

February 11, 2021

Via Email Only to: kcates@sewelloil.com

Karrie Cates Office Manager Sewell Oil Company 3400 Junction City Highway El Dorado, AR 71730

RE: AFIN #: 02-00298 Tracking #: 2243-AGP-072

General Air Permit for Minor Source Gasoline Bulk Plants

Notice of Intent - Renewal

Dear Ms. Cates,

The Division of Environmental Quality has reviewed your facility's Notice of Intent (NOI) and we have made a determination that the information certified in the NOI fulfills the required criteria for general permitting as specified in the Arkansas Plan of Implementation for Air Pollution Control (Regulation 19), the Arkansas Pollution Control Code (Regulation 18), and other applicable regulations. The tracking number for Sewell Oil Company, located at 2785 Highway 82 East, Crossett, AR 71635 is 2243-AGP-072. A copy of the general permit is available at <a href="https://www.adeq.state.ar.us/air/permits/">https://www.adeq.state.ar.us/air/permits/</a> under the "General Air Permits" link. If you would like to receive a hardcopy of the permit via mail, please contact Rhonda Bowler at 501-682-0765 or <a href="mailto:bowler@adeq.state.ar.us">bowler@adeq.state.ar.us</a>. This permit and tracking number is your authority to construct, operate, and maintain the equipment and/or control apparatus as set forth in your NOI received on 2/2/2021 and attached to this letter.

P-This authorization expires upon expiration of the General Air Permit for Minor Source Gasoline Bulk Plants on November 9, 2025. This confirmation letter shall be considered part of the permit. Please place this letter at the facility.

Sincerely,

Thomas Rheaume, P.E. Senior Operations Manager, Office of Air Quality, Division of Environmental Quality 5301 Northshore Drive, North Little Rock, AR 72118-5317

Enclosure

# Air Permit Notice of Intent (NOI) for Minor Soi Dependent of Soi Dependent

Digitally signed by:
nform
DPEPORTALIIS.ADPCEDN
Date: 2021.02.02 15:04:19 -08
Reason: Copy Of Record
Location: North Little Rock, Arkansas

version 3.9

(Submission #: HP4-5QA7-VFYC4, version 1)

# **Details**

Form Alias Air Permit Notice of Intent (NOI) for Minor Source General Air Permit for Gasoline Bulk Plants 2243-

AGP-000

Form Started 11/10/2020 2:52 PM by JUSTIN Sewell 2/2/2021 3:03 PM by JUSTIN SEWELL

Submission # HP4-5QA7-VFYC4

Submission

Reason

Renewal

Status Submitted

Active Steps Insert General Permit Workflow Template (Admin)

**AFIN:** 02-00298

# **Form Input**

# **Applicability**

#### Requirements for Bulk Plant General Permit Applicants

In order to be eligible for this permit, the facility must meet the conditions, limits, and requirements contained in the general permit.

Requirements include, but are not limited to:

- A daily throughput limit of less than 20,000 gallons of gasoline
- An annual throughput limit of less than 7,200,000 gallons of diesel fuel
- An annual throughput limit of less than 7,200,000 gallons of jet fuel

Click here for the Bulk Plants General Permit

Does the facility meet the conditions stated in the general permit including but not limited to those requirements listed above?

Yes

# **General Information**

#### AFIN, NOI Type, Current Air Permits, and Changes

Indicate below the Arkansas DEQ Facility Identification Number (AFIN), type of NOI, clearly and concisely indicate the changes associated with this NOI and list any active air permit number.

Arkansas DEQ Facility Identification Number (AFIN) 02-00298

Select the Type of NOI

Renewal

List All Changes Associated with this NOI or indicate "None"

NONE

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#### List Current Active Air Permit Number for the Facility (If Applicable)

2243-AGP-072

#### **Air Permit NOI Contact Information**

In many cases, the person who prepared and is most knowledgeable about the NOI is someone other than the person who signed the NOI. Information in this table should allow the Office of Air Quality to contact this person. If this section is blank and the Office of Air Quality requires additional information, we will contact the person listed in the mailing address.

#### **Air Permit NOI Contact Information**

## **Air Permit NOI Contact**

First Name Last Name Karrie Cates

Title

NONE PROVIDED

Phone Type Number Extension

Business 8708663390

**Email** 

Kcates@sewelloil.com

## **Air Permit NOI Contact Address**

3400 JUNCTION CITY HWY El Dorado, Arkansas 71730

## Does the facility have any emergency engines?

No

# **Applicant Information**

#### **Facility Information**

Please provide the following information about the facility.

#### Legal Name - Facility Name

SEWELL OIL COMPANY IN C

#### North American Industry Classification System (NAICS)

Please provide the NAICS codes and description for your facility.

<u>Click here to search for and review the NAICS Codes via the Census Bureau NAICS Lookup</u>

#### **Primary NAICS Code and Description**

10301 - Air Program (AIR)

#### **Facility Physical Address**

#### **Contact**

#### **Physical Address**

2785 HIGHWAY 82 EAST CROSSETT, AR 71635

#### **Facility Physical County**

Ashley

## **Facility Physical Location Latitude and Longitude**

33.1420363,-92.0414954

NONE PROVIDED

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**Facility Mailing Address** 

**Mailing Contact** 

**Prefix** 

Mrs.

First Name Last Name

Karrie Cates

Title

OFFICE MANAGER

Phone Type Number Extension

Business 8708663390

**Email** 

Kcates@sewelloil.com

**Mailing Address** 

3400 JUNCTION CITY HWY

EL DORADO, AR 71730

United States

#### **Additional Facility Email Contact**

If you want an additional facility contact to be included on emails of correspondence for this facility, please enter their email address below. This contact should be facility personnel only.

#### **Enter the Additional Facility Email Contact**

Kcates@sewelloil.com

#### **Billing Information**

Please provide the following information for the Billing contact for this NOI.

# **Billing Information**

#### **Billing Contact**

First Name Last Name Karrie Cates

Title

OFFICE MANAGER

**Organization Name** 

SEWELL OIL COMPANY INC

Phone Type Number Extension

Business 8708663390

**Email** 

Kcates@sewelloil.com

**Billing Address** 

3400 JUNCTION CITY HWY

EL DORADO, AR 71730

#### **Organizational Information**

Please provide the following information for the applicant. If the applicant is a Corporation, Limited Liability Company, Limited Partnership, or Cooperative; your legal name must exactly match the name registered with the Arkansas Secretary of State. Please use the following link to reference the Secretary of State registered name listing. The Proof of Good Standing for entities chartered outside of Arkansas is not required for Administrative Changes.

All Corporations, Limited Liability Companies (LLC), Limited Partnerships (LP, LLP, and LLLP), and Cooperatives must be registered and in good standing with the Arkansas Secretary of State and the state of origin (if other than Arkansas). Click here to view the Secretary of State registered name listing

## **Legal Organization**

Corporation (Domestic or Foreign, includes for-profit, nonprofit, and corporation d/b/a company)

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#### **Enter the Arkansas Secretary of State's Filing Number**

100023485

Indicate if the Applicant is chartered in Arkansas (i.e. domestic) or chartered in a state other than Arkansas (i.e. foreign). Refer to the State of Origin that is listed on the Arkansas Secretary of State's website for this applicant. Domestic (Arkansas)

Disclosure Statement or Securities and Exchange Commission (SEC) Reports (Required for Initial Permits, Renewals, and any time the Disclosure Statement has Changed)

Arkansas Code Annotated § 8-1-106 requires that all applicants for the issuance or transfer of any permit submit a disclosure statement with their applications. Some exceptions apply (refer to the form for details).

The disclosure form is a separate form and can be obtained using the link below. Click Here for the DEQ Disclosure Statement Form

#### Attach the Disclosure Statement or SEC Annual and Quarterly Reports

DISCLOSURE ADEQ.pdf - 11/10/2020 03:52 PM

Comment

NONE PROVIDED

#### Responsible Official Information

Provide the information below for the person under whose electronic signature or hardcopy signature this form will be certified when completed. This person must be a responsible official. For the definition of responsible official click the link below. Click Here for the Definition of Responsible Official

#### Name of the Responsible Official Certifying this NOI

JUSTIN Sewell

#### Job Title of the Responsible Official

**PRESIDENT** 

#### Company or Agency of the Responsible Official

SEWELL OIL COMPANY INC

#### How Does the Person Certifying this Submission Qualify as a Responsible Official?

The person is the president of the corporation, LLC, or cooperative

#### How Will the Responsible Official Certify this Submission?

The Responsible Official will submit this submission using their electronic signature

# Insignificant Activities and Other Information

# **Insignificant Activities**

List below any emission sources other than tanks and loading racks at the facility. These must qualify as insignificant activities listed in Appendix A, Group A of Regulation 18 or 19. For insignificant activities with a numerical standard in Appendix A, Group A of Regulation 18 or 19, calculations demonstrating compliance with the numerical standard must be provided also.

#### **Insignificant Activities**

NONE PROVIDED

## Attach Calculations and/or Detailed Lists for the Insignificant Activities Listed, if Necessary

NONE PROVIDED

Comment

NONE PROVIDED

#### Other Information (Optional)

Attach any other information that you wish to be considered in this NOI.

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# **Status History**

	User	Processing Status
11/10/2020 2:52:40 PM	JUSTIN Sewell	Draft
2/2/2021 3:03:45 PM	JUSTIN SEWELL	Submitted

# **Processing Steps**

Step Name	Assigned To/Completed By	Date Completed
Submit Form	JUSTIN SEWELL	2/2/2021 3:03:45 PM

# **Submission Agreements**

#### Certification

I certify under penalty of law that this Notice of Intent 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.

\*\*\*The person submitting this form must be the same person referenced in the Responsible Official section of this form or you must submit a separate hardcopy certification with Responsible Official signature. If you are using the hardcopy certification method, your Notice of Intent will not be considered complete until the original hardcopy certification is received.\*\*\*

V	I am the owner of the account used to perform the electronic submission and signature.	
7	I have the authority to submit the data on behalf of the facility I am representing.	
V	lagree that providing the account credentials to sign the submission document constitutes an electronic signature equivalent to my written signature.	
7	I have reviewed the electronic form being submitted in its entirety, and agree to the validity and accuracy of the information contained within it to the best of my knowledge.	

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