



CHANGE REQUEST FORM



READY-MIX CONCRETE GENERAL PERMIT COVERAGE NUMBER MSG11 0 3 3 9

 Part A – Any planned changes in facility operations the Part B – Any planned changes of ownership. Part C – Any changes in information previously submodules and the Part of the Form, marking "N/A" if the section doe 	hat may affect air emissi nitted in the NOI or Reco	ons and	d/or wa			
	Facility Name: MMC M			Rags	dale l	Road
Facility Street Address: 133 New Ragsdale Road city: Madison			County	Mad	lison	
Contact Person: Kyle Beckman Phone No.: 60	1-898-4000	Email:	kbeckr	man@mn	ncmateri	als.com
Mailing Address: P.O. Box 2569 City: M	ladison	State:	MS	Zip:	3913	30
PART A – CHANGE TO FACILITY OPERATIONS 区 YES	□ N/A					
1. Is the change a Major Modification (defined in ACT 7, Condition T-	-9)?			YES	X	NO
 If yes to 1, have you completed the public notice requirements (See Public Notice Instructions for more information.) 	s in ACT 2, Condition S-3?		YES		NO	⊠ N/A
b. If yes to 1, have you notified the contiguous landowners per A	CT 2, Condition S-2?		YES		NO	ĭ N/A
2. Will the change result in additional outfalls?				YES	×	NO
a. If yes to 2, have you notified the contiguous landowners per ACT 2, Condition S-2?					ĭ N/A	
3. Does the change impact the design of the wastewater treatment facility? ▼ YES □ NO					NO	
a. If yes to 3, have you attached revised plans and specifications per ACT 2, Condition S-4? ☑ YES ☐ NO ☐ N/A						
For all changes to facility operations, update the most recent version o Form. Changes should also be outlined in a cover letter accompanying		orm, as	neede	ed, and a	ittach it	to this
PART B – CHANGE OF OWNERSHIP ☐ YES ☑ N/A						
Is the Request for Transfer Form complete and attached?	ES 🗆 NO					
PART C - CHANGE OF INFORMATION PREVIOUSLY SUBM	IITTED X YES	N/A				
Is the revised NOI or Recoverage Form attached reflecting any change	es? ⊠ YES □	NO				
(The most recent NOI or Recoverage Form should be revised and comchanges to the facility. Changes should also be outlined in a cover letter			ates m	ade as r	needed	to reflect
Based on my inquiry of the person or persons responsible for gat best of my knowledge and belief, true, accurate and complete.	thering the information, t	he info	rmatio	n subm	itted is	, to the
123	3/24	12	2			
Authorized Signature of Responsible Official*	Date	,				
Judd Beech	President MM	C and	d Bay	ou_	_	
Printed Name	Title					
*A responsible official must be a corporate officer or facility manage	r delegated authorization i	to sign c	locume	nts.		

Submit signed form online at www.mdeq.ms.gov/rmcgp or via hard copy to Water II Branch Manager, Environmental Permits Division, MDEQ, PO Box 2261, Jackson, MS 39225





Page 1 of 1 Last Revised: 12/10/2020



READY-MIX CONCRETE NOTICE OF INTENT

COVERAGE NO.: MSG11 0 3 3 9
(Coverage number will be completed by MDEQ staff.)



MISSASSIPI DEPARTMENT OF ENANGMENTAL GUALITY (Coverage number will be completed by	MDEQ staff.) MISSISSIPPI DEPARTMENT OF EMPRONMENTAL QUALITY				
Company Name: MMC Materials, Inc. Facility Name: MMC Materials Inc, Ragsdale Road					
Contact Name and Position: Kyle Beckman - Safety & Environmental Manager					
Contact Area Code and Phone Number: $(\frac{601}{})\frac{898}{} - \frac{4000}{}$	ontact Email: kbeckman@mmcmaterials.com				
Primary SIC Code: (3273) Primary NAICS Code (6-digit)	: (<u>327320</u>)				
Physical Site Address - Street: 133 New Ragsdale Road					
City: Madison State: MS zip: 39110	County: Madison				
Mailing Address - Street: P.O. Box 2569					
City: Madison State: MS Zip: 39130)				
Plant Maximum Production Rate: 120 cubic yards/hr Maximum production rate must be based on the manufacturer's maxim	um rated plant capacity on an hourly basis.				
Will you own or operate a rock crusher at the site? Yes on No."	0				
Rock Crusher Type / Rated Cumulative Capacity: Fixed:	_tons/hr Portable:tons/hr ✓ N/A				
Will you operate stationary fuel burning equipment (e.g., engines, heaters, etc.) at the site? Yes* No *If you marked "Yes" complete and submit the attached Fuel Burning Equipment Form & Compliance Plan.					
Will wastewater from the process be discharged directly from the	o o				
Describe any wastewater treatment or indicate "None": Concrete Settling Pits Plans and specifications for treatment must be attached.					
Proposed discharge frequency: Rain Dependant Propo	osed discharge volume: Varies gal/day				
Provide the Latitude and Longitude of each wastewater outfall: If no discharge, provide the coordinates of the plant entrance. Attach ad					
Latitude: 32 deg 33 min 2.78 sec Longitude: 90	deg $\frac{04}{}$ min $\frac{49.00}{}$ sec				
Nearest named receiving stream: Bear Creek					
Is a SWPPP attached that meets the requirements of ACT5 of the F					
Is the SWPPP based on an Industry Generic SWPPP? Yes*	No (*Must be most recent version.)				
I certify under penalty of law that this document and all attachments were prepara system designed to assure that qualified personnel properly gathered and evaluate the person or persons who manage the system, or those persons directly restrained is, to the best of my knowledge and belief, true, accurate and composibiliting false information, including the possibility of fines and imprisonment continues as described in the original notice of intent. Also, I certify that I understand that discharging pollutants associated with industrial activity violation of state law.	uated the information submitted. Based on my inquiry of sponsible for gathering the information, the information lete. I am aware that there are significant penalties for knowing violations. I further certify that the project derstand when coverage is terminated I am no longerater associated with industrial activity under this general				
Authorized Signature (shalf be signed according to ACT6, T-9 of the GP)	Date Signed				
Judd Beech	President MMC and Bayou Concrete				

Submit signed form online at www.mdeq.ms.gov/rmcgp or a hard copy to Water II Branch Manager, EPD, MDEQ, PO Box 2261, Jackson, MS 39225



FUEL BURNING EQUIPMENT FORM & COMPLIANCE PLAN CURRENT COVERAGE NO.: MSG11 $\begin{smallmatrix} 0 & 3 & 3 & 9 \end{smallmatrix}$

(Coverage number is located at the bottom left corner of your previous Certificate of Coverage)

FUEL BURNING EQUIPMENT LIST

List all stationary fuel burning equipment used at the facility. **Do not include** mobile fuel burning equipment (e.g., trucks or forklifts, welding equipment), portable engines that are moved about the site (e.g., pressure washers, welders), or portable engines that will not remain on the site more than 12 months (e.g., temporary generators).

Equipment Description	Emergency Use Only? (Yes/No) ¹	Fuel Type	Max. Heat Input/ Power Output	Manufacturer	Manufactured Date or Model Year
Example only:					
Engine for Generac generator	No	Diesel	578 hp	Perkins	2009
Heater for brick drying	No	Natural gas	6 MMBtu/hr	Sigma Thermal	2010
N/A					
				~	
¹ Engines qualifying as "emergence"	y" must meet the re	quirements of C	ondition L-6 in ACT 3	of the General Permit	

COMPLIANCE PLAN

As required by ACT 3, Condition L-7(3) of the General Permit, complete this section if you will have one or more <u>non-emergency</u> stationary internal combustion engines at your site.

Equipment Description	Applicable federal standard ¹		Emission Standards ²	Monitoring Requirements ²
(should match description from table above)			(List any testing, continuous monitoring and recordkeeping required)	
Example: Engine for Generac generator		⊠	CO ≤ 49 ppmvd @15 % O ₂	Conduct CO performance test every 8,760 hrs or 3 yrs whichever comes first; maintain oxidation catalyst so pressure does not change by more than 2" water and catalyst inlet temp. is between 450 – 1,350 °F
N/A				

¹ Only mark one. If subject to 40 CFR 60, Subpart IIII, then you have no requirements under 40 CFR 63, Subpart ZZZZ per 40 CFR 63.6590(c)(1).

²EPA has developed a summary table of requirements for these rules at https://www.epa.gov/stationary-engines/guidance-and-tools-implementing-stationary-engine-requirements. For purposes of evaluating these requirements, your engine is considered a Non-Emergency Compression Ignition (CI) Internal Combustion Engine (ICE) located at an Area Source.



March 4, 2022

Mrs. Florance Bass Environmental Permitting Division MDEQ Office of Pollution Control P. O. Box 2261 Jackson, Mississippi 39225 RECEIVED

MAR 28 2022

Dept. of Environmental Quality

Re: MSG110339 Ready Mix Concrete General Permit Coverage MMC Materials Inc, Ragsdale Road (AI ID 73666)

Madison, Madison County, Mississippi

Dear Florance:

MMC Materials is proposing changes to its Ragsdale Road Ready Mix Concrete Plant Site. Changes include removing the two (2) existing portable ready mix concrete plants, constructing one (1) permanent ready mix concrete plant (120cy/hr), and constructing a concrete settling pit. No additional process water outfalls will be added. The existing process water outfall will be moved from the detention pond to the discharge from the settling pit's sump. Please find enclosed the Change Request Form, Notice of Intent, and Updated SWPPP with Washout Pit Design Plans (Figure 3) for your review.

Should you have any questions regarding the attached material, please contact Charles Cook with FC&E Engineering, LLC at (601) 824-1860 or myself at (601) 898-4000.

Sincerely,

Kyle Beckman – Safety & Environmental Manager

MMC Materials, Inc.

Attachments

cc: Charles Cook, P.E., FC&E Engineering

MMC Materials, Inc.
P.O. Box 2569 • Madison, MS 39130
601-898-4000 • Fax 601-898-4030
www.mmcmaterials.com