

Administratively Complete Application Gate  
Process for Notifying Facility their Application is Administratively Complete/Requesting  
Additional Information/Returning Applications

1. Admin. Specialist II in Dover Office (ASII) reviews application for administrative completeness per Administratively Complete Application Checklist. If application is complete, ASII in Dover Office notifies the facility by postcard. If the application is not complete, ASII contacts facility per step 2.
2. ASII telephones facility contact to identify the deficiency in the application. Contact given 7 calendar days to correct deficiency. If contact's email address is available, an email will be sent with a "read receipt" to insure the email was delivered and read.
3. If information is not received within 7 calendar days per item 1 above, a postcard will be sent to the facility. This postcard will require the information be submitted within 14 calendar days or the application will be returned to the facility.
4. If information is not received by the required date, Dover PMI completes letter template and returns application.

Action Items and Notes:

1. Application should be amended to include an email address for the facility contact.
2. To improve timeframes for sending the letter, we could revise the applications to include a fax number so we fax and then mail the postcard.

ADMINISTRATIVELY COMPLETE APPLICATION CHECKLIST

All Boxes Filled In \_\_\_\_\_

Application Signed \_\_\_\_\_

Emission Calculations or justification attached \_\_\_\_\_

Application and Advertisement Fees Included \_\_\_\_\_

Proof of Local Zoning \_\_\_\_\_

Coastal Zone Approval, if applicable \_\_\_\_\_

Applicant Background Questionnaire if New Facility \_\_\_\_\_

Administratively Complete Application Gate  
Information Request Checklist

Facility Name \_\_\_\_\_

Date Application Received \_\_\_\_\_

Application Form

- \_\_\_ AQM-2
- \_\_\_ AQM-4 \_\_\_ AQM-4(a-1) supplemental form (see box 39 to see if required)
- \_\_\_ AQM-9
- \_\_\_ AQM-12

Administratively Complete? (see attached administrative completeness criteria)

- \_\_\_ Yes  
Send Postcard (attach)  
Date sent \_\_\_\_\_
- \_\_\_ No

Facility Contacted? \_\_\_\_\_

\_\_\_ telephone  
Number \_\_\_\_\_  
Contact \_\_\_\_\_  
Date/time \_\_\_\_\_

\_\_\_ email (attach)  
Address \_\_\_\_\_  
Contact \_\_\_\_\_  
Date \_\_\_\_\_

Date information required to be submitted by \_\_\_\_\_

Information Received?

- \_\_\_ Yes  
Date \_\_\_\_\_
- \_\_\_ No  
Send Postcard (attach)  
Date sent \_\_\_\_\_

Information required to be submitted by \_\_\_\_\_

Information Received?

- \_\_\_ Yes  
Date \_\_\_\_\_
- \_\_\_ No  
Return application  
Date letter and application sent \_\_\_\_\_

Date

Company Name  
Street Address  
City, State, Zip Code

ATTENTION: Contact Name <Responsible Official or Environmental Coordinator>  
Contact Title

SUBJECT: Return of Administratively Incomplete Application

Dear. Mr./Ms. XXXXX:

Your application dated <insert date> has been judged by the Department to be administratively incomplete. The Department contacted you on <insert date> by <telephone or email> and again on <insert date> by mail to request the missing information. To date, <please include what permit application is lacking> has not been received by the Department. This information was required to be submitted by <insert date>.

The Department is unable to process your application without <please include what permit application is lacking>. Your incomplete application is being returned so that you may submit a complete application. Please contact <insert PM1> at <(302) 323-4542 or (302) 739-9402> if you have any questions or concerns.

Sincerely,

Dover Program Manager I  
Program Manager  
Engineering & Compliance Branch

PMI  
F:\EngAndCompliance\PM1\

pc: Dover <(Title V)> File



Attention: \_\_\_\_\_

Your facility submitted a permit application to DNREC/AQM dated \_\_\_\_\_ . This application was for a \_\_\_\_\_ and submitted on application form AQM-\_\_\_\_\_. Your application has been judged administratively complete by the Department.

Your assigned Engineer/Environmental Scientist is \_\_\_\_\_ .  
Your environmental permitting contact may be reached in the  
\_\_\_\_\_ New Castle office at (302) 323-4542  
\_\_\_\_\_ Dover Office at (302) 739-9402  
if you have any questions concerning your application.

The status of your permit application may be tracked through DNREC's Delaware Environmental Navigator (DEN). This service can be accessed at <http://www.dnrec.state.de.us/DNRECeis/> by choosing "Air Permits in the Pipeline" from the "Data View" pull-down menu.



Attention: \_\_\_\_\_

Your facility submitted an application for a \_\_\_\_\_ to DNREC/  
AQM dated \_\_\_\_\_. This application is administratively incomplete.

The Department contacted you by \_\_\_ phone \_\_\_ email on \_\_\_\_\_  
to request the following item(s):

- |  |  |
|--|--|
| <input type="checkbox"/> Signed application        | <input type="checkbox"/> Coastal Zone Approval               |
| <input type="checkbox"/> Application fee \$_____   | <input type="checkbox"/> Applicant Background Questionnaire  |
| <input type="checkbox"/> Advertisement fee \$_____ | <input type="checkbox"/> Emission estimate/calculation       |
| <input type="checkbox"/> Proof of local zoning     | <input type="checkbox"/> Complete parts _____ of application |

The Department has not received the above information. **If this information is not received within 14 calendar days, \_\_\_\_\_, your application will be returned** since it is administratively incomplete and can not be processed by the Department.