

**Recertification Notice of Intent (NOI)
Car/Truck Washwater Discharge General Permit ARG750000**

You must **complete, certify, and sign this Recertification Notice of Intent (NOI) form** and return it to the Department in order to continue permit coverage under the General Permit ARG750000. You must submit this form **no later October 31, 2019**. Please keep a copy of this form for your records once completed and signed.

Permit Tracking Number: ARG750040 AFIN: 60-01138
Permittee Name: Larry Pruss

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.

	<u>Current Information in ADEQ's Database</u>	<u>Corrections (if needed)</u>
Facility Name:	Oak Grove Carwash	<u>SWAYZE'S CAR WASH</u>
Facility Physical Address:	Oak Grove Carwash 12117 MacArthur Dr. North Little Rock, AR 72118	
Facility Contact:	Larry Pruss	<u>NATHAN M. PRUSS</u>
Facility Contact Email:	larryp1964@att.net	<u>BRUNOSATV@HOTMAIL.COM</u>
Responsible Official:	Larry Pruss	<u>JAMES R PRUSS</u>
Responsible Official Email:	larryp1964@att.net	<u>JR PRUSS @ AOL.COM</u>
Cognizant Official:	Larry Pruss	<u>NATHAN M PRUSS</u>
Cognizant Official Email:	larryp1964@att.net	<u>BRUNOSATV@HOTMAIL.COM</u>

1. Have you attached an updated disclosure statement? Yes No
(This must be submitted)

2. Are the mailing and invoice addresses the same? Yes No

If "No" please provide invoice address → 3108 SOUTHERNGATE CABOT AR 72093

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 renewal Car/Truck Washwater Discharge General Permit (ARG750000).

Responsible Official Name: James R Pruss Responsible Official Title: MANAGER
Responsible Official Signature: James R Pruss Date: 10-2-2019

Return the NOI form to the address below or send it electronically to water.permit.application@adeq.state.ar.us:

Office of Water Quality, Permits Branch
Arkansas Department of Environmental Quality
5301 Northshore Drive
North Little Rock, AR 72118-5317

RECEIVED

JAN 16 2020
KRM/110

PERMIT TRANSFER FORM

PERMIT NUMBER: ARG 750040

SELECT ALL OF THE FOLLOWING THAT APPLY:

- Permittee (legal name) change [CHANGE OF OWNERSHIP]
- Permittee (legal name) change [NAME CHANGE ONLY]
- Facility name change
- Responsible official name change

I. CURRENT PERMITTEE INFORMATION

Permittee (legal name): LARRY PRUSS

Facility Name: OAK GROVE CAR WASH

Responsible Official Name (see Section IV below): LARRY PRUSS

Is the permittee identified above, the owner of the facility? Yes No

If No, list owner name: NATHAN M. PRUSS

II. NEW PERMITTEE INFORMATION

Permittee (legal name): SWAYZE'S CAR WASH

Facility Name (if different from Permittee Name): _____

Is the Permittee the owner of the facility? Yes No If No, list owner name: _____

Responsible Official Name (see Section IV below): JAMES R PRUSS

Responsible Official Title: MANAGER Permittee Type:

Responsible Official E-mail: JRPRUSS@AOL.COM STATE PARTNERSHIP

Permittee Mailing Address: 3108 SOUTHERN COVE FEDERAL PUBLIC

Permittee City: CABOT CORPORATION/LLC

Permittee State: AR Zip: 72023 State of Incorporation: _____

Permittee Phone No.: 501-605-1210 SOLE PROPRIETORSHIP

OTHER: _____

Is the new permittee registered with the Arkansas Secretary of State? Yes No

If yes, the Permittee (legal name) above must EXACTLY match the name registered with the Arkansas Secretary of State.

A current Certificate of Good Standing from the State of Incorporation must be submitted with this form.

Facility Mailing Address: _____ Facility City: _____

Facility State: _____ Zip: _____

Facility Contact Person Name: _____ Contact Person Title: _____

Phone Number: _____ Fax Number: _____ E-mail: _____

Invoice Contact Person: _____ City: _____

Invoice Mailing Address: _____ State: _____ Zip: _____

Invoice Mailing Address: _____ Phone: _____

Cognizant Official Name*: _____ Cognizant Official Title: _____

Phone Number: 501-251-1919 Fax Number: _____ E-mail: _____

* Duly Authorized Representative as outlined in 40 CFR 122.22(b)

PERMIT TRANSFER FORM

III. OWNERSHIP CHANGE AGREEMENT

Please note you must complete Section III only if this permit transfer is for a change of ownership.

Please specify the closing date for this transaction: 6-24-19

Current Permittee (Seller): LARRY PRUSS

Signature of Responsible Corporate Officer: LARRY PRUSS

Title of Responsible Corporate Officer: _____

Printed Name of Responsible Corporate Officer: LARRY PRUSS

Date: 10-21-19

New Permittee (Buyer): NATHAN M PRUSS

Signature of Responsible Corporate Officer: James R Pruss

Title of Responsible Corporate Officer: OWNER MANAGER

Printed Name of Responsible Corporate Officer: JAMES R PRUSS

Date: 8-12-19

Disclosure Statement:

Disclosure Statement must be submitted for new permittee. Disclosure Statement is not required for Stormwater Permits.

Is Disclosure Statement enclosed: Yes No

Trust Fund Requirements:

If this facility is subject to the trust fund requirements (Ark. Code Ann. §8-4-203(b)(1)(B)), the permittee must also submit the ADEQ Trust Fund Requirements form with this transfer form. A form may be obtained from the ADEQ website:

<https://www.adeg.state.ar.us/water/permits/npdes/individual/pdfs/ndstw-trust-fund-certification-form.pdf>

Land Use Contract:

For land application permits you must submit a new land use contracts for all the sites permitted under the current permit for land application. The new land use contract must be signed by the new permittee and land owner.

IV. CERTIFICATION OF NEW PERMITTEE (Responsible Official in Section II)

"I certify that the cognizant official designated in this Permit Transfer Form (Section II) is qualified to act as a duly authorized representative under the provisions of 40 CFR Part 122.22(b). If no cognizant official has been designated, I understand that the Department will accept reports signed by the applicant. 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 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."

In addition, I certify that there will be no operational changes that warrant a permit modification. (Please note that if there are changes that warrant a permit modification, then you must submit a complete application, updated plans, design calculations and specifications, and the permit modification fee along with this Ownership Change Form. The transfer may be made effective prior to permit modification.)

Typed or Printed Name: JAMES R PRUSS Title: MANAGER
Signature: James R Pruss Date: 8-12-19

ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY
5301 NORTHSHORE DRIVE / NORTH LITTLE ROCK / ARKANSAS 72118-5317
TELEPHONE 501-682-0744 / FAX 501-682-0880 / www.adeg.state.ar.us

ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY DISCLOSURE STATEMENT

Instructions for the Completion of this Document:

- A. Individuals, firms or other legal entities with no changes to an ADEQ Disclosure Statement, complete items 1 through 5 and 18.
- B. Individuals who never submitted an ADEQ Disclosure Statement, complete items 1 through 4, 6, 7, and 16 through 18.
- C. Firms or other legal entities who never submitted an ADEQ Disclosure Statement, complete 1 through 4, and 6 through 18.

Mail to:

ADEQ

DISCLOSURE STATEMENT

[List Proper Division(s)]

5301 Northshore Drive

North Little Rock, AR 72118-5317

1. APPLICANT: (Full Name)	Nathan M. Pruss
2. MAILING ADDRESS (Number and Street, P.O.Box Or Rural Route):	3108 Southern Cove
3. CITY, STATE, AND ZIPCODE:	CAROL, Ar 72023

4a. Applicant Type:
<input type="checkbox"/> Individual <input type="checkbox"/> Corporate or Other Entity
4b. Reason for Submission:
<input checked="" type="checkbox"/> Permit <input type="checkbox"/> License <input type="checkbox"/> Certification <input type="checkbox"/> Operational Authority
<input checked="" type="checkbox"/> New Application <input type="checkbox"/> Modification <input type="checkbox"/> Renewal Application (If no changes from previous disclosure statement, complete number 5 and 18.)
4c. Division:
<input type="checkbox"/> Air <input checked="" type="checkbox"/> Water <input type="checkbox"/> Hazardous Waste <input type="checkbox"/> Regulated Storage Tank <input type="checkbox"/> Mining <input type="checkbox"/> Solid Waste

5. Declaration of No Changes:
The violation history, experience and credentials, involvement in current or pending environmental lawsuits, civil and criminal, have not changed since the last Disclosure Statement I filed with ADEQ on _____

Signature of Individual or Authorized Representative of Firm or Legal Entity (Also complete #18.)

6. Describe the experience and credentials of the Applicant, including the receipt of any past or present permits, licenses, certifications or operational authorization relating to environmental regulation. (Attach additional pages, if necessary.)

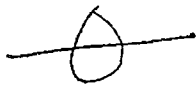
Nathan M. Pruss is the owner of Brunos Powersports
in Cabot, Ar.

We have been inspected and there has never
been a problem.

7. List and explain all civil or criminal legal actions by government agencies involving environmental protection laws or regulations against the Applicant *
in the last ten (10) years including:

1. Administrative enforcement actions resulting in the imposition of sanctions;
2. Permit or license revocations or denials issued by any state or federal authority;
3. Actions that have resulted in a finding or a settlement of a violation; and
4. Pending actions.

(Attach additional pages, if necessary.)



* Firms or other legal entities shall also include this information for all persons and legal entities identified in sections 8-16 of this Disclosure Statement.

8. List all officers of the Applicant. (Add additional pages, if necessary.)

NAME: Nathan M. Pruss TITLE: Owner/President
STREET: 3108 Southern Cove
CITY, STATE, ZIP: Cabot, Ar 72023

NAME: _____ TITLE: _____
STREET: _____
CITY, STATE, ZIP: _____

NAME: _____ TITLE: _____
STREET: _____
CITY, STATE, ZIP: _____

9. List all directors of the Applicant. (Add additional pages, if necessary.)

NAME: _____ TITLE: _____
STREET: _____
CITY, STATE, ZIP: _____

NAME: _____ TITLE: _____
STREET: _____
CITY, STATE, ZIP: _____

NAME: _____ TITLE: _____
STREET: _____
CITY, STATE, ZIP: _____

10. List all partners of the Applicant. (Add additional pages, if necessary.)

NAME: _____ TITLE: _____
STREET: _____
CITY, STATE, ZIP: _____

NAME: _____ TITLE: _____
STREET: _____
CITY, STATE, ZIP: _____

NAME: _____ TITLE: _____
STREET: _____
CITY, STATE, ZIP: _____

11. List all persons employed by the Applicant in a supervisory capacity or with authority over operations of the facility subject to this application.

NAME: Sharon Pruss TITLE: Secretary
STREET: 3108 Southern Cove
CITY, STATE, ZIP: Cabot, Ar 72023

NAME: _____ TITLE: _____
STREET: _____
CITY, STATE, ZIP: _____

NAME: _____ TITLE: _____
STREET: _____
CITY, STATE, ZIP: _____

12. List all persons or legal entities, who own or control more than five percent (5%) of the Applicant's debt or equity.

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

13. List all legal entities, in which the Applicant holds a debt or equity interest of more than five percent (5%).

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

14. List any parent company of the Applicant. Describe the parent company's ongoing organizational relationship with the Applicant.

NAME: _____

STREET: _____

CITY, STATE, ZIP: _____

Organizational Relationship:

15. List any subsidiary of the Applicant. Describe the subsidiary's ongoing organizational relationship with the Applicant.

NAME: _____

STREET: _____

CITY, STATE, ZIP: _____

Organizational Relationship:

16. List any person who is not now in compliance or has a history of noncompliance with the environmental laws or regulations of this state or any other jurisdiction and who through relationship by blood or marriage or through any other relationship could be reasonably expected to significantly influence the Applicant in a manner which could adversely affect the environment.

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

NAME: _____ TITLE: _____

STREET: _____


CITY, STATE, ZIP: _____

17. List all federal environmental agencies and any other environmental agencies outside this state that have or have had regulatory responsibility over the Applicant.

18. VERIFICATION AND ACKNOWLEDGEMENT

The Applicant agrees to provide any other information the director of the Arkansas Department of Environmental Quality may require at any time to comply with the provisions of the Disclosure Law and any regulations promulgated thereto. The Applicant further agrees to provide the Arkansas Department of Environmental Quality with any changes, modifications, deletions, additions or amendments to any part of this Disclosure Statement as they occur by filing an amended Disclosure Statement.

DELIBERATE FALSIFICATION OR OMISSION OF RELEVANT INFORMATION FROM DISCLOSURE STATEMENTS SHALL BE GROUNDS FOR CIVIL OR CRIMINAL ENFORCEMENT ACTION OR ADMINISTRATIVE DENIAL OF A PERMIT, LICENSE, CERTIFICATION OR OPERATIONAL AUTHORIZATION.

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 fines and imprisonment for knowing violation.

APPLICANT
SIGNATURE: 

TITLE: owner / President

DATE: 10/2/2019

PERMIT TRANSFER FORM

PERMIT NUMBER: ARG 750040

SELECT ALL OF THE FOLLOWING THAT APPLY:

Permittee (legal name) change [CHANGE OF OWNERSHIP]

Permittee (legal name) change [NAME CHANGE ONLY]

Facility name change

Responsible official name change

I. CURRENT PERMITTEE INFORMATION

Permittee (legal name):

LARRY TRUSS

Facility Name:

Oak Grove Car Wash

Responsible Official Name (see Section IV below):

LARRY TRUSS

Is the permittee identified above, the owner of the facility?

Yes No

If No, list owner name:

II. NEW PERMITTEE INFORMATION

Permittee (legal name):

Nathan M. Pruss

Facility Name (if different from Permittee Name):

Swayze's Car Wash

Is the Permittee the owner of the facility? Yes No If No, list owner name:

Responsible Official Name (see Section IV below):

JAMES R. PRUSS

Responsible Official Title:

MANAGER

Permittee Type:

Responsible Official E-mail:

JR.PRUSS@AOL.COM

STATE

PARTNERSHIP

Permittee Mailing Address:

3108 Southern Cove

FEDERAL

PUBLIC

Permittee City:

Cabot

CORPORATION/LLC

Permittee State:

Ar

Zip:

72023

State of Incorporation:

Permittee Phone No.:

501-605-1210

SOLE PROPRIETORSHIP

OTHER: _____

Is the new permittee registered with the Arkansas Secretary of State? Pending Yes No

If yes, the Permittee (legal name) above must EXACTLY match the name registered with the Arkansas Secretary of State.

A current Certificate of Good Standing from the State of Incorporation must be submitted with this form.

Facility Mailing Address: _____

Facility City: _____

Facility State: _____

Zip: _____

Facility Contact Person Name: _____

Contact Person Title: _____

Phone Number: _____

Fax Number: _____

E-mail: _____

Invoice Contact Person: _____

City: _____

Invoice Mailing Address: _____

State: _____

Zip: _____

Invoice Mailing Address: _____

Phone: _____

Cognizant Official Name*: _____

Cognizant Official Title: _____

Phone Number: _____

Fax Number: _____

E-mail: _____

* Duly Authorized Representative as outlined in 40 CFR 122.22(b)

ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY
5301 NORTSHORE DRIVE / NORTH LITTLE ROCK / ARKANSAS 72118-5317
TELEPHONE 501-682-0744 / FAX 501-682-0880 / www.adeg.state.ar.us

PERMIT TRANSFER FORM

III. OWNERSHIP CHANGE AGREEMENT

Please note you must complete Section III only if this permit transfer is for a change of ownership.

Please specify the closing date for this transaction: 6/24/19

Current Permittee (Seller): Larry Pruss

Signature of Responsible Corporate Officer: Larry Pruss

Title of Responsible Corporate Officer: _____

Printed Name of Responsible Corporate Officer: Larry Pruss

Date: 10/2/19

New Permittee (Buyer): Nathan M. Pruss

Signature of Responsible Corporate Officer: Nathan M. Pruss

Title of Responsible Corporate Officer: Owner

Printed Name of Responsible Corporate Officer: Nathan M. Pruss

Date: 8/12/19

Disclosure Statement:

Disclosure Statement must be submitted for new permittee. Disclosure Statement is not required for Stormwater Permits.

Is Disclosure Statement enclosed: Yes No

Trust Fund Requirements:

If this facility is subject to the trust fund requirements (Ark. Code Ann. §8-4-203(b)(1)(B)), the permittee must also submit the ADEQ Trust Fund Requirements form with this transfer form. A form may be obtained from the ADEQ website:

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In addition, I certify that there will be no operational changes that warrant a permit modification. (Please note that if there are changes that warrant a permit modification, then you must submit a complete application, updated plans, design calculations and specifications, and the permit modification fee along with this Ownership Change Form. The transfer may be made effective prior to permit modification.)

Typed or Printed Name: Nathan M. Pruss

Title: Owner

Signature: Nathan M. Pruss

Date: 8/12/19

ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY
5301 NORTHSHORE DRIVE / NORTH LITTLE ROCK / ARKANSAS 72118-5317
TELEPHONE 501-682-0744 / FAX 501-682-0880 / www.adeg.state.ar.us

**Recertification Notice of Intent (NOI)
Car/Truck Washwater Discharge General Permit ARG750000**

You must complete, certify, and sign this Recertification Notice of Intent (NOI) form and return it to the Department in order to continue permit coverage under the General Permit ARG750000. You must submit this form no later October 31, 2019. Please keep a copy of this form for your records once completed and signed.

Permit Tracking Number: ARG750040 AFIN: 60-01138
Permittee Name: Larry Pruss

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.

	<u>Current Information in ADEQ's Database</u>	<u>Corrections (if needed)</u>
Facility Name:	Oak Grove Carwash	<u>Swayze's Car Wash</u>
Facility Physical Address:	Oak Grove Carwash 12117 MacArthur Dr. North Little Rock, AR 72118	
Facility Contact:	Larry Pruss	<u>Nathan M. Pruss</u>
Facility Contact Email:	larryp1964@att.net	<u>brunos atv@hotmail.com</u>
Responsible Official:	Larry Pruss	<u>Nathan M. Pruss</u>
Responsible Official Email:	larryp1964@att.net	<u>brunosatv@hotmail.com</u>
Cognizant Official:	Larry Pruss	<u>Nathan M. Pruss</u>
Cognizant Official Email:	larryp1964@att.net	<u>brunos atv@hotmail.com</u>

1. Have you attached an updated disclosure statement? Yes No
(This must be submitted)

2. Are the mailing and invoice addresses the same? Yes No
If "No" please provide invoice address → 3108 Southern Cove
Cabot, Ar 72023

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 renewal Car/Truck Washwater Discharge General Permit (ARG750000).

Responsible Official Name: Nathan M. Pruss Responsible Official Title: owner/president
Responsible Official Signature: [Signature] Date: 10/2/2019

Return the NOI form to the address below or send it electronically to water.permit.application@adeq.state.ar.us:

Office of Water Quality, Permits Branch
Arkansas Department of Environmental Quality
5301 Northshore Drive
North Little Rock, AR 72118-5317

[Handwritten signature/initials]