ALL #1833





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 0 3 4

INSTRUCTIONS

The submittal of this form is required to receive coverage under the Ready-Mix Concrete Multimedia General Permit. This form must be completed and returned to the address printed at the bottom of page 2 within 90 days of the date of the Letter of Instruction for Re-Coverage.

Amendments to the Storm Water Pollution Prevention Plan (SWPPP) are required to be attached if the plan is not current or is ineffective in controlling storm water pollutants.

The applicant must be the 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.

If the facility is out of business or no longer active, please request termination of coverage by completing the Request for Termination (RFT) Form found in the Ready-Mix Concrete Forms Package. Facilities that continue to discharge wastewater and/or operate air emission equipment without applicable permit coverage are in violation of state law.

This recoverage form is not required to be submitted if the facility is submitting a request for termination of coverage.

ALL INFORMATION REQUESTS MUST BE ANSWERED (Answer "NA" if not applicable).

Certificate of Coverage should be mailed to: Discharge Monitoring Reports should be mailed to:	✓ owner/operator ✓ owner/operator	facility facility	(please check one)
OWNER OPERATOR I CONTACT NAME & POSITION: William F Waters Jr. P.E. Comp	NFORMATION (CH		ТН)
COMPANY NAME: Booneville Division of B&B Concrete Co., Inc.			
STREET OR P.O. BOX: P.O. Box 407			_
CITY: Tupelo STATE: M	STATE: Mississippi		407
PHONE NUMBER (INCLUDE AREA CODE): 662-842-6312			

FACILITY/SITE INFORMATION

FACILITY NAME: Booneville Division of B&B Concrete Co., Inc.			
CONTACT NAME & POSITION: Randy Gann, Plant Manager			
CONTACT PHONE NUMBER (INCLUDE AREA CODE): 662-728-4431			
PRIMARY STANDARD INDUSTRIAL CLASSIFICATION (SIC) CODE & DI	ESCRIPTION OF INDUSTRIAL ACTIVITY:		
	ESCAL TO. VOI TAPEDIALISTICATION		
(3 2 7 3) Ready-Mix Concrete Plant			
BATCHING TYPE: WET ✓ DRY CENTRAL M	IX		
PLANT PRODUCTION RATE: 100 cubic yards/hr			
PHYSICAL SITE ADDRESS (IF NOT AVAILABLE INDICATE NEAREST N	AMED ROAD):		
STREET: 100 Hare Road			
CITY: Booneville COUNTY: Prentiss	ZIP: 38829		
PROVIDE THE LATITUDE AND LONGITUDE OF EACH WASTEWATER plant entrance. Attach additional pages, if necessary.)	OUTFALL (If no discharge, provide the coordinates of the		
LATITUDE: 34 degrees 40 minutes 1.3 seconds LONG	ITUDE: 88 degrees 32 minutes 16.3 seconds		
LATITUDE: 34 degrees 40 minutes 1.3 seconds LONG	ITUDE: 88 degrees 32 minutes 16.3 seconds		
NEAREST NAMED WATERBODY STORM WATER LEAVING THE SITE V			
NEARLST NAMED WATERDOOF STORM WATER ELAVING THE SITE	WIND DIVIDIR.		
STORM WATER POLLUTION PREV	TENTION PLAN (SWPPP)		
A A CORP OF THE OWNER AT THE REPAIRTER SITES	✓ YES NO		
1. IS A COPY OF THE SWPPP AT THE PERMITTED SITE?			
2. IF BASED ON INDUSTRY GENERIC SWPPP, IS IT THE MOST RECEI	NT COPY? YES NO		
3. DOES THE SWPPP MEET THE REQUIRMENTS LISTED IN ACTS 13 OF THE GENERAL PERMIT? IF NO, PLEASE ATTACH THE AMEN			
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. David E. Brevard Vice President, Concrete Industries, Inc.			
Printed Name ¹	Title		
This application for re-coverage shall be signed according to ACT25, T-5 of the General 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, o			
After signing please mail to: Chief, Environmental Permits Division, MS Department of Environmental Qual			

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P.O. Box 2261 Jackson, Mississippi 39225