	0	0	0	0	<i>50 0 0 0 0</i>
21	0	0	0	0	<i>51 0 0 0 0</i>
22	0	0	0	0	<i>52 0 0 0 0</i>
23	0	0	0	0	<i>53 0 0 0 0</i>
24	0	0	0	0	<i>54 0 0 0 0</i>
25	0	0	0	0	<i>55 0 0 0 0</i>
26	0	0	0	0	<i>56 0 0 0 0</i>
27	0	0	0	0	<i>57 0 0 0 0</i>
28	0	0	0	0	<i>58 0 0 0 0</i>
29	0	0	0	0	<i>59 0 0 0 0</i>
30	0	0	0	0	<i>60 0 0 0 0</i>

OBSERVER'S NAME (PRINT) <i>Paul C. Lotz</i>	
OBSERVER'S SIGNATURE <i>Paul C. Lotz</i>	DATE <i>6-16-22</i>
ORGANIZATION <i>Rieth Riley Co.</i>	
CERTIFIED BY <i>Singleton</i>	DATE <i>3-26-22</i>

CONTINUED ON VEO FORM NUMBER

VISIBLE EMISSION OBSERVATION FORM

No.

COMPANY NAME <i>Rieth-Riley : Kusson Sino Gravel</i>		
STREET ADDRESS		
CITY <i>Maple City</i>	STATE <i>MO</i>	ZIP
PHONE (KEY CONTACT)	SOURCE ID NUMBER	

PROCESS EQUIPMENT <i>WSA-22</i>	OPERATING MODE
CONTROL EQUIPMENT	OPERATING MODE

DESCRIBE EMISSION POINT <i>Head Pully</i>	
HEIGHT ABOVE GROUND LEVEL <i>10'</i>	HEIGHT RELATIVE TO OBSERVER Start <i>5'</i> End <i>5'</i>
DISTANCE FROM OBSERVER Start <i>20'</i> End <i>20'</i>	DIRECTION FROM OBSERVER Start <i>East</i> End <i>East</i>

DESCRIBE EMISSIONS Start <i>Pest / Sand line / Stee.</i> End	
EMISSION COLOR Start End	IF WATER DROPLET PLUME Attached ☐ Detached ☐
R IN THE PLUME AT WHICH OPACITY WAS DETERMINED Start End	

DESCRIBE PLUME BACKGROUND Start <i>sky</i> End <i>sky</i>	
BACKGROUND COLOR Start <i>Blue</i> End <i>Blue</i>	SKY CONDITIONS Start <i>clear</i> End <i>clear</i>
WIND SPEED Start <i>10 mph</i> End	WIND DIRECTION Start <i>North</i> End
AMBIENT TEMP Start <i>80°F</i> End <i>80°F</i>	WET BULB TEMP RH, percent

Stack with Plume Sun Wind	SOURCE LAYOUT SKETCH Draw North Arrow

ADDITIONAL INFORMATION

OBSERVATION DATE				START TIME		END TIME		
7-6-22				1:00		2:00		
SEC	0	15	30	45	COMMENTS			
MIN								
1	0	0	0	0	31	0	0	0
2	0	0	0	0	32	0	0	0
3	0	0	0	0	33	0	0	0
4	0	0	0	0	34	0	0	0
5	0	0	0	0	35	0	0	0
6	0	0	0	0	36	0	5	0
7	0	0	0	0	37	0	0	0
8	0	0	0	0	38	0	0	5
9	0	0	0	0	39	0	0	0
10	0	0	0	0	40	0	0	0
11	0	0	0	0	41	0	0	0
12	0	0	0	0	42	0	0	0
13	0	0	0	5	43	0	0	0
14	0	0	5	0	44	0	0	0
15	0	0	0	0	45	0	0	0
16	0	0	5	0	46	0	0	0
17	0	0	0	0	47	0	0	0
18	0	0	0	0	48	0	0	0
19	0	0	5	0	49	0	0	0
20	0	0	0	0	50	0	0	0
21	0	0	0	0	51	0	0	0
22	0	0	0	0	52	0	0	0
23	0	0	0	0	53	0	0	0
24	0	0	0	0	54	0	0	0
25	0	0	0	0	55	0	0	0
26	0	0	0	0	56	0	0	0
27	0	0	0	0	57	0	5	5
28	0	0	0	0	58	0	0	0
29	0	0	0	0	59	0	0	0
30	0	0	0	0	60	0	0	0

OBSERVER'S NAME (PRINT) <i>Paul C. Stzholder</i>	DATE <i>7-6-22</i>
OBSERVER'S SIGNATURE <i>Paul C.</i>	DATE <i>7-6-22</i>
ORGANIZATION <i>Rieth-Riley</i>	
CERTIFIED BY <i>Single to</i>	DATE <i>3-26-22</i>
CONTINUED ON VEO FORM NUMBER	

VISIBLE EMISSION OBSERVATION FORM

No.

COMPANY NAME <i>Rieth-Riley Karsen Sand</i>		
STREET ADDRESS		
CITY	STATE	ZIP
PHONE (KEY CONTACT)	SOURCE ID NUMBER	
PROCESS EQUIPMENT <i>PCA-69</i>	OPERATING MODE	
CONTROL EQUIPMENT	OPERATING MODE	

DESCRIBE EMISSION POINT <i>Head Pully -</i>	
HEIGHT ABOVE GROUND LEVEL <i>10'</i>	HEIGHT RELATIVE TO OBSERVER Start <i>6'</i> End <i>6'</i>
DISTANCE FROM OBSERVER Start <i>80'</i> End <i>80'</i>	DIRECTION FROM OBSERVER Start <i>East/South</i> End <i>East/South</i>

DESCRIBE EMISSIONS Start <i>Stone Dust / Scalding</i> End	
EMISSION COLOR Start End	IF WATER DROPLET PLUME Attached ☐ Detached ☐
P IN THE PLUME AT WHICH OPACITY WAS DETERMINED Start End	

DESCRIBE PLUME BACKGROUND Start <i>sky</i> End <i>sky</i>	
BACKGROUND COLOR Start <i>Blue</i> End <i>Blue</i>	SKY CONDITIONS Start <i>clear</i> End <i>clear</i>
WIND SPEED Start <i>10 mph</i> End	WIND DIRECTION Start <i>North</i> End
AMBIENT TEMP Start <i>80°F</i> End <i>80°F</i>	WET BULB TEMP RH, percent

Stack with Plume Sun Wind	SOURCE LAYOUT SKETCH Draw North Arrow

ADDITIONAL INFORMATION

OBSERVATION DATE <i>7/6/2022</i>		START TIME <i>1:00 PM</i>		END TIME <i>2:00 PM</i>	
SEC	0	15	30	45	COMMENTS
MIN					
1	0	0	0	0	31 0 0 0 0
2	0	0	0	0	32 0 0 5 0
3	0	0	0	0	33 0 0 0 0
4	0	0	0	0	34 0 0 0 0
5	0	0	0	0	35 0 0 0 0
6	0	5	0	0	36 0 0 0 0
7	0	0	0	0	37 0 0 0 0
8	0	0	0	0	38 0 0 0 0
9	0	0	0	0	39 0 0 0 0
10	0	0	0	0	40 0 0 0 0
11	0	0	0	0	41 0 5 0 0
12	0	0	0	0	42 0 0 0 0
13	0	0	0	0	43 0 0 0 0
14	0	0	5	0	44 0 0 0 0
15	0	0	0	0	45 0 0 0 0
16	0	0	0	0	46 0 0 0 0
17	0	0	0	0	47 0 0 0 0
18	0	0	0	0	48 0 0 0 0
19	0	0	0	0	49 0 0 0 0
20	0	0	0	0	50 0 0 0 0
21	0	0	0	0	51 0 0 0 0
22	0	0	0	0	52 0 0 0 0
23	0	0	0	0	53 0 0 0 0
24	0	5	0	0	54 0 0 0 0
25	0	0	0	0	55 0 5 0 0
26	0	0	0	0	56 0 0 0 0
27	0	0	0	0	57 0 0 0 0
28	0	0	0	0	58 0 0 0 0
29	0	0	0	0	59 0 0 0 0
30	0	0	0	0	60 0 0 0 0

OBSERVER'S NAME (PRINT) <i>Paul Celotzhofer</i>	
OBSERVER'S SIGNATURE <i>Paul</i>	DATE <i>7-6-22</i>
ORGANIZATION <i>Rieth-Riley Co.</i>	
CERTIFIED BY <i>Single for</i>	DATE <i>8-26-22</i>
CONTINUED ON VEO FORM NUMBER	