

APPENDIX 3 - ATMOSPHERIC DISPERSION MODELING CERTIFICATION CHECKOFF SHEET

APPLICANT Name: _____

Address: _____

Business Address: _____

County: _____

Email Address: _____

Phone: _____

NC Forest Service Employee: Yes ____ No ____ If yes, what unit (District, Region, etc.): _____

Does applicant plan to contract services for atmospheric dispersion modeling? : Yes ____ No ____

ADM Certification Method being requested: PC HYSPLIT BlueSky Playground (Web Based)

Certification Requirements

Date and location of Advanced Atmospheric Dispersion Modeling course successfully completed.

***Model Run Evaluation #1:**

- a. Burn plan attached? Yes ____ No ____
- b. Approved model used? Yes ____ No ____
- c. Do model inputs match burn plan parameters (weather, fuels, etc.)? Yes ____ No ____
- d. Do model output show acceptable levels of PM_{2.5} pollutants? Yes ____ No ____

Model Run Evaluation #2:

- a. Burn plan attached? Yes ____ No ____
- b. Approved model used? Yes ____ No ____
- c. Do model inputs match burn plan parameters (weather, fuels, etc.)? Yes ____ No ____
- d. Do model output show acceptable levels of PM_{2.5} pollutants? Yes ____ No ____

Model Run Evaluation #3:

- a. Burn plan attached? Yes ____ No ____
- b. Approved model used? Yes ____ No ____
- c. Do model inputs match burn plan parameters (weather, fuels, etc.)? Yes ____ No ____
- d. Do model output show acceptable levels of PM_{2.5} pollutants? Yes ____ No ____

**At a minimum, one model evaluation is satisfactory when utilizing BlueSky Playground only; three evaluations are still required when utilizing PC HYSPLIT.*

I hereby recommend that _____, Certified Burner
Number _____, be certified as an Atmospheric Dispersion Modeler.

EVALUATOR Printed Name: _____

Signature: _____

Certified Burner Number: _____

Comments: _____

Mail, Fax, or scan and email to the Fire Environment Forester. INCLUDE COMPLETE BURN PLAN(S) AND
MODEL RUN DATA RESULTS.

Fire Environment Forester
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(919) 857-4806 FAX
coopsrm@ncagr.gov