



READY-MIX CONCRETE GENERAL PERMIT RE-COVERAGE FORM

FOR COVERAGE UNDER MISSISSIPPI'S REISSUED MULTIMEDIA READY-MIX CONCRETE GENERAL PERMIT MSG11 GENERAL NPDES COVERAGE NO. MSG11 0 2 6 9

	INS	STRUCTIONS		
The submittal of this form is required This form must be completed and retu Letter of Instruction for Re-Coverage.	rned to the addi			
Amendments to the Storm Water Pollor is ineffective in controlling storm was		Plan (SWPPP) are requi	red to be attached if	the plan is not current
The applicant must be the owner or opmanager or environmental consultant; compliance.				
If the facility is out of business or no lo Termination (RFT) Form found in the wastewater and/or operate air emission This recoverage form is not required to ALL INFORMATION REC	Ready-Mix Con n equipment wit o be submitted it	ncrete Forms Package. Fa hout applicable permit co f the facility is submitting	cilities that continue verage are in violatio a request for termina	to discharge on of state law. ation of coverage.
Certificate of Coverage should be mailed	I to:	owner/operator	✓ facility	(please check one)
Discharge Monitoring Reports should be	mailed to:	✓ owner/operator	facility	(please check one)
✓ OWNER □	OPERATOR	INFORMATION (CH	ECK ONE OR BO	отн)
CONTACT NAME & POSITION: Charles Pr	iwowarski, Area Envir	ronmental Manager		
COMPANY NAME: Hanson Pipe & Precast				
STREET OR P.O. BOX: 840 West Avenue				
CITY: Deland	STATE: Florida		ZIP: 32720	Man WE
PHONE NUMBER (INCLUDE AREA CODI	E): 386-734-6228			

FACILITY/SITE INFORMATION

EACH ITY NAME III DO O D				
FACILITY NAME: Hanson Pipe & Precast - Jackson Northside				
CONTACT NAME & POSITION: Bill Poole, Plant Manager				
CONTACT PHONE NUMBER (INCLUDE AREA CODE): (601) 982-1100				
PRIMARY STANDARD INDUSTRIAL CLASSIFICATION (SIC) CODE & DESCRIPTION OF INDUSTRIAL ACTIVITY:				
(3 2 7 2) Concrete Pipe				
BATCHING TYPE: WET DRY CENTRAL MIX				
PLANT PRODUCTION RATE: 15 cubic yards/hr				
PHYSICAL SITE ADDRESS (IF NOT AVAILABLE INDICATE NEAREST NAMED ROAD):				
STREET: 2840 West Northside Drive				
CITY: _Jackson CO	OUNTY: Hinds	ZIP: 39213		
PROVIDE THE LATITUDE AND LONGITUDE OF EACH WASTEWATER OUTFALL (If no discharge, provide the coordinates of the plant entrance. Attach additional pages, if necessary.)				
LATITUDE: 32 degrees 21 min	utes 21.88 seconds LONGITUE	DE: 90 degrees 13 minutes 11.54 seconds		
LATITUDE:degrees minutes seconds LONGITUDE: degrees minutes seconds				
	TORM WATER LEAVING THE SITE WILL			
STORM WATER POLLUTION PREVENTION PLAN (SWPPP)				
I. IS A COPY OF THE SWPPP AT	THE PERMITTED SITE?	YES NO		
2. IF BASED ON INDUSTRY GEN	ERIC SWPPP, IS IT THE MOST RECENT C	OPY? YES NO		
	REQUIRMENTS LISTED IN ACTS 13 AND/ IF NO, PLEASE ATTACH THE AMENDME			
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations. I further certify that the project continues as described in the original notice of intent. Also, I certify that I understand when coverage is terminated I am no longer authorized to emit regulated air emissions and discharge wastewater or storm water associated with industrial activity under this general permit. I understand that discharging pollutants associated with industrial activity to waters of the state without NPDES coverage is in violation of state law.				
(A)((06/26/2014		
Authorized Signature		Date Signed		
Charles Piwowarski		Area Environmental Manager		
Printed Name ¹		Title		
¹ This application for re-coverage shall be signed according to ACT25, T-5 of the General Permit, as follows: For a corporation, by a responsible corporate officer. For a partnership, by a general partner. For a sole proprietorship, by the proprietor. For a municipal, state or other public facility, by principal executive officer, mayor, or ranking elected official.				
After signing please mail to:	Chief, Environmental Permits Division,			
	MS Department of Environmental Quality, O P.O. Box 2261 Jackson, Mississippi 39225	ffice of Pollution Control		

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Revised: 03/05/14

Lehigh Hanson HEIDELBERGCEMENT Group

JUN 27 2014

Lehigh Hanson 840 West Avenue DeLand, Florida 32724 (386) 734–6228 (386) 740-0556

June 26, 2014

Mississippi DEQ
Ms. LaTrina Williams
Environmental Permits Division
Office of Pollution Control
515 E. Amite Street
Jackson, MS 39201

RE: Hanson Pipe & Precast

Ready-Mix Concrete General Permit Re-Coverage

Dear Ms. Williams:

Attached please find the original signed Ready-Mix Concrete General Permit Recoverage Forms for the following facilities:

- Hanson Pipe & Precast Como (MSG110172 Al:15106)
- Hanson Pipe & Precast Hattiesburg (MSG110270 AI:5598)
- Hanson Pipe & Precast Jackson I-55 South (MSG110271 AI:4999)
- Hanson Pipe & Precast Jackson Northside (MSG110269 Al:3667)
- Hanson Pressure Pipe Hattiesburg (MSG110272 AI:5244)

Should you have any questions or comments please contact me by phone at (407) 408-5917 or by email at Charles P wowarsking Hanson com

Sincerely,

Lehigh Hanson Environment, Safety and Health

Charles J. Riwowarski Area Environmental Manager

Attachments