

ADEQ

ARKANSAS
Department of Environmental Quality

December 30, 2010

Bob Bingaman
Southern Star Concrete
11701 Interstate 30
Little Rock, AR 72209

RE: Impaired Water Body Information under the Industrial Stormwater General Permit, Southern Star Concrete, Benton, AR (Permit Tracking No. **ARR000103** - AFIN **63-00794**)

Dear Mr. Bingaman:

The Department is in receipt of the renewal Notice of Intent (NOI) for coverage under the Industrial Stormwater General Permit (IGP), ARR000000, for Southern Star Concrete. The NOI was received on 12/13/10. Upon review of the facility's receiving waters, it has been determined that the receiving stream, Saline River, is listed on the Department's 2008 List of Impaired Water Bodies for the following parameters: Beryllium, Siltation and Total Dissolved Solids.

Per Part 1.9.5 of ARR000000 discharges into impaired water bodies (303 (d)) list are excluded for coverage under ARR000000 unless the facility implements one of the following items:

- a. document that the facility does not have any of the pollutant(s) present that the water body is impaired for; or
- b. include additional Best Management Practices (BMPs) to prevent possible exposure of the pollutant to stormwater.

The facility must determine which of the above options are available to the facility and document the decision in the facility's Stormwater Pollution Prevention Plan (SWPPP). Once a decision has been made the Department must be notified and the updated SWPPP be submitted for review no later than **January 28, 2011**. As stated in the permit, the Department may require additional BMPs be implemented to protect the Waters of the State to the maximum extent practicable.

If you have any questions concerning this matter or need additional information, please feel free to contact the General Permits Section at (501) 682-0623 or myself at (501) 682-0627.

Sincerely,



Jennifer Harmon
Engineer, General Permits Section
Water Division

cc: Electronic Filing (ARR000103, w/ attachments)

Industrial Stormwater Renewal Route Sheet

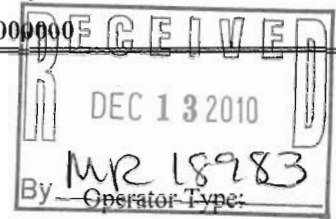
Facility Name: <u>Souther Star Concrete Benton</u>			
Permit Number: <u>AR000108</u>		AFIN NO.*: <u>63-00794</u>	
No Exposure Exclusion: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Monitoring Category: _____	Industrial Sector: <u>EL</u>
Stream Segment: <u>2C</u>		Nearest Receiving Water: _____	HUC: <u>08040203</u>
Assigned	Activity	Initials	Date Complete/Entered
Sect.	NOI Logged/Assign to Engineer (1-day)	<u>MR</u>	N/A
Engineer (5 days)	Confirm/Perform the following: <input type="checkbox"/> Check Permittee Name on SOS (if applicable) <u>12/14/10</u> <input checked="" type="checkbox"/> Check SIC Code <input checked="" type="checkbox"/> Assign Industrial Sector <input type="checkbox"/> Check Facility and Outfall Coordinates by Google Earth. <input type="checkbox"/> Check Receiving Stream <input type="checkbox"/> Enter information into Access <input type="checkbox"/> DMR status _____ submitted Dates not submitted:		
AA (max 5 business days unless AFIN Change is Required*)	Check the following into PDS: <input type="checkbox"/> AFIN Change Required <input type="checkbox"/> Invoice Information <input type="checkbox"/> Coordinates-if not already there <input type="checkbox"/> SIC/NAICS <input type="checkbox"/> Receiving Stream <input type="checkbox"/> Stream Segment <input type="checkbox"/> Facility Contact (All info-name/number/email) <input type="checkbox"/> Facility Mailing Information <input type="checkbox"/> Monitoring Category <input type="checkbox"/> Staff		
Engineer (2 days)	Merge Permit Authorization Letter		
Engineer Supervisor (1-day)	Review all the documents. Make recommendation.		
Assistant Chief (1-day)	Review the documents and sign the authorization letter or the permit.		
Sect.	<input type="checkbox"/> Scan complete packet <input type="checkbox"/> E-mail to everyone cc on the letter <input type="checkbox"/> Mail Letter		

*If an AFIN change is required, change of ownership timelines must be followed.

Comments:

Saline River - Be letter sent 10/30/10
S;
TDS

**NOTICE OF INTENT (NOI)
FOR DISCHARGERS OF STORMWATER RUNOFF
ASSOCIATED WITH INDUSTRIAL ACTIVITY
AUTHORIZED UNDER NPDES GENERAL PERMIT ARR000000**



Application Type: New Renewal X Permit No. ARR000103

I. PERMITTEE/OPERATOR INFORMATION

Permittee (Legal Name)*: Southern Star Concrete, Inc.
 Permittee Mailing Address: 8505 Freeport Parkway, Suite 200
 Permittee City: Irving
 Permittee State: Texas Zip: 75063
 Permittee Telephone Number: 972-621-0999
 Permittee Fax Number: _____
 Permittee E-mail Address: _____

STATE PARTNERSHIP
 FEDERAL CORPORATION**
 SOLE PROPRIETORSHIP
 PUBLIC
 OTHER: _____
 **State of Incorporation: Texas

* The legal name of the Permittee must be identical to the name listed with the Arkansas Secretary of State.

II. INVOICE MAILING INFORMATION (if different from facility mailing address)

Invoice Contact Person: Bob Bingaman City: Little Rock
 Invoice Mailing Company: Southern Star Concrete, Inc. State: Arkansas Zip: 72209
 Invoice Mailing Address: 11701 Interstate 30 Telephone: 501-771-2700

III. FACILITY INFORMATION

Facility Name
 (if different from Permittee): Southern Star Concrete
 Facility Physical Address: 19087 Dale Avenue Contact Person: Bob Bingaman
 Facility County: Saline Contact Title: Facility Manager
 Facility City: Benton Zip: 72015 Telephone Number: 501-771-2700
 Take 430 South to I-30 West, Take Exit 116 off I-30 then Turn Left on Sevier Street
 Then Turn Right on Access Road then Turn Left onto Airline Drive, then Right
 onto Dale Avenue, Plant is on Left at End of Road
 Directions to the Facility: _____ Fax Number: _____
 AFIN (if known): _____ Email Address: _____

Is mailing address different from facility address? X Yes No If yes, provide mailing address in the space provided.

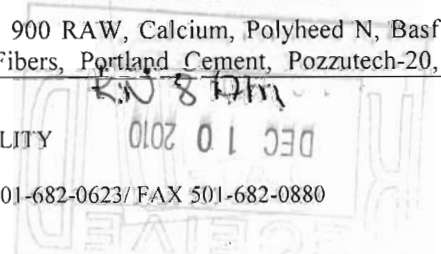
Mailing Address: 11701 Interstate 30
 City: Little Rock State: Ar. Zip: 72209

Type of Business: Concrete Plant Facility SIC Code(s): 3273 NAICS Code (s): 32732 D Industrial Sector: *** E2

*** Please see Part 1.5 of ARR000000 for a complete listing of Industrial Sectors. The facility may operate under the above chosen sector unless otherwise notified by the Department.

Description of Major Process(es) at Facility: Mixing of Concrete for Various Construction Projects

List of Chemicals Used in the Process: MB AE 90 RAW, Liquid Delvo, Polyheed 900 RAW, Calcium, Polyheed N, Basf F70 Regular Fibers, Basf M100 Micro Fibers, Portland Cement, Pozzutech-20,



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GLENIUM 7700, Rheobuild-1000

Facility Latitude: * 34 degrees ~~40~~³² minutes ~~52.85~~^{56.4} seconds
Facility Longitude: * 92 degrees 36 minutes ~~28.44~~²⁸ seconds
* Facility coordinates should be taken at the entrance to the facility. 28.42

IV. OUTFALL INFORMATION

Outfall number should be assigned sequentially to stormwater discharge locations if the facility has more than one outfall. (i.e. 001, 002, etc.) These should coincide with the Outfall locations on the site map for the facility.

Outfall: 001

Outfall Latitude: 34 degrees 32 minutes 51.87 seconds

Outfall Longitude: 92 degrees 36 minutes 25.39 seconds

Receiving Stream: From Facility to Un-Named Creek to Saline River

Outfall: _____

Outfall Latitude: _____ degrees _____ minutes _____ seconds

Outfall Longitude: _____ degrees _____ minutes _____ seconds

Receiving Stream: _____

Similar Outfalls: Please indicate any similar outfall numbers that the facility may have in accordance to Part 3.7.1.

Pages may be added for additional outfalls.

V. FACILITY PERMIT INFORMATION

List any additional permits from the Water Division that the facility may have coverage under.

NPDES Individual Permit Number (If Applicable): AR00

NPDES General Permit Number (If Applicable): ARG

NPDES General Construction Stormwater Permit Number (If Applicable): ARR15

No Discharge Permit Number (If Applicable): _____

List any permits the facility has from another division within ADEQ: 63001703

VI. CONSULTANT INFORMATION (If applicable)

Consultant Company: Pollution Management, Inc.

Consultant Contact Name: Doug Ford

Consultant Email Address: WDF@Pollution-Management.com

Consultant Address: 3512 South Shackleford City: Little Rock State: Ar. Zip: 72205

Consultant Phone Number: 501-221-7122 Consultant Fax Number: 501-221-7775

**NOTICE OF INTENT (NOI)
FOR DISCHARGERS OF STORMWATER RUNOFF
ASSOCIATED WITH INDUSTRIAL ACTIVITY
AUTHORIZED UNDER NPDES GENERAL PERMIT ARR000000**

VII. CERTIFICATION OF OPERATOR

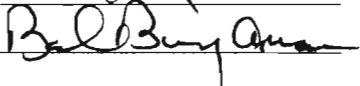
(This statement must be completed for all applicants requesting coverage under the ARR000000. The Certification must be initialed and signed.)

_____ “I certify that, if this facility is a corporation, it is registered with the Secretary of State of Arkansas. Please provide the full name of corporation if different than that listed in Section I above.”

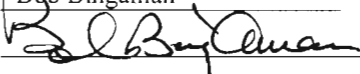
_____ “I certify that a stormwater pollution prevention plan has been developed in accordance with Part 4 of the general permit.

_____ “I certify that the cognizant official designated in Part IX of this Notice of Intent is qualified to act as a duly authorized representative under the provisions of 40 CFR 122.22(b). If no cognizant official has been designated, I understand that the Department will accept reports only 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 known violations.”

Responsible Official Printed Name: Bob Bingaman Title: Facility Manager
Responsible Official Signature:  Date: 12/2/10

VIII. COGNIZANT OFFICIAL

Cognizant Official Printed Name: Bob Bingaman Title: Facility Manager
Cognizant Official Signature:  Telephone: 501-771-2700
Cognizant Official E-mail: Bob.Bingaman@Southernstarconcrete.com

IX. PERMIT REQUIREMENT VERIFICATION

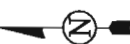
Please check the following to verify completion of permit requirements.

	Yes	No
Submittal of Complete NOI?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Submittal of Required Permit Fee? (New Discharger Only)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Check Number: _____		
Submittal of SWPPP (for new dischargers only)	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Submittal of Site Map (for existing dischargers only)

X





 SCALE: 0 80'

JOB NUMBER
 SSCI-6580
 DRAWING NUMBER
 1

GENERAL SITE PLAN

SOUTHERN STAR CONCRETE
 1908 DALE AVE.
 BENTON, ARKANSAS

SUBMITTED: D. LLOYD
 DRAWN: D. GORMAN
 CHECKED: D. LLOYD
 DATE: NOV. 30, 2010

POLLUTION MANAGEMENT INC.
 3512 SOUTH SHACKLEFORD
 LITTLE ROCK, ARKANSAS 72205
 (501) 221-7122 fax (501) 221-7775
 FILE: I:\SOUTHERN STAR CONCRETE, INC\SSCI-6580\BENTON PLANT\GENERAL SITE PLAN.DWG