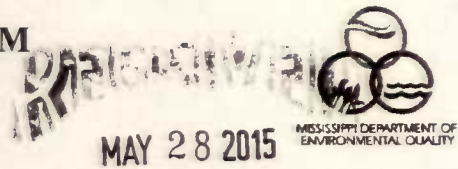


AI #972
GNP 20150002

MAJOR MODIFICATION FORM
FOR HOT MIX ASPHALT
GENERAL PERMIT MSR70



INSTRUCTIONS

Coverage recipients shall notify the Mississippi Department of Environmental Quality of plans to expand the acreage or "footprint" of an existing hot mix asphalt facility, waive the siting criteria of an existing operation, or construct a new air emissions source. This form must be submitted when any of the following activities is/are being proposed (check all that apply). Copies of the signed Return-Receipts and Contiguous Landowner Notification Forms shall accompany this Major Modification Form in accordance with ACT4, S-7 of the General Permit.

- "Footprint" identified in the original HMANOI is proposed to be enlarged (a modified SWPPP and an updated USGS topographic map must be submitted).
- Applicant requests waiver of facility siting criteria prescribed in ACT5 of the General Permit.
- Applicant intends to construct new air emissions source(s)

This form must be signed by the current coverage recipient under Mississippi's Hot Mix Asphalt General Permit. A different operator must have general permit coverage transferred prior to coverage being modified. Coverage recipients are authorized to implement the proposed modifications, under the conditions of the General Permit, only upon receipt of written notification of approval by the MDEQ.

ALL INFORMATION MUST BE COMPLETED (indicate "N/A" where not applicable)

COVERAGE RECIPIENT INFORMATION

COVERAGE RECIPIENT CONTACT PERSON: Hamp Sterling
 COMPANY NAME: Superior Asphalt
 STREET OR P.O. BOX: 6000 I 55 South
 CITY: Byram STATE: Ms. ZIP: 39272
 PHONE # (INCLUDE AREA CODE): (601) 260-2425

PROJECT INFORMATION

HOT MIX ASPHALT GENERAL PERMIT COVERAGE NUMBER: MSR70 0 0 3 9
 ADDITIONAL ACREAGE TO BE DISTURBED: N/A TOTAL ACREAGE: _____
 DESCRIBE PROPOSED SITING CRITERIA WAIVER: N/A
 LIST NEW AIR EMISSIONS SOURCES: Fly Ash Silo Equipped with Baghouse
 FACILITY NAME: Hinds County Plant # 1 (Byram)
 CITY: Byram COUNTY: Hinds

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.

Hamp Sterling
Signature (must be signed by coverage recipient)

5/8/15
Date

Hamp Sterling
Printed Name

Env. Mgr.
Title

Please submit this form to:

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