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Dept of Environmental Quality

MISSISSIPPI DEPARTMENT OF
ENVIRONMENTAL QUALITY

HOT MIX ASPHALT NOTICE OF INTENT (HMANOI)

FOR COVERAGE UNDER MULTIMEDIA HOT MIX ASPHALT GENERAL NPDES PERMIT MSR70 0094

(NUMBER TO BE ASSIGNED BY STATE)

FILE AT LEAST 60 DAYS PRIOR TO THE COMMENCEMENT OF THE REGULATED INDUSTRIAL ACTIVITY

INSTRUCTIONS

Applicant must be owner or operator (legal entity that controls the facility's operation, rather than the plant/site manager or environmental consultant). The owner or operator that receives coverage is responsible for permit compliance.

Submittals with this HMANOI must include:

- **A Storm Water Pollution Prevention Plan (SWPPP) addressing storm water associated with industrial activity, developed in accordance with the requirements of ACT11 of the General Permit**
- **A detailed site drawing showing the property layout and indicating the features outlined in ACT4, S-2 (4) of the General Permit**
- **A United States Geological Survey (USGS) quadrangle map or photocopy, extending at least one-half mile beyond the facility property boundaries with the site location and outfalls outlined or highlighted. The name of the quadrangle map must be shown on all copies. Quadrangle maps can be obtained from the MDEQ, Office of Geology at 601-961-5523**
- **Contiguous landowner notification (ACT4, S-5) and/or proof of public notice (ACT4, S-4)**

Additional submittals that may be required with the HMANOI:

- **A Storm Water Pollution Prevention Plan (SWPPP) addressing storm water associated with construction activity, developed in accordance with the requirements of ACT17 of the General Permit.**
- **If storm water discharges associated with construction activity are proposed, a detailed site drawing showing the property layout and indicating the features outlined in ACT4, S-3 (2) of the General Permit.**
- **Appropriate Section 404 documentation from the U.S. Army Corps of Engineers**
- **Where previous sampling and analyses have been performed, copies of any existing laboratory data 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.**

ALL QUESTIONS MUST BE ANSWERED (Answer "NA" if not applicable)

APPLICANT IS THE: [X] OWNER [X] OPERATOR (Check one or both)

OWNER INFORMATION

OWNER CONTACT NAME & POSITION: Lester Williams, President

OWNER COMPANY NAME: Dickerson & Bowen, Inc.

OWNER STREET OR P.O. BOX: P.O. Box 1008

OWNER CITY: Brookhaven, STATE: MS ZIP: 39602

OWNER PHONE NUMBER (INCLUDE AREA CODE): 601-833-4291

OPERATOR INFORMATION

OPERATOR CONTACT NAME & POSITION: Greg Case

OPERATOR COMPANY: Dickerson & Bown, Inc.

OPERATOR STREET OR P.O. BOX: P.O. Box 1008

OPERATOR CITY: Brookhaven STATE: MS ZIP: 39602

OPERATOR PHONE NUMBER (INCLUDE AREA CODE): 601-833-4291

FACILITY INFORMATION

FACILITY NAME: Dickerson & Bowen Plant #2

PHYSICAL SITE ADDRESS (IF NOT AVAILABLE INDICATE THE NEAREST NAMED ROAD):

STREET: Hwy 98E CITY: McComb

COUNTY: Pike ZIP: 39648

LATITUDE: ____ degrees ____ minutes ____ seconds LONGITUDE: ____ degrees ____ minutes ____ seconds

METHOD USED TO DETERMINE LAT & LONG (GPS of Plant Entrance or Map Interpolation): _____

NATURE OF BUSINESS (INCLUDE 4 – DIGIT STANDARD INDUSTRIAL CLASSIFICATION CODE (SIC)):

Primary SIC Code: 2951 Secondary SIC Code: _____

LIST ANY OTHER PERMITS NEEDED FOR THIS FACILITY: None

RECEIVING STREAM: _____

STORMWATER ASSOCIATED WITH INDUSTRIAL ACTIVITY

LIST ANY MATERIAL HANDLING EQUIPMENT, RAW MATERIALS, INTERMEDIATE PRODUCTS, FINAL PRODUCTS, WASTE MATERIALS, BY-PRODUCTS, OR INDUSTRIAL MACHINERY EXPOSED TO STORM WATER (attach additional pages, if necessary): _____

Asphalt Plant, Tanks, Stock Piles

STORMWATER ASSOCIATED WITH CONSTRUCTION ACTIVITY

(To be completed only for activities in which 1 (one) acre or greater will be disturbed)

PRIME CONTRACTOR NAME: Greg Case

PRIME CONTRACTOR COMPANY: Dickerson & Bowen, Inc.

PRIME CONTRACTOR STREET OR P.O. BOX: P.O. Box 1008

PRIME CONTRACTOR CITY: Brookhaven STATE: MS ZIP: 39602

PRIME CONTRACTOR PHONE NUMBER (INCLUDE AREA CODE): 601-833-4291

TOTAL ACREAGE THAT WILL BE DISTURBED: 5 Acres

ESTIMATED START DATE: 3-1-2011 ESTIMATED COMPLETION DATE: 4-30-2011

INDICATE ANY LOCAL ORDINANCE REQUIREMENTS: N/A

AIR EMISSIONS

EMISSION POINT REF. NO./NAME: #1 Stack TYPE OF PLANT: ☐ BATCH ☒ DRUM

MANUFACTURERS NAME AND MODEL NO.: ASTEC 84-010 DATE PLANT MANUFACTURED: 1984

PRODUCTION: Rated capacity of dryer 350 tons/hour Normal max. rate 175 tons/hour Annual 200,000 /yr

DRYER: Length 45 feet Diameter: 8 feet

BURNER: Manufacturers Name and Model No.: Havck JB0-4500A Rated Capacity: 110,000 Btu/hour

PRIMARY FUEL: ☒ Gas ☐ Oil ☐ Other (specify): _____

CONSUMPTION: Gas 800 ft^3/hour Oil _____ gal/hour Other (specify units) _____

HEAT VALUE: Gas 91044 Btu/ ft^3 Oil _____ Btu/gal Other (specify units) _____

SULFUR CONTENT: 0 % ASH CONTENT: 0 % DENSITY OF FUEL OIL (if applicable): _____ lb/ft^3

AUXILIARY FUEL: ☐ Gas ☐ Oil ☐ Other (specify): _____

CONSUMPTION: Gas _____ ft^3/hour Oil _____ gal/hour Other (specify units) _____

HEAT VALUE: Gas _____ Btu/ ft^3 Oil _____ Btu/gal Other (specify units) _____

SULFUR CONTENT: _____ % ASH CONTENT: _____ % DENSITY OF FUEL OIL (if applicable): _____ lb/ft^3

DOES THIS EMISSION POINT HAVE AIR POLLUTION CONTROL EQUIPMENT? ☒ YES ☐ NO

IF YES, DESCRIBE: Bag House

ARE THE SHAKER SCREENS HOODED AND VENTED TO AIR EMISSION CONTROL SYSTEM: ☐ YES ☐ NO

ARE THE HOT ELEVATOR AND BINS VENTED TO THE AIR EMISSION CONTROL SYSTEM: ☐ YES ☐ NO

IN-PLANT ROADS WILL BE: ☒ Water-Sprinkled ☒ Paved ☐ Other, describe: _____

NOTE: If this NOI includes the construction of new air emissions sources, the approval to construct will expire if construction does not begin within eighteen (18) months from the date of coverage issuance or if construction begins and is suspended for eighteen (18) months or more.

CERTIFICATION

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.

Les Williams
Authorized Signature[1]

3/4/2011
Date Signed

LESTER WILLIAMS
Printed Name[1]

PRESIDENT
Title

[1]This application shall be signed according to ACT23, 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, the mayor, or ranking elected official.

Please submit the HMANOI form to: Chief, Environmental Permits Division
MS Department of Environmental Quality, Office of Pollution Control
P.O. Box 2261
Jackson, Mississippi 39225

MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY

HOT MIX ASPHALT GENERAL PERMIT
COVERAGE NUMBER (MSR70 _ _ _ _)

NOTIFICATION OF CONSTRUCTION / MODIFICATION OF AIR EMISSIONS SOURCES

INSTRUCTIONS

In accordance with ACT6 (New Source Performance Standards) of the Hot Mix Asphalt General Permit, notifications shall be submitted to MDEQ regarding the start and end dates of the construction of new air emissions sources or the modification of existing air emissions sources.

Part A of this form shall be used to notify MDEQ of the start of construction or modification, which is due within 15 days of the start of construction or modification.

Part B of this form shall be used to notify MDEQ of the end of construction or modification, which is due within 30 days of the end of construction or modification.

For short duration projects, the coverage recipient may complete both Parts A and B on a single submittal, so long as the 15-day construction start notification and the 30-day end of construction notification deadlines can be met.

COVERAGE RECIPIENT INFORMATION

COMPANY NAME: Dickerson & Bowen, Inc. **FACILITY NAME:** Asphalt Plant #2

FACILITY LOCATION (street address or nearest named road): Hwy 98E

FACILITY CITY: McComb **COUNTY:** Pike

CONTACT PERSON: Greg Case **CONTACT PHONE NUMBER:** 601-833-4291

PART A – Construction Start

Construction / Modification of the air emissions source(s) at the covered facility began on 3-1, 20 11.

PART B – Construction Complete

Construction / Modification of the air emissions source(s) at the covered facility was completed on 4-30, 20 11.

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.

Authorized Signature[1] **Date** 3/4/2011

Printed Name LESTER WILLIAMS **Title** PRESIDENT

Submit this form to:

Chief, Environmental Permits Division
MDEQ, Office of Pollution Control
P.O. Box 2261
Jackson, Mississippi 39225

Revised: 10/15/09

[1] This form shall be submitted with an original signature by an authorized individual in accordance with ACT 23, T-5 or T-6 of the General Permit.