May 9, 2013

Mrs. Loretta Reiber ADEQ – Water Division - NPDES Branch 5301 Northshore Drive North Little Rock, AR 72118-5317

RE: Hunt - Rogers Materials LLC. - Springdale Quarry

General Permit ARG500000

AFIN 72-00773

Dear Mrs. Reiber:

Please find enclosed an application for the issuance of a General NPDES permit for this facility. Rogers wishes to seek coverage under the General permit and has enclosed the NOI, USGS map, and the Disclosure Statement. The check will be submitted along with the original application by US Mail to accompany the electronic copy submitted today.

If you have any questions or need any additional information please do not hesitate to contact myself at (615) 780-5781.

Sincerely,

Van Medlock

Director of Environmental Services

cc: Dwayne Gabbard, Springdale Superintendent

Enclosures

ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY

NOTICE OF INTENT

AGGREGATE FACILITIES NPDES GENERAL PERMIT ARG500000

Applicat	tion Type:	New 🗵		Renewal [(I	Permit # ARG	50)
I. PERMITTEE/								
Permittee (Leg Permittee Mailin Perm	gal Name): _gg Address: _ nittee City: _ ittee State: _ e Number: _ k Number: _	Hunt-Rogers 3 421 Great Cir Nashville TN 615.780.5781 615.564.57	Materials	Zip: <u>37228</u>	☐ State ☐ Federa ☐ Sole P *State of I The legal identical to	nd roprietorshi Incorporation name of to the name l	Co ip/Private on: the Permit	rtnership rporation* ttee must be the Arkansas
Invoice Contact P	erson Var	Medlock			City	: Nashvill	le	
Invoice Mailing Con			_ 1 OWG	ell Quarry	•	TN		p: 37228
Invoice Mailing Ad						615.780		p. <u>37220</u>
III. FACILITY IN	FORMATIC	ON	-					-
Facility Name: S	pringdale Ou	arrv		Facility Con	ntact Person:	Dwayne G	abbard	
					_			
Facility Address: 21202 N Parsons Road Telephone Number: 479.750.4656 Driving Directions to Take I-540 to Hwy 412 head east to site Facility:								
Facility County: W	Vashington			Facility City.	State & Zip:	Springdale	. AR. 727	64
Facility Latitude: 3								
Accuracy: 2				_	_			
Accuracy: 2 Method: USGS Datum: NAD83 Scale: 1:24,000 Description: Facility SIC Code: 1422 Facility NAICS: 212312								
IV. DISCHARGE I	001				w: <10.0 M	GD (Million	nGallons p	per Day)
Effluent Description:								
Stream Segment:	A(D 11	14' 07'0		_ Hydrolo	gic Basin Code		5.0	
Outfall Latitude:				_	-			
Accuracy: 2					Scale: 1:24,	ood Desc	ripuon: _	
Receiving Stream:								
Treatment System*:								
Outfall Number:					w: Mo	יסנווווא) מפ	i Gallons j	per Day)
Effluent Description				11l=-1:- D	Innin Code			
Stream Segment:				Hydrologic B			Min	Sec
Outfall Latitude:	Deg	Min	Hec	-	itude:	DeR	IAIIII	Sec
:	5301 NORT	HSHOPE		ER DIVI sion O rth Li ttle R	OCK, ARKAI	NSAS 7211	8	国配信川

DEBETTER MAY 11:8 2013 By 24279 FF

PHO: 511-682-0623 / FAX 501-682-0880

			Datum:		
Treat	nent System*:				
	addition of any chemicals, if a	pplicable.			
V.	FACILITY PERMIT I	NFORMATIO	N		
	NPI	DES Individual	Permit Number (If Applicab	le):	AR00
	N		Permit Number (If Applicab	_	ARG
) ID	DEG C1 G1		te Construction Permit Numb	_	ARG50
NP			Permit Number (If Applicab	_	ARR15 ARR00C371
	NPDES	maustrai Storn	Mining Permit Numb		4RR00C371
			_	-	Air and fuel tank Permits issued to facility.
VI.	OTHER INFORMA	ΓΙΟΝ:			
Ge	ological Description of	Sita: Limasto	20		
	itional Location Description				
			ion for additional general pe	rmit (A	ARG50000) currently being processed,
	Consultant Contact Na	ame:			
	Consultant Email Adda				
	Consultant Phone Num				
	Consultant Phone Num	iber.	Consulta	ntrax	Number:
VII.	CERTIFICATION O	F OPERATOI	R		
				oftha	State of Arkansas, I certify that the cognizant
					resentative under the provisions of 40 CFR
122.22(b). If no cognizant offic	ial has been des	signated, I understand that the	Depa	rtment will accept reports signed only by the
					e prepared under my direction or supervision ather and evaluate the information submitted.
					information, the information submitted is, to
					there are significant penalties for submitting
false inf	formation, including the	possibility of fi	ne and imprisonment for kno	wing v	riolations."
Respo	nsible Official Printed N	lame: Van Me	edlock	Title:	Dir. Of Env. Services
Re	esponsible Official Signa	ature:	200	Date:	5/09/13
	Responsible Official E	mail: Van.medi	ock@rogersgroupinc.com		
Cog	nizant Official Printed N				Title:
	Cognizant Official Signa	ature:		Tele	phone:
	Cognizant Official E	*1		,	
	John Children				

X. PERMIT REQUIREMENT VERIFICATION

Please check the following to verify completion of permit requirements. If you answer "NO" to any of questions below the application will be considered incomplete and cause a delay in the permitting process.

Yes No

WATER DIVISION
5301 NORTHSHORE DRIVE / NORTH LITTLE ROCK, ARKANSAS 72118
PHONE 501-682-0623 / FAX 501-682-0880

www.adeq.state.ar.us

Submittal of Complete NOI?	\boxtimes	\sqcup		
Submittal of Required Permit Fee?	\boxtimes		Nov Permittees Only Check Number:	
Submittal of Topographic Map?	\boxtimes			
Submittal of Disclosure Statement?	\boxtimes			
Industrial Operator's License Numb	er:	N/a		

General Permit Route Sheet

Facility Name		15	Drinadale	BLARK	71		
Permit Number		AF	6500078	AFIN NO.* 72-00773			
Stream Segment: YK		YK	Receiving Stream:	Friendship Creek			
Assigned HU	C 1101	1000	Activity	Initials	Date Complete/Entered		
Sect.	Application Logged/Assign Tracking Number/Place in red folder with appropriate route sheet and filing folders (1-day)			KB	N/A		
Engineer	Completeness and Technical Review/Enter permit information into Database (3-days)			J+	6-3-13		
AA (Max of 5 business days)	AFIN request (1-day)			13	6313		
En PD		nd NPD	nd other information into ES database prior to oice (same day)	TB	6313		
R			pice Request Form and Request (same day)	TB	6313		
		approp	prization letter and priate permit, forms	The state of the s	SP619113		
Engineer	Review/organize folder for scanning (1-day)			Jt	8-12-13		
Engineer Supervisor	Review all the documents/permits/ perform technical review for the proposed project. (1-day)			6	6-12-13		
Assistant Chief	Review the documents and sign the authorization letter or the permit. (1-day)						
AA	Enter Into PDS: Permit Status/Effective Date. Input effective date in access database. (1-day)			N	5/12/13/		
Sect.	folder folder include	and places. Updo this p	to applicant. Scan complete ace in appropriate E-drive ate Zylab. Be sure to ermit in weekly report, esday by 2:00 P.M.	KB	8-12-13		

5/14/13 8:09 am emailed Van Medlack about O.E. S.Os. and site map.

REMARKS:	
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