AT#2348 Gnpa0150004

MAJOR MODIFICATION FORM FOR HOT MIX ASPHALT **GENERAL PERMIT MSR70**



INSTRUCTIONS

existing hot mix asphalt facility, waive the siting criteria of an existing submitted when any of the following activities is/are being propose	ronmental Quality of plans to expand the acreage or "footprint" of an goperation, or construct a new air emissions source. This form must be ed (check all that apply). Copies of the signed Return-Receipts and ajor Modification Form in accordance with ACT4, S-7 of the General		
 □ "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 CONTACT PERSON: Frank Ford	IENT INFORMATION
		COMPANY NAME: Huey P. Stockstill LLC	
		STREET OR P.O. BOX: P.O.Box 758	
		CITY. Picayune	STATE: Mississippi ZIP: 39466
PHONE # (INCLUDE AREA CODE): 601-798-2981	STATE.		
PROJECT IN	NFORMATION		
HOT MIX ASPHALT GENERAL PERMIT COVERAGE NUMBER:	MSR70 0073		
ADDITIONAL ACREAGE TO BE DISTURBED: 0	TOTAL ACREAGE:		
DESCRIBE PROPOSED SITING CRITERIA WAIVER: N/A			
LIST NEW AIR EMISSIONS SOURCES Rock, Concrete, a			
FACILITY NAME: Huey P. Stockstill, LLC. Picayune	Plant		
CITY: Picayune	COUNTY: Pearl River		
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. 8-18-15 Signature (must be signed by coverage recipient)			
Frank Ford	Safety Director,		
Printed Name	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

Revised: 10 09 09