AI #58655
GMP20120002

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Dept. of Environmental Quality

MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY

READY-MIX CONCRETE NOTICE OF INTENT (RMCNOI)

FOR COVERAGE UNDER MULTIMEDIA READY-MIX CONCRETE GENERAL NPDES PERMIT MSG11 0302

(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 RMCNOI must include:

- **A Storm Water Pollution Prevention Plan (SWPPP) addressing storm water associated with industrial activity, developed in accordance with the requirements of ACT13 of the General Permit**
- **A detailed site drawing showing the property layout and indicating the features outlined in ACT4, S-2 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**
- **Plans and specifications for any wastewater treatment facilities necessary to achieve compliance with the requirements of this permit**

Additional submittals that may be required with the RMCNOI:

- **A Storm Water Pollution Prevention Plan (SWPPP) addressing storm water associated with construction activity, developed in accordance with the requirements of ACT19 of the General Permit.**
- **Appropriate Section 404 documentation**
- **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 of the General Permit.**
- **Where previous sampling and analyses have been performed, copies of any existing laboratory data for each process wastewater outfall and each stormwater 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)

OWNER INFORMATION

IS APPLICANT THE ☐ OWNER ☑ OPERATOR (Check one or both)

OWNER CONTACT NAME & POSITION: Andy Atkins

OWNER COMPANY NAME: Jane R. Atkins, et al (Individual)

OWNER STREET OR P.O. BOX: 434 Greenbriar Drive

OWNER CITY: Columbus STATE: MS ZIP: 39705

OWNER PHONE NUMBER (INCLUDE AREA CODE): 601-946-1732 (Contact) 662-328-1297 (Owner)

OPERATOR INFORMATION

OPERATOR CONTACT NAME & POSITION: John Powers, President

OPERATOR COMPANY: R.C. Construction Co., Inc.

OPERATOR STREET OR P.O. BOX: PO Box 1998

OPERATOR CITY: Greenwood **STATE:** MS **ZIP:** 38935

OPERATOR PHONE NUMBER (INCLUDE AREA CODE): 662-453-2424

FACILITY INFORMATION

FACILITY NAME: CAFB - Temporary Laydown Yard and Concrete Batch Plant

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

STREET: U.S. Highway 45 North **CITY:** Columbus

COUNTY: Lowndes **ZIP:** 39705

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

Primary SIC Code: 3723 Ready-Mixed Concrete **Secondary SIC Code:**

LIST ANY OTHER PERMITS NEEDED FOR THIS FACILITY: LCNOI acquired by Eutaw Construction Company, Inc.

PLANT PRODUCTION RATE: 250 **cubic yards/hr**

RECEIVING STREAM: Buttahatchie River

STORMWATER ASSOCIATED WITH INDUSTRIAL ACTIVITY

INDICATE ANY ASSOCIATION OR GENERIC SWPPP: N/A

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): Please see attachment 1 for information, as well as Industrial Activity SWPPP.

STORMWATER ASSOCIATED WITH CONSTRUCTION ACTIVITY

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

PRIME CONTRACTOR NAME: Lane Williams

PRIME CONTRACTOR COMPANY: Eutaw Construction Company, Inc.

PRIME CONTRACTOR STREET OR P.O. BOX: 410 Old Richton Road

PRIME CONTRACTOR CITY: Petal **STATE:** MS **ZIP:** 39645

PRIME CONTRACTOR PHONE NUMBER (INCLUDE AREA CODE): 601-544-0168 Office 662-436-2211 Cell

TOTAL ACREAGE THAT WILL BE DISTURBED: 93.5

ESTIMATED START DATE: November 2012 **ESTIMATED COMPLETION DATE:** September 2013

INDICATE ANY LOCAL ORDINANCE REQUIREMENTS: N/A

PROCESS WASTEWATER DISCHARGES

DESCRIBE THE TYPE OF WASTEWATER TREATMENT: Washout water will be discharged into a sediment basin with a weir, to allow solids to settle out before the clear water leaves the basin, and to allow for evaporation.

PROVIDE THE LATITUDE AND LONGITUDE OF EACH WASTEWATER OUTFALL (attach additional pages, if necessary):
LATITUDE: 33 **degrees** 38 **minutes** 33 **seconds** **LONGITUDE:** 88 **degrees** 25 **minutes** 30 **seconds**

PROVIDE THE PROPOSED FREQUENCY OF DISCHARGE PER OUTFALL: Daily (On concrete placing days)

PROVIDE THE PROPOSED VOLUME OF WASTEWATER DISCHARGED PER OUTFALL (gal/day): 1000

PROVIDE A MATERIAL SAFETY DATA SHEET ON ALL CHEMICALS USED WHICH POTENTIALLY COULD BE FOUND IN THE WASTEWATER: Hunt Process Air Entraining & Water Reducing Agent, Portland Cement, and Fly Ash MSDS attached.

AIR EMISSIONS

TYPE OF BATCHING: ☐ WET ☐ DRY ☑ CENTRAL MIX

WILL WATER SPRAYS BE USED AT THE FOLLOWING LOCATIONS? **STOCKPILES:** ☑ YES ☐ NO

AGGREGATE BINS: ☐ YES ☑ NO **CONVEYOR TRANSFER POINTS:** ☐ YES ☑ NO

CEMENT SILO INFORMATION: **NUMBER OF CEMENT SILOS:** 2
LOADING METHOD OF SILO: Pneumatic
VOLUME OF EACH SILO: 44.4 **cubic yards**

FACILITY ROADS WILL BE: ☐ PAVED ☑ WATER SPRINKLED ☐ OTHER (SPECIFY) _____

CUBIC YARDS OF RAW MATERIALS INPUT INTO PLANT:
SAND 29,845.00 **ROCK** 55,225.00 **CEMENT** 10,355.00

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.

_____ 11/5/2012
Authorized Signature[1] **Date Signed**

John H. Powers President
Printed Name[1] **Title**

[1]**This application shall be signed according to ACT25, 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 RMCNOI form to: **Chief, Environmental Permits Division**
MS Department of Environmental Quality, Office of Pollution Control
P.O. Box 2261
Jackson, Mississippi 39225