

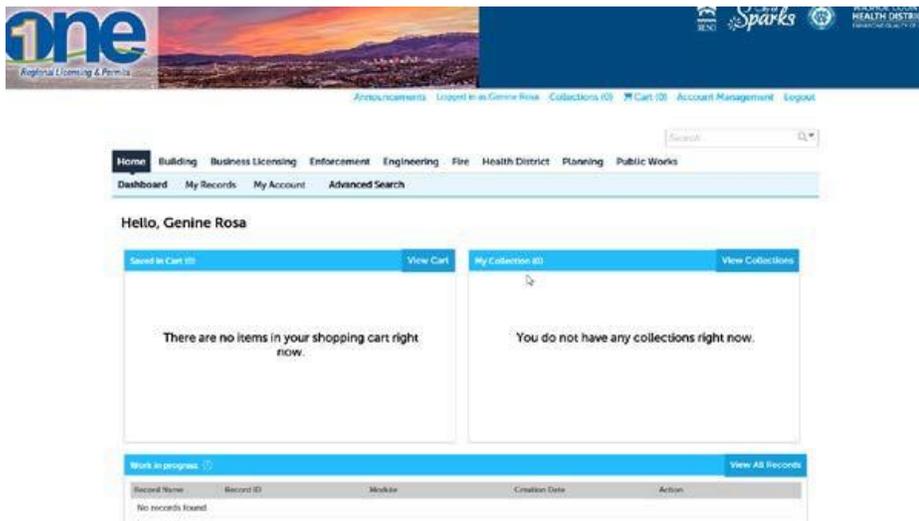
Submitting an Application for a Dust Control Permit via Accela Citizen Access:

You must have an account: create an online account here: <https://aca.accela.com/ONE/>.



This account can also be used to access all licenses & permits with the City of Reno, Sparks and Washoe County.

Once your account has been created and you are logged in you will see a screen like this, this is your “Dashboard”:



Click on the **Health District** tab, you will then be taken to the following screen: From here you can search for records or create and application. Click on the **Create an Application by Agency**.



Then click on the tab by **Health** and click the button for **Washoe County – Air Quality Dust Control**. Then **Continue Application**.

### Select Services

- ▶ Building EZ - Commercial
- ▶ Building EZ - Residential  
One- and Two- Family Dwelling Units Only
- ▶ Building
- ▶ Enforcement  
Submit a complaint.
- ▶ Engineering
- ▶ Fire
- ▶ **Health**
  - Washoe County - Air Quality Asbestos
  - Washoe County - Air Quality Dust Control
  - Washoe County - Air Quality Stationary Source
  - Washoe County - Air Quality Woodstove
  - Washoe County - Child Care Facility
  - Washoe County - Cottage Food Operation
  - Washoe County - Farm-to-Fork
  - Washoe County - Food Illness Complaint
  - Washoe County - Food Permit
  - Washoe County - Food Permit Exemption
  - Washoe County - Garbage Exemption
  - Washoe County - Invasive Body Decoration
  - Washoe County - Liquid Waste Trucks
  - Washoe County - Mobile Home & RV Parks
  - Washoe County - Public Accommodations
  - Washoe County - Public Bathing Permit
  - Washoe County - RV Dump Stations
  - Washoe County - Schools Permit
  - Washoe County - Underground Storage Tanks Site Permit
  - Washoe County - Waste Generator Registration
  - Washoe County - Waste Management
- ▶ Licenses  
Select all license types that pertain to your business
- ▶ Planning
- ▶ Other

Fill in the Parcel Number and click **Search**. The parcel # can be found on the [Assessor's Website](#)

### Parcel

Parcel Number is a required field. Please put parcel number in the following format XXX-XXX-XX.

\*Parcel Number:

Lot:  Block:  Subdivision:

Book:  Page:

Tract:  Legal Description:

Parcel Area:

Land Value:  Improved Value:  Exemption Value:

The results will show up in a pop up box like this:

### Parcel Search Result List

Parcel Number	Lot	Block	Subdivision
<input checked="" type="radio"/> 008-030-05	0		Not Available

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#### Associated Addresses

Showing 1-3 of 3

Address	City	State	Zip
<input checked="" type="radio"/> 1001 E 9TH ST RENO NV 89512	RENO	NV	89512
<input type="radio"/> 1155 E 9TH ST RENO NV 89512	RENO	NV	89512
<input type="radio"/> 1350 N WELLS AVE RENO NV 89512	RENO	NV	89512

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#### Associated Owners

Showing 1-1 of 1

Name	Address
<input checked="" type="radio"/> NEVADA STATE OF	1001 E 9TH ST BLDG A C/O WASHOE COUNTY COMMUNITY SERVICES DEPT RENO NV 89520

Select the correct address if there is more than one option, then click **Select** to return to the parcel/address screen. The information will auto populate in the Parcel and Address sections.

\*\*\*NOTE: For all projects involving road rehab/maintenance, please select a parcel # that is closest to the project (Preferably an open lot or commercial property)

Select **Continue Application**.

### Parcel

Parcel Number is a required field. Please put parcel number in the following format XXX-XXX-XX.

\*Parcel Number:

Lot:  Block:  Subdivision:

Book:  Page:

Tract:  Legal Description:

Parcel Area:

Land Value:  Improved Value:  Exemption Value:

---

### Address

\*Street No.:  Direction:  \*Street Name:  Street Type:

Unit Type:  Unit No.:

City:  State:  \*Zip:

Enter the information for the **Applicant, Contractor**, and both **After Hours Contacts**.

**Applicant:** This is the organization/contact to whom the permit will be issued to and will appear on the permit. If you are filling this out for someone else, do not put your information in that area, put the contact person for the project

**Contractor:** This is the general contractor that is responsible for the project in its entirety from beginning to end, no subcontractors

**After Hours Contact:** These are the individuals that will be contacted after hours if there is a dust issue. Please put cell phone numbers, not business phone numbers

If you choose **Select from Account** all of your account information will automatically show up, otherwise select **Add New** or **Look Up** to find another

Home Building Business Licensing Enforcement Engineering Fire **Health District** Planning Public Works

Create an Application by Agency Search Applications

#### Pollution Control Plans

1 Step 1 2 Step 2 3 Review 4 Pay Fees 5 Record Issuance

Step 1: Step 1 > Page 2

\* indicates a required field.

#### Applicant

**If applying for an organization/business, please select "ADD NEW". Applicant is the entity/business to whom the permit will be issued to.**

Select from Account Add New Look Up

#### Contractor

**General Contractor for the entire project, not subcontractors.**

Select from Account Add New Look Up

#### After Hours Contact

**This is the person to be contacted during non working hours in case of DUST problems.**

Select from Account Add New Look Up

#### After Hours Contact

**This is the person to be contacted during non working hours in case of DUST problems.**

Select from Account Add New Look Up

Continue Application »

Save and resume later

Enter the following information for the Applicant as seen below:

- Select **Organization** from drop down menu
- Fill in the remaining information with red arrows
  - Name of Business
  - Work Phone and/or Mobile Phone
  - Email Address
  - Select **Preferred Channel** by clicking the drop down
- Click **Add Additional Contact Address** and fill in the information with red arrows
  - Change **Address Type** to **Mailing** from the drop down menu
  - **Address Line 1** enter the Applicant's Name
  - **Address Line 2** enter the street address
  - City, State and Zip Code
  - Click **Save and Close**

**Contact Information**

Individual/Organization:  
Organization

\*First: Middle: \*Last: Home Phone:  
Primary Phone Number

Name of Business:  
Washoe County

Work Phone:  
(775) 784-7200

DBA/Trade Name:

Mobile Phone:  
(775) 784-7200

E-mail:  
kmparsons@washoecounty.us

Preferred Channel:  
Work Phone

**Add Additional Contact Address**

To edit a contact address, click the address link.

Showing 0-0 of 0

Address Type	Recipient	Address	Action
No records found.			

Continue Clear Discard Changes

**Contact Address Information**

Address Type:  
Mailing

Address Line 1:  
Kelly Parsons

Address Line 2:  
1001 E Ninth Street

Address Line 3:

City: State: ZIP Code: Country/Region:  
Reno NV 89512 United States

**Save and Close** Save and Add Another Clear Discard Changes

- Contract Address has been added, click **Continue**

**Contact Information**

Individual/Organization:  
Organization

\*First: Middle: \*Last: Home Phone:  
Primary Phone Number

Name of Business:  
Washoe County

Work Phone:  
(775) 784-7200

DBA/Trade Name:

Mobile Phone:  
(775) 784-7200

E-mail:  
kmparsons@washoecounty.us

Preferred Channel:  
Work Phone

**Add Additional Contact Address**

To edit a contact address, click the address link.

✔ Contact address added successfully.

Showing 1-1 of 1

Address Type	Recipient	Address	Action
Mailing	Kelly Parsons	1001 E Ninth Street	Action

**Continue** Clear Discard Changes

If you get this message:

## Closely Matched Registered Contact

A contact is already registered with this email address. Confirm below whether to use the contact information entered on the previous screen, or update the application with the information displayed below (Contact information entered on the previous screen will be lost).

Select **Use contact information entered on previous screen**, click **Continue**

Use with the above information.  
 Use contact information entered on the previous screen. ←  
 Do not use the above contact.

**Continue** Discard Changes

Continue this same process above for Contractor.

\*\*\*If there is no current General Contractor, put “TBD” in the **Name of Business** field. The [Modification Form](#) will need to be completed when a general contractor has been selected.\*\*\*

For After Hours Contact(s)

- Select **Individual** from drop down menu
- Fill in the remaining information with red arrows
  - First Name and Last Name
  - Mobile Phone and/or Work Phone
  - Email Address
  - Select **Preferred Channel** by clicking the drop down
- Click **Continue**

\*\*\*No address required for After Hours Contact\*\*\*

**Contact Information**

\*Individual/Organization:  
Individual ←

\*First: Kelly Middle: Last: Parsons ← Home Phone: (775) 784-7200 ←  
ry Phone Number

Name of Business: Work Phone: (775) 784-7200 ←

DBA/Trade Name: Mobile Phone: (775) 784-7200 ←

E-mail: kmparsons@washoecounty.us ← Preferred Channel: Mobile Phone ←

LIMITATION:

▼ Contact Addresses

**Add Additional Contact Address**

To edit a contact address, click the address link.

Showing 0-0 of 0

Address Type	Recipient	Address	Action
No records found.			

**Continue** Clear Discard Changes

When all the contacts have been added, the screen should look like this and you may click **Continue Application**

**Applicant**

---

**If applying for an organization/business, please select "ADD NEW". Applicant is the entity/business to whom the permit will be issued to.**

✔ Contact added successfully.

Imparsonse@washcocounty.us  
Home phone:  
Mobile Phone:(775) 784-7200  
Work Phone: (775) 784-7200  
Fax:  
[Edit](#) [Remove](#)

▼ Contact Addresses

**Add Additional Contact Address**

To edit a contact address, click the address link.

Showing 1-1 of 1

Address Type	Recipient	Address	Action
Mailing		<a href="#">Kelly Parsons, 1001 E Ninth Street</a>	<a href="#">Actions</a> ▼

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**Contractor**

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**General Contractor for the entire project, not subcontractors.**

✔ Contact added successfully.

Imparsonse@washcocounty.us  
Home phone:  
Mobile Phone:(775) 555-7000  
Work Phone: (775) 555-7200  
Fax:  
[Edit](#) [Remove](#)

▼ Contact Addresses

**Add Additional Contact Address**

To edit a contact address, click the address link.

Showing 1-1 of 1

Address Type	Recipient	Address	Action
Business		<a href="#">Kelly Parsons, 1001 E Ninth Street</a>	<a href="#">Actions</a> ▼

---

**After Hours Contact**

---

**This is the person to be contacted during non working hours in case of DUST problems.**

✔ Contact added successfully.

**Kelly Parsons**  
Imparsonse@washcocounty.us  
Home phone:  
Mobile Phone:(+1)775 784-7200  
Work Phone:  
Fax:  
[Edit](#) [Remove](#)

▼ Contact Addresses

**Add Additional Contact Address**

To edit a contact address, click the address link.

Showing 0-0 of 0

Address Type	Recipient	Address	Action
No records found.			

---

**After Hours Contact**

---

**This is the person to be contacted during non working hours in case of DUST problems.**

✔ Contact added successfully.

**Kelly Parsons**  
Imparsonse@washcocounty.us  
Home phone:  
Mobile Phone:(+1)775 784-7200  
Work Phone:  
Fax:  
[Edit](#) [Remove](#)

▼ Contact Addresses

**Add Additional Contact Address**

To edit a contact address, click the address link.

Showing 0-0 of 0

Address Type	Recipient	Address	Action
No records found.			

**Continue Application »** **Save and resume later**

Fill in the following information:

**Application Name:** Dust Permit Application

**Detailed Description:** Be specific about the scope of the project (ex: 20 acres of disturbance for residential subdivision)

**Name of Project/Development:** Name of project that will be on the permit

**Project Start Date:** Date project starts

**Project Completion Date:** Date project is complete

**Dust Control Type:** Click the drop-down menu and select what kind of project it is

**Size of Project:** How many acres of land that will be disturbed during the project

**Existing Permit Number:** If there is an existing permit that is about to expire, put the permit number in this area. If

there is no existing permit number, leave it blank or put in N/A.

## Water Trucks: How many water trucks will be onsite to control dust

Step 1: Step 1 > Page 3

\* indicates a required field.

### Detail Information

Please list whether this is a dust control or smoke management plan. Please include a description of the proposed project.

\* Application Name:

Dust Permit Application

\* Detailed Description:

3.6 acres of disturbance for parking lot rehab/maintenance. Dig up old parking lot and putting new asphalt.

Give a detailed description of the project in this section

### Custom Fields

#### GENERAL INFORMATION

\* Name of Project/Development:

Washoe County Parking Lc

Name of project that will be on the permit

\* Project Start Date:

08/31/2020

Project Completion Date:

09/30/2020

Dust Control Type:

Road Rehab/Maintenance

Size of Project:

3.6

Existing Permit Number:

n/a

If there is no existing permit, leave blank or N/A

Water trucks:

1

Continue Application »

Save and resume later

Click **Continue Application** once completed.

Here you need to attach the dust permit application and site location, grading and/or phasing maps, and the project information sheet (the second page to the application). If you need a map for your project, follow these instructions using our [Washoe Regional Mapping System](#).

Click **Add**

Step 2: Step 2 > Page 1

\* indicates a required field.

### Attachment

Please attach a map of site location, grading and or phasing maps, and project information sheet. (Attach each as individual document)

The maximum file size allowed is 600 MB.

ade;adp;bat;chm;cmd;com;cpl;exe;hta;html;ins;isp;jar;js;jse;lib;lnk;mde;mht;mhtml;msc;msp;mst;php;pif;scr;scrt;shb;sys;vb;vbe;vbs;vxd;wsc;wsf;wsh;zip are disallowed file types to upload.

Name	Type	Size	Latest Update	Action
No records found.				

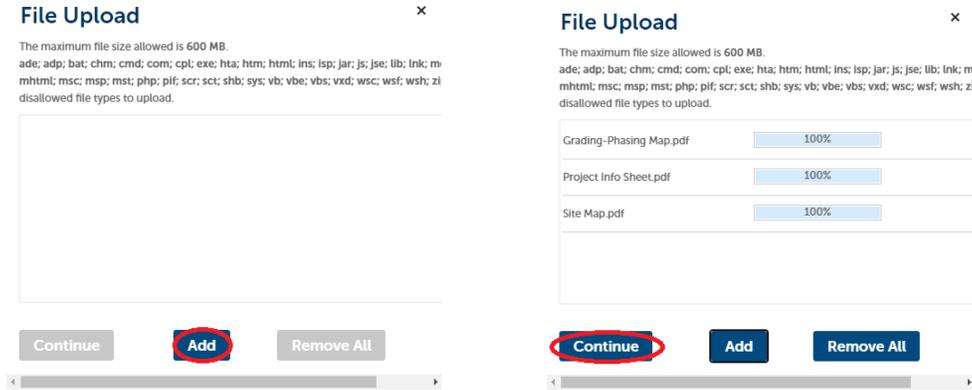
Add

Continue Application »

Save and resume later

A pop-up will come up, click **Add**. Select the following documents to be uploaded: Project Information Sheet (second page on the application), **Site Location/Vicinity Map**, and **Grading and/Phasing Maps**.

Once all the files have been uploaded 100%, click **Continue**



For each attachment, click the drop-down menu and select the appropriate document type and write a brief description, click **Save**

The form contains three attachment entries. Each entry has a 'Type' dropdown menu, a file name and progress bar, and a 'Description' text area. The 'Save' button is circled in red. At the bottom, there are 'Continue Application' and 'Save and resume later' buttons.

Type	File	Description
Grading Plans or Phasing Maps	Grading-Phasing Map.pdf (100%)	Parking lot phasing map
Project Information Sheet	Project Info Sheet.pdf (100%)	Project info
Site Plan	Site Map.pdf (100%)	Site Location Map

All the attachments should be attached. Click **Continue Application**

Step 2: Step 2 > Page 1

\* indicates a required field.

### Attachment

Please attach a map of site location, grading and or phasing maps, and project information sheet. (Attach each as individual document)

The maximum file size allowed is 600 MB. ade; adp; bat; chm; cmd; com; cpl; exe; hta; htm; html; ins; isp; jar; js; jse; lib; lnk; m; mhtml; msc; msp; mst; php; pif; scr; sct; shb; sys; vb; vbe; vbs; vxd; wsc; wsf; wsh; zip are disallowed file types to upload.

Name	Type	Size	Latest Update	Action
Grading-Phasing Map.pdf	Grading Plans or Phasing Maps	1.48 MB	07/28/2020	Actions ▾
Site Map.pdf	Site Plan	1.48 MB	07/28/2020	Actions ▾
Project Info Sheet.pdf	Project Information Sheet	1.48 MB	07/28/2020	Actions ▾

The image shows three buttons: 'Add', 'Continue Application', and 'Save and resume later'. The 'Continue Application' button is circled in red.

Review all information for accuracy, edit if needed. Click **Continue Application** once complete and correct:

### Pollution Control Plans

1 Step 1	2 Step 2	3 Review	4 Pay Fees	5 Record Issuance
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### Step 3: Review

[Continue Application »](#)

[Save and resume later](#)

Please review all information below. Click the "Edit" buttons to make changes to sections or "Continue Application" to move on.

### Record Type

Pollution Control Plans

#### Parcel

[Edit](#)

Parcel Number: 008-030-05  
Block: 0  
Book: 008  
Page: 03  
Tract: 0  
Legal Description: FR E2 SW4 SEC 1 TWP 19 RGE 19  
Land Value: 2189320  
Improved Value: 13406410  
Exemption Value: 15595730

#### Address

[Edit](#)

1001 E 9TH ST, RENO, NV 89512

#### Applicant

[Edit](#)

Individual  
Kelly Parsons  
Home Phone: (775) 784-7203  
E-mail: kmparsons@washoecounty.us  
Preferred Channel: Work Phone

#### Contractor

[Edit](#)

Work Phone: (775) 555-7200  
Mobile Phone: (775) 555-7000  
E-mail: kmparsons@washoecounty.us  
Preferred Channel: Work Phone

#### Detail Information

[Edit](#)

Application Name: Dust Permit Application  
Detailed Description: 3.6 acres of disturbance for parking lot rehab/maintenance. Dig up old parking lot and putting new asphalt.

### Custom Fields

#### GENERAL INFORMATION

[Edit](#)

Name of Project/Development: Washoe County Parking Lot Maintenance  
Project Start Date: 08/31/2020  
Project Completion Date: 09/30/2020  
Dust Control Type: Road Rehab/Maintenance  
Size of Project: 3.6  
Existing Permit Number: n/a  
Water trucks: 1

#### Attachment

[Edit](#)

The maximum file size allowed is 600 MB.  
ade;adp;bat;chm;cmd;com;cpl;exe;hta;htm;html;ins;isp;jar;js;je;lib;lnk;mde;mht;mhtml;msc;msp;fst;php;pif;scr;scs;shb;sys;vb;vbe;vbs;vxd;wsc;wsf;wsh;zip are disallowed file types to upload.

Name	Type	Size	Latest Update	Action
<a href="#">Grading-Phasing Map.pdf</a>	Grading Plans or Phasing Maps	1.48 MB	07/28/2020	<a href="#">Actions ▼</a>
<a href="#">Site Map.pdf</a>	Site Plan	1.48 MB	07/28/2020	<a href="#">Actions ▼</a>
<a href="#">Project Info Sheet.pdf</a>	Project Information Sheet	1.48 MB	07/28/2020	<a href="#">Actions ▼</a>

Signature on this dust control permit application does NOT constitute full Health District approval for this project. Any additional Health permits such as are required for septic, wells, underground storage tanks, or air pollution sources must be obtained separately.

The Applicant's signature on this application shall constitute agreement by the Applicant to accept responsibility for meeting the "Conditions of Plan"

By checking this box, you agree to the above and accept responsibility for the project as described and certify that the information is accurate and current. I acknowledge that any changes to the project from how it is presented on the date of the dust control permit will require AQMD notification. Submitting project information that is NOT accurate and current or failure to notify AQMD of changes to the project will result in a notice of violation with associated fines assessed.

Date: 07/28/2020

[Continue Application »](#)

[Save and resume later](#)

You will then see a confirmation screen that your application was submitted.

Create an Application by Agency Search Applications

- 1 Select item to pay
- 2 Payment information
- 3 **Receipt/Record issuance**

### Step 3: Receipt/Record issuance

#### Confirmation



Your application(s) has been successfully submitted.  
Please print your record(s) and retain a copy for your records.

#### No Address



WASHOE

APCP20-0003 Air Quality Dust Control Permit

Air Quality Management will then review and begin processing the application, assuming we have all the correct information. **Please be sure you provide a correct e-mail address.** If we need more information, we will contact you via e-mail. Once the application has been reviewed, you will receive an email regarding payment. The dust control permit will be processed with 10 business days of payment being received.

SUPP - Washoe County Health District - Invoice for APCP20-0022



noreply@accela.com  
To: Parsons, Kelly M

↩ Reply ↶ Reply All → Forward ⋮

Wed 7/29/2020 2:58 PM

**[NOTICE: This message originated outside of Washoe County -- DO NOT CLICK on links or open attachments unless you are sure the content is safe.]**

**\*If you applied in person or through the mail and payment was processed at that time, please disregard this email. \***

The application for record# APCP20-0022 has been processed and is now ready for payment in Accela using Credit Card or E-Check.

Or

You may call the front desk at 775-784-7200 to pay for record# APCP20-0022 and they will e-mail you a receipt.

Payments by phone are accepted Monday - Friday between 8 am and 4 pm.

Once payment has been received the appropriate documents will be emailed to you.

Have a nice day,

Washoe County Air Quality Management