

C39GY

Recertification Notice of Intent (NOI)
NPDES General Permit for Aggregate Facilities ARG500000

You must complete and certify this Recertification Notice of Intent (NOI) form and return it to the Department, with an updated disclosure statement, in order to continue permit coverage under the General Permit ARG500000. You must submit this form no later than January 31, 2016. Please keep a copy of this form for your records once completed and signed.

Permit Tracking Number: ARG500008 AFIN: 03-00214
Permittee Name: North Central Arkansas Quarry, Inc.

If any changes need to be made to the information shown below, please update the new information in the corrections section below and/or attach documentation.

	Current Information in ADEQ's Database	Corrections, If Needed
Facility Physical Address:	North Central Arkansas Quarry, Inc. 311 Baxter County Road 603 Mountain Home, AR 72653	
Facility Mailing Address:	P.O. Box 1570 Mountain Home, AR 72654	
Responsible Official:		
Responsible Official Email:		
Cognizant Official:	Mike Dilbeck	
Cognizant Official Email:	mtnhomeconcrete@yahoo.com	
Contact Person:	Mike Dilbeck	
Phone Number:	870-424-3839	

1. Have you attached an updated disclosure statement? Yes or No
2. Is the invoice address the same as the mailing address above? Yes or No

If "No" please provide invoice address

RECEIVED
JAN 27 2016
31550 TW

Outfall Currently Listed in ADEQ's Database*

Outfall Number	Latitude			Longitude		
	°	'	"	°	'	"
001	36°	17'	7.5"	-92°	26'	8"
002	36°	16'	56.4"	-92°	26'	7.5"

* If a change to the above outfall is needed, please be sure to provide the outfall number, coordinates, and an explanation of the required changes.

Additional Comments: _____

"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 gather and evaluate 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."

I certify that I have read and will comply with all the requirements of the NPDES General Permit ARG500000 for Aggregate Facilities.

Responsible Official Name: Mike Dilbeck Responsible Official Title: Owner
Responsible Official Signature: *Mike Dilbeck* Date: 1/20/16

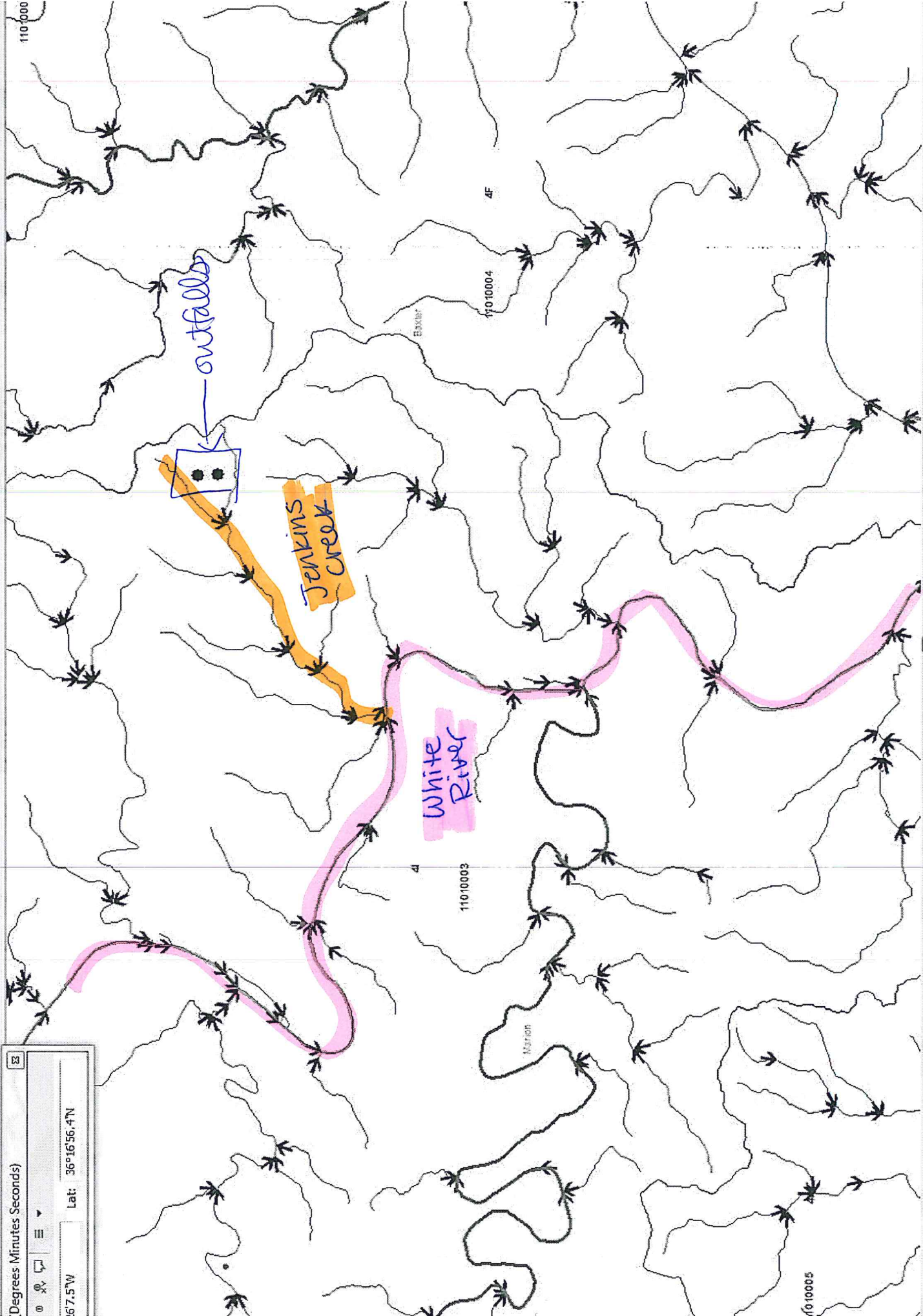
Return the NOI form to the address below or send it electronically to: water.permit.application@adeq.state.ar.us
Water Division, General Permits Section
Arkansas Department of Environmental Quality
5301 Northshore Drive
North Little Rock, AR 72118-5317

Degrees Minutes Seconds



167.57W

Lat: 36°16'56.4"N



538124.76 4017461.8 Meters



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For service of process contact the [Secretary of State's office](#).

Corporation Name	NORTH CENTRAL ARKANSAS QUARRY, INC.
Fictitious Names	
Filing #	800054509
Filing Type	For Profit Corporation
Filed under Act	Dom Bus Corp; 958 of 1987
Status	Good Standing
Principal Address	
Reg. Agent	DAVID L. ETHREDGE
Agent Address	119 EAST 6TH STREET MOUNTAIN HOME, AR 72653
Date Filed	03/16/2005
Officers	DAVID L. ETHREDGE, Incorporator/Organizer VICKIE RENEE DILBECK, Tax Preparer MICHAEL DILBECK, President VICTORIA CRYSTAL DAVIS, Secretary WILLIAM CASEY DILBECK, Vice-President VICKIE DILBECK, Treasurer VICKIE RENEE DILBECK, Controller
Foreign Name	N/A
Foreign Address	
State of Origin	N/A

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