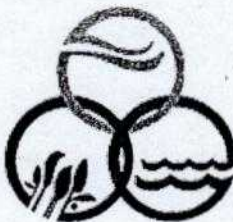


AI # 3119  
GRP20070001



RECEIVED  
AUG 20 2007  
Dept of Environmental Quality  
Office of Pollution Control

**HOT MIX ASPHALT NOTICE OF INTENT (HMANOI)  
FOR COVERAGE UNDER HOT MIX ASPHALT  
MULTIMEDIA GENERAL PERMIT MSR70 0080  
(Number to be assigned by State)**

(file at least 60 days prior to the commencement of regulated activity)  
(30 days for existing facilities)

SUBMITTALS WITH THIS HMANOI MUST INCLUDE: A USGS QUAD MAP (OR A COPY) SHOWING SITE LOCATION AND STORM WATER OUTFALLS AND A LABELED SITE DRAWING. Additional submittals may include contiguous land owner notification (Hot Mix Asphalt General Permit Part II.F.), proof of public notice (Part II.F.), storm water pollution prevention plans for the operation and/or construction of the facility (Part IV.B. and Part V.A.), illicit connections certification (Part IV.B.7.b.8.) and existing storm water monitoring data (Part IV.B.7.a.6.).

Quad Maps can be obtained from the Office of Geology: 601-961-5523

**1. GENERAL INFORMATION**

NAME OF FACILITY: Williams Paving Co. LLC  
FACILITY OWNER: Marshall J. Williams  
FACILITY OWNER ADDRESS: 12506 Lorraine Rd. Biloxi, MS 39532  
FACILITY OPERATOR (if different than owner):  
Todd Crain  
(OPERATOR IS RESPONSIBLE FOR PERMIT COMPLIANCE)

IS THIS NOTICE FOR A FACILITY THAT WILL REQUIRE OTHER PERMITS? no  
If so, circle which one(s): HAZARDOUS WASTE, PRETREATMENT, STATE OPERATING, INDIVIDUAL NPDES, CORPS OF ENGINEERS SECTION 404, others \_\_\_\_\_

FACILITY CONTACT PERSON: Todd Crain  
TELEPHONE NUMBER (INCLUDE AREA CODE): 228-864-9803

**FACILITY MAILING ADDRESS**

NUMBER AND STREET (P. O. BOX): 12506 Lorraine Rd. Biloxi, MS 39532  
CITY: Biloxi STATE: MS ZIP: 39532  
SITE CONTACT: Todd Crain  
SITE TELEPHONE NUMBER: 228-864-9803

**FACILITY LOCATION**

STREET, ROUTE OR OTHER: 14385 Saway Rd. Gulfport, MS 39503  
(If no address nearest named road)

CITY: Gulfport COUNTY: Harrison ZIP: 39503

PRIMARY SIC CODE (4-digit code with description):  
\_\_\_\_ (circle one) Batch Mix or Drum Mix

## 2. AIR EMISSIONS EQUIPMENT

1. Emission Point Ref. No./Name: BAGHOUSE
2. Manufacturers Name and Model No.: AZTEC
3. Date Plant Manufactured: 1978 CH-1
4. Type of Plant: Batch ☐ Drum ☒
5. Production:
  - A. Rated capacity of dryer: \_\_\_\_\_ tons/hour 160
  - B. Normal maximum rate: \_\_\_\_\_ tons/hour 140
  - C. Annual: \_\_\_\_\_ tons 95,000
6. Dryer: Length: 34 feet Diameter: 7 feet
7. Burner:
  - A. Manufacturers name and Model No.: Hauck JB375
  - B. Rated capacity: 82,410,000 Btu/hour
  - C. Primary fuel
    1. Gas ☒ Oil ☐ Other (specify): \_\_\_\_\_
    2. Consumption:
      - a. Gas: 79,300 ft<sup>3</sup>/hour
      - b. Oil: \_\_\_\_\_ gal/hour
      - c. Other (specify units) \_\_\_\_\_
    3. Heat Value
      - a. Gas: 1040 Btu/ft<sup>3</sup>
      - b. Oil: \_\_\_\_\_ Btu/gal
      - c. Other (specify units) \_\_\_\_\_
    4. Sulfur content: \_\_\_\_\_ % S
    5. Ash content: \_\_\_\_\_ % ash
    6. Density of fuel oil (if applicable): \_\_\_\_\_ lb/ft<sup>3</sup>
  - D. Auxiliary fuel
    1. Gas ☐ Oil ☐ Other (specify): \_\_\_\_\_
    2. Consumption:
      - a. Gas: \_\_\_\_\_ ft<sup>3</sup>/hour
      - b. Oil: \_\_\_\_\_ gal/hour
      - c. Other (specify units) \_\_\_\_\_
    3. Heat Value
      - a. Gas: \_\_\_\_\_ Btu/ft<sup>3</sup>
      - b. Oil: \_\_\_\_\_ Btu/gal
      - c. Other (specify units) \_\_\_\_\_
    4. Sulfur content: \_\_\_\_\_ % S
    5. Ash content: \_\_\_\_\_ % ash
    6. Density of fuel oil (if applicable): \_\_\_\_\_ lb/ft<sup>3</sup>

8. Does this emission point have air pollution control equipment? Yes/ No \_\_\_\_\_

If Yes, describe: 297 DOUBLE BAG / BAGHOUSE

9. Miscellaneous:

A. Are the shaker screens hooded and vented to air emission control system: Yes / No

B. Are the hot elevator and bins vented to the air emission control system: Yes / No

C. Are in-plant roads: \_\_\_\_\_ Water-sprinkled  
\_\_\_\_\_ Paved  
\_\_\_\_\_ Other, describe: \_\_\_\_\_

10. Does this facility operate a rock crusher or a RAP crusher? Yes/ No

11. Does this facility operate a lime silo? Yes/ No  
If yes, is it vented to the main baghouse? Yes/ No  
If not, the lime silo must have its own baghouse.

12. Will this facility operate as a synthetic minor source or a true minor source? \_\_\_\_\_

### 3. STORMWATER ASSOCIATED WITH INDUSTRIAL ACTIVITY

ATTACH A (SWPPP) FOR THE OPERATION OF THE FACILITY IF A CURRENT APPROVED PLAN HAS NOT ALREADY BEEN SUBMITTED TO THE MDEQ.

IF USING AN ASSOCIATION OR GENERIC SWPPP ALREADY SUBMITTED, GIVE NAME:

REF # MSR001274

ATTACH A COPY OF ANY EXISTING LABORATORY DATA YOU HAVE FOR EACH STORM WATER OUTFALL. IF MULTIPLE SAMPLING HAS BEEN PERFORMED, PROVIDE A SUMMARY FOR EACH PARAMETER, INCLUDING SAMPLING DATES AND THE MINIMUM, AVERAGE AND MAXIMUM VALUES.

BERNARD BAYOU NEAREST NAMED RECEIVING STREAM

#### **4. STORMWATER ASSOCIATED WITH CONSTRUCTION ACTIVITY**

(To be completed only for activities in which 5 acres or more will be disturbed)

NAME AND LOCATION OF FACILITY: \_\_\_\_\_

TOTAL ACREAGE THAT WILL BE DISTURBED: \_\_\_\_\_

EST. START DATE: \_\_\_\_\_ EST. COMPLETION DATE: \_\_\_\_\_

TYPE SOIL ON SITE: \_\_\_\_\_ TYPE OF PROPOSED FILL: \_\_\_\_\_

PERMIT COVERAGE FOR SEPARATE BORROW AND TOPPING PITS MAY BE NEEDED AND MUST BE APPLIED FOR SEPARATELY.

ATTACH A CONSTRUCTION SWPPP. (SEE PERMIT)

INDICATE ANY LOCAL STORM WATER ORDINANCE WITH WHICH FACILITIES MUST COMPLY:

\_\_\_\_\_  
\_\_\_\_\_

#### **PRIME CONTRACTOR CERTIFICATION**

If the owner/operator chooses to use a prime contractor for construction activities the following section must be completed. If a prime contractor has not been selected at the time of submittal, this section may be submitted at a later date.

PRIME CONTRACTOR CONTACT PERSON: \_\_\_\_\_

PRIME CONTRACTOR COMPANY: \_\_\_\_\_

PRIME CONTRACTOR STREET (P.O. BOX) \_\_\_\_\_

PRIME CONTRACTOR CITY: \_\_\_\_\_

PRIME CONTRACTOR PHONE # (INCLUDE AREA CODE) \_\_\_\_\_

I certify that I am the prime contractor for the construction portion of this project and will comply with all the requirements of Part V of the Hot Mix Asphalt General Permit.

\_\_\_\_\_  
Prime Contractor Signature

\_\_\_\_\_  
DATE SIGNED

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title

5. 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 fine and imprisonment for knowing violations.

Todd Crain  
Signature<sup>1</sup> (Must be signed by  
operator when different than owner)

8/14/07  
DATE SIGNED

TODD CRAIN  
Printed Name<sup>1</sup>

PLANT MANAGER  
Title

<sup>1</sup>This application shall be signed according to the General Permit,  
Part VI.D., 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.
- Duly Authorized Representative.