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PERMIT APPLICATION
FORM 1

ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY
WATER DIVISION
POST OFFICE BOX 8913
LITTLE ROCK, AR 72219

PURPOSE OF THIS APPLICATION

- ☐ INITIAL PERMIT APPLICATION FOR NEW FACILITY
- ☐ INITIAL PERMIT APPLICATION FOR EXISTING FACILITY
- ☐ MODIFICATION OF EXISTING PERMIT
- ☒ REISSUANCE (RENEWAL) OF EXISTING PERMIT
- ☐ MODIFICATION AND CONSTRUCTION OF EXISTING PERMIT
- ☐ CONSTRUCTION PERMIT

SECTION A- GENERAL INFORMATION

1. Facility Name: Ash Grove Cement Company
2. Legal Applicant Name (If the applicant is different from the above): NA
3. Operator (Permittee) Name: Ash Grove Cement Company
4. Is the operator identified in number 3 above, the owner of the facility? ☒ Yes ☐ No
5. NPDES Permit Number (If Applicable): AR0042846
6. NPDES General Permit Number (If Applicable): ARG
7. NPDES General Storm Water Permit Number (If Applicable): ARR10C143
8. Does your facility hold any other permits which are not listed above? ☒ Yes ☐ No
9. Permit Numbers and/or names of any permits issued by ADEQ or EPA for an activity located in Arkansas that is presently held by the applicant or its parent or subsidiary corporation:

Permit Name	Permit Number	Held by
CAA PSD Permit	75-AOP-R4	Ash Grove Cement
RCRA Permit	ARD9818512270	Ash Grove Cement
Solid Waste Permit	P0188	Ash Grove Cement
Mining Permit	Unknown	Ash Grove

Cement

10. Give a verbal description (Direction) of the facility with respect to known or easily identifiable landmarks:

Approximately two miles southwest of Foreman, AR on Highway 108 West.

11. Facility Location: (Attach a map with location marked; street, route no. or other specific identifier)

Street: 4457 Highway 108 West

City: Foreman County: Little River State: AR Zip: 71836

12. Facility Mailing Address (Street or Post Office Box):

Street: P.O. Box 130

City: Foreman State: AR Zip: 71836

13. Neighboring States Within 20 Miles of the permitted facility (Check all that apply):

Oklahoma ☒ Missouri ☐ Tennessee ☐ Louisiana ☐ Texas ☒ Mississippi ☐

14. Type of ownership: Public ☐ Private ☒ State ☐ Federal ☐ Other ☐

15. Indicate applicable Standard Industrial Classification (SIC) Codes or NAICS codes for all processes:

3241 Primary, _____ Other, _____ Other

16. Design Flow: N/A MGD Highest Monthly Average of the last two years Flow: 0.29 MGD

17. Is Outfall equipped with a diffuser? ☐ Yes ☒ No

18. Responsible Official (as described on the last page of this application):

Name: Dan Peterson Title: Plant Manager

Address: P.O. Box 130 Phone Number: 870-542-6217 ext. 3270

City: Foreman State: AR Zip: 71836

19. Designated Facility Contact (as describe on the last page of this application):

Name: Keith Byerly Title: Environmental Manager

Address: PO Box 130 Phone Number: 870-542-6217 ext 3311

City: Foreman State: AR Zip: 71836

20. Name, address and telephone number of consulting engineer firm (If none, so state):

Name:	CH2M HILL

Address:	523 South Louisiana St. Suite 304			Phone Number:	501-372-6060
City:	Little Rock	State:	AR	Zip:	72201

SECTION B: FACILITY AND OUTFALL INFORMATION

1. Facility Location:

Lat: 33 ° 41 ' 11 " Long: 94 ° 25 ' 25 " Section: 28 Township: 32W

Range: 125 County: Little River Nearest Town: Foreman USGS Hydrologic Unit Code: 11140106

What map scale is used? 1:24,000 What Method is used? Map Interpolation Indicate Technical Accuracy 4-30 sec

What map datum is used? 2-NAD83 Where is the collection point? 1-Centroid

2. Outfall/monitoring Location:

Outfall __001____:

Lat: 33 ° 41 ' 0 " Long: 94 ° 25 ' 30 "

USGS Hydrologic Unit Code: 11140106 What map scale is used? 1:24,000 What Method is used? Map Interpolation

Indicate Technical Accuracy 4-30 sec What map datum is used? 2-NAD83 Where is the collection point? 1-Centroid

Name of Receiving Stream (i.e. an unnamed tributary of Mill Creek, thence into Mill Creek; thence into Arkansas River):

Discharges via unnamed tributaries to French Creek, a tributary to Walnut Bayou in the Red River Basin

Outfall __002____:

Lat: 33 ° 41 ' 30 " Long: 94 ° 25 ' 30 "

USGS Hydrologic Unit Code: 11140106 What map scale is used? 1:24,000 What Method is used? Map Interpolation

Indicate Technical Accuracy 4-30 sec What map datum is used? 2-NAD83 Where is the collection point? 1-Centroid

Name of Receiving Stream (i.e. an unnamed tributary of Mill Creek, thence into Mill Creek; thence into Arkansas River):

Discharges via unnamed tributaries to French Creek, a tributary to Walnut Bayou in the Red River Basin.

Outfall __003____:

Lat: 33 ° 41 ' 10 " Long: 94 ° 25 ' 30 "

USGS Hydrologic Unit Code: 11140106 What map scale is used? 1:24,000 What Method is used? Map Interpolation

Indicate Technical Accuracy 4-30 sec What map datum is used? 2-NAD83 Where is the collection point? 1-Centroid

Name of Receiving Stream (i.e. an unnamed tributary of Mill Creek, thence into Mill Creek; thence into Arkansas River):

Discharges via unnamed tributaries to French Creek, a tributary to Walnut Bayou in the Red River Basin.

Outfall 003A:

Lat: 33 ° 41 ' 16 " Long: 94 ° 25 ' 14 "

USGS Hydrologic Unit Code: 11140106 What map scale is used? 1:24,000 What Method is used? Map Interpolation

Indicate Technical Accuracy 4-30 sec What map datum is used? 2-NAD83 Where is the collection point? 1-Centroid

Name of Receiving Stream (i.e. an unnamed tributary of Mill Creek, thence into Mill Creek; thence into Arkansas River):

This is an internal outfall. Discharges to an unnamed drainage ditch, under Highway 108, and into the main plant drainage ditch which flows in to the Process Water Pond, Outfall 003

Outfall SW-1:

Lat: 33 ° 40 ' 30 " Long: 94 ° 24 ' 50 "

USGS Hydrologic Unit Code: 11140106 What map scale is used? 1:24,000 What Method is used? Map Interpolation

Indicate Technical Accuracy 4-30 sec What map datum is used? 2-NAD83 Where is the collection point? 1-Centroid

Name of Receiving Stream (i.e. an unnamed tributary of Mill Creek, thence into Mill Creek; thence into Arkansas River):

Discharges to French Branch, a tributary to Walnut Bayou in the Red River Basin.

Outfall SW-2:

Lat: 33 ° 41 ' 05 " Long: 94 ° 24 ' 13 "

USGS Hydrologic Unit Code: 11140106 What map scale is used? 1:24,000 What Method is used? Map Interpolation

Indicate Technical Accuracy 4-30 sec What map datum is used? 2-NAD83 Where is the collection point? 1-Centroid

Name of Receiving Stream (i.e. an unnamed tributary of Mill Creek, thence into Mill Creek; thence into Arkansas River):

Discharges via unnamed tributaries to Sterling Branch, a tributary to Walnut Bayou in the Red River Basin.

3. Are the proposed or existing facility located above the 100-year flood level? ☒ Yes ☐ No

If "No", what measures are (or will be) used to protect the facilities? _____

4. Type of Treatment system (Included all components of treatment system and Attach the process flow diagram):

Retention pond system. Recirculation from Process Pond back into process.

SECTION C – WASTE STORAGE AND DISPOSAL INFORMATION – N/A

1. Sludge Disposal Method (Check as many as are applicable):

☐ **Landfill**

Landfill Site Name _____ ADEQ Solid Waste Permit No. _____

☐ **Land Application** ADEQ State Permit No. _____

Method of sludge treatment _____

What is the estimated amount of sludge generated at the treatment facility?

Dry Ton/Acre per year _____ Gallon/Acres per year _____

List all the land application sites with the following information:

Field Number	New/Old	Range	Township	Section	Total Acres	Available Acres	Crop Cover	Loading Rate

☐ **Septic tank** Arkansas Department of Health Permit No.: _____

☐ **Distribution and Marketing**

Facility receiving sludge:

Name: _____ Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Rail: ☐ Pipe: ☐ Other: _____

☐ **Subsurface Disposal** (Lagooning)

Location of lagoon _____ How old is the lagoon? _____

Surface are of lagoon: _____ Acre Depth: _____ Ft Does lagoon have a liner? ☐ Yes ☐ No

☐ **Incineration**

Location of incinerator _____

☐ **Other** (Provide complete description) _____

SECTION D - WATER SUPPLY

Water Sources (check as many as are applicable):

☒ **Private Well** - Distance from Discharge point: ☒ Within 5 mile ☐ Within 50 mile

☒ **Municipal Water Utility** (Specify City): Foreman, AR

Distance from Discharge point: ☒ Within 5 mile ☐ Within 50 mile

☒ **Surface Water**- Name of Surface Water Source: Process Water Pond

Distance from Discharge point: ☒ Within 5 mile ☐ Within 50 mile

☐ **Other** (Specify): _____

Distance from Discharge point: ☐ Within 5 mile ☐ Within 50 mile

SECTION E: FINANCIAL ASSURANCE AND DISCLOSURE FORM

1. Act 336 of 1995 provides for financial assurance requirements for permitting common sewage systems. Arkansas Code 8-5-703 (a)(1)-The Department of Pollution Control and Ecology shall not permit or register any common sewage system serving two(2) or more occupied lots, residences, businesses, or other discernible occupied init without the applicant first demonstrating to the department its financial ability to cover the costs of operating and maintaining the system for a period of five (5) years.

Please provide **financial assurance** in order to shows that the facility is able to cover the costs of operating and maintaining the treatment system for the next five years.

The minimal financial assurance may be demonstrated to the department (Arkansas Code 8-5-703(a)(2)):

A. By obtaining insurance;
B. By passing a financial test;
C. By obtaining a letter of credit;
D. By obtaining a surety bond;
E. By obtaining a trust fund or escrow account;
F. Through the use of a combination of insurance, financial test, letter of credit, surety bond, trust fund, or escrow account.

2. Applicant has previously submitted, or has on file with this Department, a complete Disclosure Form as required by Act 454 of 1991:

If YES, date submitted: February 2006 Division: Hazardous Waste

If NO, Submit a Disclosure Form. (http://www.adeq.state.ar.us/water/branch_permits/pdfs_forms/disclosure_stmt.pdf)

SECTION F – INDUSTRIAL ACTIVITY

1. Does an effluent guidelines limitation promulgated by EPA (http://www.epa.gov/docs/epacfr40/chapt-I.info/subch-N.htm) under Section 304 of the Clean Water Act (CWA) apply to your facility?

   YES ☒ (Answer questions 2 and 3) NO ☐

2. What Part of 40 CFR? 411

3. What Subpart (s) ? _____ _____

4. Give a brief description of all operations at this facility including primary products or services (attach additional sheets if necessary):

   The plant manufactures Portland cement and masonry cement using raw materials quarried from the underlying geologic strata.

5. Production: (projected for new facilities)

Product(s) Manufactured	Last 12 Months lbs/day		Highest Production Year of Last 5 Years lbs/day	
(Brand name)	Highest Month	Days of Operation	Monthly Average	Days of Operation
Portland Cement	6,592,000 (May 2005)	31 days	6,592,000	365 days

SECTION G - WASTEWATER DISCHARGE INFORMATION

Facilities that checked "Yes" in question 1 of Section F are considered Categorical Industrial Users and should skip to question 2.

1. **For Non-Categorical Users Only**: List average wastewater discharge, maximum discharge, and type of discharge (batch, continuous, or both), for each plant process. Include the reference number from the process flow schematic (reference Figure 1) that corresponds to each process. [New facilities should provide estimates for each discharge.]

No.	Process Description	Average Flow (GPD)	Maximum Flow (GPD)	Type of Discharge (batch, continuous, none)

If batch discharge occurs or will occur, indicate: [New facilities may estimate.]

Number of batch discharges: _____ per day Average discharge per batch: (GPD)

Time of batch discharges _____ (days of week) at _____ (hours of day)

Flow rate: _____ gallons/minute Percent of total discharge: _____

Answer questions 2, 3, and 4 only if you are subject to Categorical Standards.

2. For Categorical Users: Provide the wastewater discharge flows for each of your processes or proposed processes. Include the reference number from the process flow schematic (reference Figure 1) that corresponds to each process. [New facilities should provide estimates for each discharge.]

No.	Regulated Process	Average Flow (GPD)	Maximum Flow (GPD)	Type of Discharge (batch, continuous, none)
001	Portland Cement Manufacturing	0.07	0.24	intermittent
002	Portland Cement Manufacturing	0.056	0.29	intermittent
003	Portland Cement Manufacturing	0.15	0.28	intermittent
003A	Portland Cement Manufacturing	0.021	0.021	intermittent

No.	Unregulated Process	Average Flow (GPD)	Maximum Flow (GPD)	Type of Discharge (batch, continuous, none)

No.	Dilution (e.g., Cooling Water)	Average Flow (GPD)	Maximum Flow (GPD)	Type of Discharge (batch, continuous, none)

If batch discharge occurs or will occur, indicate: [New facilities may estimate.]

Number of batch discharges: NA per day Average discharge per batch: NA (GPD)

Time of batch discharges NA (days of week) at NA (hours of day)

Flow rate: NA gallons/minute Percent of total discharge: NA

3. Do you have, or plan to have, automatic sampling equipment or continuous wastewater flow metering equipment at this facility?

Current:	Flow Metering	☐	Yes	☐	No	☒ N/A
	Sampling Equipment	☐	Yes	☐	No	☒ N/A

Planned:	Flow Metering	☐	Yes	☐	No	☒ N/A
	Sampling Equipment	☐	Yes	☐	No	☒ N/A

If so, please indicate the present or future location of this equipment on the sewer schematic and describe the equipment below:

4. Are any process changes or expansions planned during the next three years that could alter wastewater volumes or characteristics?

   ☒ Yes ☐ No (If no, skip Question 5)

5. Briefly describe these changes and their effects on the wastewater volume and characteristics

Soda ash and sodium tripolyphosphate will be used in decreasing the percentage of water in the slurry fed to the kiln. These chemicals will be kept inside but it is possible for some to escape to outfall 003 if there is a slurry spill. The chemicals are used at a rate of less than 0.01%.

SECTION H -TECHNICAL INFORMATION

Technical information to support this application shall be furnished in appropriate detail to understand the project. Information in this Part is required for obtaining a **construction permit** or for **modification** of the treatment/disposal system.

1. Describe the process for wastewater treatment. Include the types control equipment to be installed along with their methods of operation and control efficiency.

   Not obtaining a construction permit or modifying the treatment/disposal system.

2. One set of construction plans and specifications, approved by a **Professional Engineer** (PE) registered in **Arkansas**, must be submitted as follows:

   a. The plans must show flow rates in addition to pertinent dimensions so that detention times, overflow rates, and loadings per acre, etc. can be calculated.
   b. Specifications and complete design calculations.
   c. All treated wastewater discharges should have a flow measuring device such as a weir or Parshall flume installed. Where there is a significant difference between the flow rates of the raw and treated wastewater, a flow measuring device should be provided both before and after treatment.

3. If this application includes a construction permit disturbing five or more acres, a storm water construction permit must be obtained by submitting a notice of intent (NOI) to ADEQ.

SECTION I: SIGNATORY REQUIREMENTS

The information contained in this form must be certified by a ***responsible official*** as defined in the "signatory requirements for permit applications" (40 CFR 122.22).

Responsible official is defined as follows:

Corporation, a principal officer of at least the level of vice president
Partnership, a general partner
Sole proprietorship: the proprietor
Municipal, state, federal, or other public facility: principal executive officer, or ranking elected official.

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 further certify under penalty of law that all analyses reported as less than detectable in this application or attachments thereto were performed using the EPA approved test method having the lowest detection limit for the substance tested.

Signature of responsible official: _____ Date: 3/28/06

Printed name of responsible official: Dan Peterson

Official title of responsible official: Plant Manager Telephone Number 870-542-6217 ext. 3270

By signature in Section I above, the applicant certifies that the named individual is qualified as print below to act as a duly authorized representative under the provisions of 40 CFR 122.22(b). (NOTE: If no duly authorized representative is designated in this section, the Department considers the applicant to be the responsible official for the facility and only reports, etc., signed by the applicant will be accepted by the Department).

Cognizant Official (Duly Authorized Representative)

40 CFR 122.22(b) states that all reports required by the permit, or other information requested by the Director, shall be signed by the applicant (or person authorized by the applicant) or by a duly authorized representative of that person. A person is duly authorized representative only if:

(1) the authorization is made in writing by the applicant (or person authorized by the applicant);
(2) the authorization specifies either an individual or a position having responsibility for the overall operation of the regulated facility or activity responsibility, or an individual or position having overall responsibility for environmental matters for the company.

The applicant hereby designates the following person as a cognizant official, or duly authorized representative, for signing reports, etc., including Discharge Monitoring Reports (DMR) required by the permit, and other information requested by the Director:

NAME (first, last)

TITLE TELEPHONE

Please print or type in the unshaded areas only.

EPA I.D. Number *(copy from Item 1 of Form 1)*

Form Approved.
OMB No. 2040-0086.
Approval expires 5-1-92

Form **2C** NPDES

U.S. ENVIRONMENTAL PROTECTION AGENCY

APPLICATION FOR PERMIT TO DISCHARGE WASTEWATER
EXISTING MANUFACTURING, COMMERCIAL, MINING AND SILVICULTURAL OPERATIONS
Consolidated Permits Program

I. Outfall Location

For each outfall, list the latitude and longitude of its lodcation to the nearest 15 seconds and the name of the receiving water.

Outfall Number *(list)*	Latitude			Longitude			Receiving Water *(name)*
	Deg	Min	Sec	Deg	Min	Sec	
001	*33*	*41*	*0*	*94*	*25*	*30*	*French Creek*
002	*33*	*41*	*0*	*94*	*25*	*30*	*French Creek*
003	*33*	*41*	*10*	*94*	*25*	*30*	*French Creek*
003A	*33*	*41*	*16*	*94*	*25*	*14*	*French Creek*
SW-1	*33*	*40*	*30*	*94*	*24*	*50*	*French Branch*
SW-2	*33*	*41*	*05*	*94*	*24*	*13*	*UT to Sterling Branch*

II. Flows, Sources of Pollution, and Treatment Technologies

A. Attach a line drawing showing the water flow through the facility. Indicate sources of intake water, operations contributing wastewater to the effluent, and treatment units labeled to correspond to the more detailed descriptions in Item B. Construct a water balance on the line drawing by showing average flows between intakes, operations, treatment units, and outfalls. If a water balance cannot be determined *(e.g., for certain mining activities)*, provide a pictorial description of the nature and amount of any sources of water and any collection or treatment measures.

B. For each outfall, provide a description of (1) all operations contributing wastewater to the effluent, including process wastewater, sanitary wastewater, cooling water, and stormwater runoff; (2) the average flow contributed by each operation; and (3) the treatment received by the wastewater. Continue on additional sheets if necessary.

1. Outfall No. (list)	2. OPERATION(S) CONTRIBUTING FLOW		3. TREATMENT		
	a. OPERATION *(list)*	b. AVERAGE FLOW	a. DESCRIPTION	b. LIST CODES FROM TABLE 2C-1	
001	*Active Quarry Dewatering*	*Variable*	*Settling Pond*	*1-U*	
	Stormwater Runoff	*Variable*	*Settling Pond*	*1-U*	
	Fishing Lake	*Variable*	*Settling Pond*	*1-U*	
002	*Stormwater Runoff*	*Variable*	*Settling Pond*	*1-U*	
003	*Coal Processing Area*	*Variable*	*Settling Pond*	*1-U*	
	Truck Washout Water	*Variable*	*Settling Pond*	*1-U*	
	Sanitary Wastewater	*Variable*	*Settling Pond*	*1-U*	
	Stormwater Runoff	*Variable*	*Settling Pond*	*1-U*	
	Non-Contact Cooling Water	*Variable*	*Settling Pond*	*1-U*	
	Process Area Washdown Water	*Variable*	*Settling Pond*	*1-U*	
	Chalk Dryer Scrubber	*Variable*	*Settling Pond*	*1-U*	
003A	*CKD Landfill Leachate and Runoff*	*Variable*	*Settling Pond*	*1-U*	
SW-1	*Stormwater Runoff*	*Variable*	*None*		
SW-2	*Stormwater Runoff*	*Variable*	*None*		

OFFICIAL USE ONLY ***(effluent guidelines sub-categories)***

CONTINUED FROM THE FRONT

C. Except for storm runoff, leaks, or spills, are any of the discharges described in Items II-A or B intermittent or seasonal?

☐ **YES** *(complete the following table)* ☒ **NO** *(go to Section III)*

1. OUTFALL NUMBER (list)	2. OPERATION(s) CONTRIBUTING FLOW (list)	3. FREQUENCY		4. FLOW				
		a. DAYS PER WEEK (specify average)	b. MONTHS PER YEAR (specify average)	a. FLOW RATE (in mgd)		b. TOTAL VOLUME (specify with units		c. DURATION (in days)
				1. LONG TERM AVERAGE	2. MAXIMUM DAILY	1. LONG TERM AVERAGE	2. MAXIMUM DAILY	

III. PRODUCTION

A. Does an effluent guideline limitation promulgated by EPA under Section 304 of the Clean Water Act apply to your facility?

☒ **YES** *(complete Item III-B)* ☐ **NO** *(go to Section IV)*

B. Are the limitations in the applicable effluent guideline expressed in terms of production *(or other measure of operation)*?

☐ **YES** *(complete Item III-C)* ☒ **NO** *(go to Section IV)*

C. If you answered "yes" to Item III-B, list the quantity which represents an actual measurement of your level of production, expressed in the terms and units used in the applicable effluent guideline, and indicate the affected outfalls.

1. AVERAGE DAILY PRODUCTION			2. AFFECTED OUTFALLS
a. QUANTITY PER DAY	b. UNITS OF MEASURE	c. OPERATION, PRODUCT, MATERIAL, ETC. (specify)	(list outfall numbers)

IV. IMPROVEMENTS

A. Are you now required by any Federal, State, or local authority to meet any implementation schedule for the construction, upgrading, or operation of wastewater treatment equipment or practices or any other environmental programs which may affect the discharges described in this application? This includes, but is not limited to, permit conditions, administrative or enforcement orders, enforcement compliance schedule letters, stipulations, court orders, and grant or loan conditions.

☐ **YES** *(complete the following table)* ☒ **NO** *(go to Item IV-B)*

1. IDENTIFICATION OF CONDITION, AGREEMENT, ETC.	2. AFFECTED OUTFALLS		3. BRIEF DESCRIPTION OF PROJECT	4. FINAL COMPLIANCE DATE	
	a. No	b. SOURCE OF DISCHARGE		a. REQUIRED	b. PROJECTED

B. OPTIONAL: You may attach additional sheets describing any additional water pollution control programs *(or other environmental projects which may affect your discharges)* you now have underway or which you plan. Indicate whether each program is now underway or planned, and indicate your actual or planned schedules for construction.

☐ **MARK "X" IF DESCRIPTION OF ADDITIONAL CONTROL PROGRAM IS ATTACHED**

EPA ID Number *(Copy from Item 1 of Form 1)*

CONTINUED FROM PAGE 2

V. INTAKE AND EFFLUENT CHARACTERISTICS

A, B, & C: See instructions before proceeding - Complete one set of tables for each outfall - Annotate the outfall number in the space provided. **NOTE:** Tables V-A, V-B, and V-C are included on separate sheets numbered V-1 through V-9.

D: Use the space below to list any of the pollutants listed in Tables 2c-3 of the instructions, which you know or have reason to believe is discharged or may be discharged from any outfall. For every pollutant you list, briefly describe the reasons you believe it to be present and report any analytical data in your possession.

1. POLLUTANT	2. SOURCE	1. POLLUTANT	2. SOURCE
None			

VI. POTENTIAL DISCHARGES NOT COVERED BY ANALYSIS

Is any pollutant listed in Item V-C a substance or a component of a substance which you currently use or manufacture as an intermediate or final product or byproduct?

☒ **YES** *(list all such pollutants below)* ☐ **NO** *(go to Item VI-B)*

Ash Grove uses Hazardous Waste-Derived Fuel (HWDF) as supplemental fuel in the cement kilns. At any given time, any of the components from Item V.C. may be present as a component of the HWDF.

CONTINUED FROM THE FRONT

VII. BIOLOGICAL TOXICITY TESTING DATA

Do you have any knowledge or reason to believe that any biological test for acute or chronic toxicity has been made on any of your discharges or on a receiving water in relation to your discharge within the last 3 years?

☒ **YES** *(identify the test(s) and describe their purpose below)* ☐ **NO** *(go to Section VIII)*

Biological testing has been conducted at the facility.

Toxicity testing was carried out the 2nd, 3rd, and 4th quarters of 1996 and the 1st quarter of 1997. Tests were on Ceriodaphnia dubic and fathead minnows. The results indicated no letal or sublethal toxicity at the low flow dilution. Ash Grove Cement received a letter from ADEQ on 5/7/97 releasing them from the quarterly biomonitoring requirement.

VIII. CONTRACT ANALYSIS INFORMATION

Were any of the analyses reported in Item V performed by a contract laboratory or consulting firm?

☒ **YES** *(list the name, address, and telephone number of, and pollutants analyzed by, each such laboratory or firm below)* ☐ **NO** *(go to Section IX)*

A. NAME	B. ADDRESS	C. TELEPHONE *(area code & no.)*	D. POLLUTANTS ANALYZED *(list)*
Arkansas Analytical, Inc.	11701 Interstate 30 Building 1, Suite 115 Little Rock, AR 72209-7037	***(501) 455-3233***	***All***
		( )	
		( )	
		( )	
		( )	
		( )	
		( )	
		( )	
		( )	
		( )	
		( )	
		( )	
		( )	

IX. CERTIFICATION

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.

A. NAME & OFFICIAL TITLE *(type or print)*	B. PHONE NO. *(area code & no.)*
Dan Peterson/Plant Manager	***(870) 542-6217 ext. 3270***
C. SIGNATURE	D. DATE SIGNED 3/28/06

Please print or type in the unshaded areas	EPA ID Number *(copy from item I of Form 1)*	Form Approved. OMB No. 2040-0086 Approval expires 5-31-92

Form **2F** NPDES

United States Environmental Protection Agency
Washington, DC 20460

Application for Permit to Discharge Storm Water Discharges Associated with Industrial Activity

Paperwork Reduction Act Notice

Public reporting burden for this application is estimated to average 28.6 hours per application, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate, any other aspect of this collection of information or suggestions for improving this form, including suggestions which may increase or reduce this burden to: Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., SW, Washington, DC 20460, or Director, Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.

I. Outfall Location

For each outfall, list the latitude and longitude of its location to the nearest 15 seconds and the name of the receiving water.

A. Outfall Number *(list)*	B. Latitude			C. Longitude			D. Receiving Water *(name)*
001	***33***	***41***	***0***	***94***	***25***	***30***	***French Creek***
002	***33***	***41***	***30***	***94***	***25***	***30***	***French Creek***
003	***33***	***41***	***10***	***94***	***25***	***30***	***French Creek***
003A	***33***	***41***	***16***	***94***	***25***	***14***	***French Creek***
SW-1	***33***	***40***	***30***	***94***	***24***	***50***	***French Branch***
SW-2	***33***	***41***	***05***	***94***	***24***	***13***	***UT to Sterling Branch***

II. Improvements

A. Are you now required by any Federal, State, or local authority to meet any implementation schedule for the construction, upgrading or operation of wastewater treatment equipment or practices or any other environmental programs which may affect the discharges described in this application? This includes, but is not limited to, permit conditions, administrative or enforcement orders, enforcement compliance schedule letters, stipulations, court orders, and grant or loan conditions.

1. Identification of Conditions, Agreements, Etc.	2. Affected Outfalls		3. Brief Description of Project	4. Final Compliance Date	
	number	source of discharge		a. req.	b. proj.
N/A					

B. You may attach additional sheets describing any additional water pollution (or other environmental projects which may affect your discharges) you now have under way or which you plan. Indicate whether each program is now under way or planned, and idicate your actual or planned schedules for construction.

III. Site Drainage Map

Attach a site map showing topography (or indicating the outline of drainage areas served by the outfall(s) covered in the application if a topographic map is unavailable) depicting the facility including: each of its intake and discharge structures; the drainage area of each storm water outfall; paved areas and buildings within the drainage area of each storm water outfall, each known past or present areas used for outdoor storage or disposal of significant materials, each existing structure control measure to reduce pollutants in storm water runoff, materials loading and access areas, areas where pesticides, herbicides, soil conditioners and fertilizers are applied; each of its hazardous waste treatment, storage or disposal units (including each are not required to have a RCRA permit which is used for accumulating hazardous waste under 40 CFR 262.34); each well where fluids from the facility are injected underground; springs, and other surface water bodies which receive storm water discharges from the facility.

 Continued on Page 2

Continued from the Front

IV. Narrative Description of Pollutant Sources

A. For each outfall, provide an estimate of the area (include units) of impervious surfaces (including paved areas and building roofs) drained to the outfall, and an estimate of the total surface area drained by the outfall.

Outfall Number	Area of Impervious Surface (provide units)	Total Area Drained (provide units)	Outfall Number	Area of Impervious Surface (provide units)	Total Area Drained (provide units)
001	0	146.1	003A	0	48
002	0	8.2	SW-1	0	139
003	30	516.4	SW-2	0	45

B. Provide a narrative description of significant materials that are currently or in the past three years have been treated, stored or disposed in a manner to allow exposure to storm water; method of treatment, storage, or disposal; past and present materials management practices employed to minimize contact by these materials with storm water runoff; materials loading and access areas; and the location, manner, and frequency in which pesticides, herbicides, soil conditioners, and fertilizers are applied.

Materials stored on site consist of coal, cement, clinker, gypsum, iron ore, sand, and rock. Gypsum is stored under roof thus preventing exposure to stormwater. Runoff from the coal storage area is routed to sedimentation ponds. Hazardous waste derived fuel (HWDF) is stored in containers in bulk strorage areas. The HWDF bulk storage area is designed to prevent run-on and runoff.

C. For each outfall, provide the location and a description of existing structural and nonstructural control measures to reduce pollutants in storm water runoff; and a description of the treatment the storm water receives, including the schedule and type of maintenance for control and treatment measures and the ultimate disposal of any solid or fluid wastes other than by discharge.

Outfall Number	Treatment	List Codes from Table 2F-1
001	Sedimentation Pond	1-U
002	Sedimentation Pond	1-U
003	Sedimentation Pond	1-U
003A	Sedimentatioin Pond	1-U
SW-1	None	
SW-2	None	

V. Non Stormwater Discharges

A. I certify under penalty of law that the outfall(s) covered by this application have been tested or evaluated for the presence of nonstormwater discharges, and that all nonstormwater discharges from these outfall(s) are identified in either an accompanying Form 2C or Form 2E application for the outfall.

Name of Official Title *(type or print)*	Signature	Date Signed
Dan Peterson, Plant Manager	See Next Page	

B. provide a description of the method used, the date of any testing, and the onsite drainage points that were directly observed during a test.

Dry weather observations

VI. Significant Leaks or Spills

Provide existing information regarding the history of significant leaks or spills of toxic or hazardous pollutants at the facility in the last three years, including the approximate date and location of the spill or leak, and the type and amount of material released.

 Continued on Page 3

Continued from the Front

IV. Narrative Description of Pollutant Sources

A. For each outfall, provide an estimate of the area (include units) of impervious surfaces (including paved areas and building roofs) drained to the outfall, and an estimate of the total surface area drained by the outfall.

Outfall Number	Area of Impervious Surface (provide units)	Total Area Drained (provide units)	Outfall Number	Area of Impervious Surface (provide units)	Total Area Drained (provide units)
001	0	146.1	003A	0	48
002	0	8.2	SW-1	0	139
003	30	516.4			

B. Provide a narrative description of significant materials that are currently or in the past three years have been treated, stored or disposed in a manner to allow exposure to storm water; method of treatment, storage, or disposal; past and present materials management practices employed to minimize contact by these materials with storm water runoff; materials loading and access areas; and the location, manner, and frequency in which pesticides, herbicides, soil conditioners, and fertilizers are applied.

Materials stored on site consist of coal, cement, clinker, gypsum, iron ore, sand, and rock. Gypsum is stored under roof thus preventing exposure to stormwater. Runoff from the coal storage area is routed to sedimentation ponds. Hazardous waste derived fuel (HWDF) is stored in containers in bulk storage areas. The HWDF bulk storage area is designed to prevent run-on and runoff.

C. For each outfall, provide the location and a description of existing structural and nonstructural control measures to reduce pollutants in storm water runoff; and a description of the treatment the storm water receives, including the schedule and type of maintenance for control and treatment measures and the ultimate disposal of any solid or fluid wastes other than by discharge.

Outfall Number	Treatment	List Codes from Table 2F-1
001	Sedimentation Pond	1-U
002	Sedimentation Pond	1-U
003	Sedimentation Pond	1-U
003A	Sedimentatioin Pond	1-U
SW-1	None	

V. Non Stormwater Discharges

A. I certify under penalty of law that the outfall(s) covered by this application have been tested or evaluated for the presence of nonstormwater discharges, and that all nonstormwater discharges from these outfall(s) are identified in either an accompanying Form 2C or Form 2E application for the outfall.

Name of Official Title (type or print)	Signature	Date Signed
Dan Peterson, Plant Manager		03/30/06

B. provide a description of the method used, the date of any testing, and the onsite drainage points that were directly observed during a test.

Dry weather observations

VI. Significant Leaks or Spills

Provide existing information regarding the history of significant leaks or spills of toxic or hazardous pollutants at the facility in the last three years, including the approximate date and location of the spill or leak, and the type and amount of material released.

 Continued on Page 3

Please see attached sheet

Continued on Page 3

Continued from Page 2

EPA ID Number *(copy from Item I of Form 1)*

VII. Discharge Information

A,B,C, & D: See instruction before proceeding. Complete one set of tables for each outfall. Annotate the outfall number in the space provided. Tables Vii-A, VII-B, and VII-C are included on separate sheets numbered VII-1 and VII-2.

E. Potential discharges not covered by analysis - is any toxic pollutant listed in table 2F-2, 2F-3, or 2F-4, a substance or a component of a substance which you currently use or manufacture as an intermediate or final product or byproduct?

☐ Yes *(list all such pollutants below)* ☐ No *(go to Section IX)*

Analytical information is provided on Form 2C and PPS form for Outfalls 001, 002 and 003. There were no samples for outfall 003A.

VIII. Biological Toxicity Testing Data

Do you have any knowledge or reason to believe that any biological test for acute or chronic toxicity has been made on any of your discharges or on a receiving water in relation to your discharge within the last 3 years?

☒ Yes *(list all such pollutants below)* ☐ No *(go to Section IX)*

Toxicity testing was carried out the 2nd, 3rd, and 4th quarters of 1996 and the 1st quarter of 1997. Tests were on Ceriodaphnia dubic and fathead minnows. The results indicated no letal or sublethal toxicity at the low flow dilution. Ash Grove Cement received a letter from ADEQ on 5/7/97 releasing them from the quarterly biomonitoring requirement.

IX. Contact analysis Information

Were any of the analysis reported in item VII performed by a contact laboratory or consulting firm?

☒ Yes *(list the name, address, and telephone number of, and pollutants analyzed by, each such laboratory or firm below)* ☐ No *(go to Section X)*

A. Name	B. Address	C. Area Code & Phone No.	D. Pollutants Analyzed

X. Certification

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.

A. Name & Official Title *(type or print)*	B. Area Code and Phone No.
Dan Peterson, Plant Manager	***(870) 542-6217 Ext 3270***
C. Signature	D. Date Signed
	3/28/06

EPA ID Number *(copy from Item I of Form 1)*

Form Approved. OMB No. 2040-0086
Approval expires 5-31-92

VII. Discharge Information *(Continued from page 3 of Form 2F)*

Part A - You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.

Pollutant And CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number Of Storm Events Sampled	Sources of Pollutants
	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite		
Oil & Grease		N/A				
Biological Oxygen Demand (BOD5)						
Chemical Oxygen Demand (COD)						
Total Suspended Solids (TSS)						
Total Organic Nitrogen						
Total Phosphorus						
pH	Minimum	Maximum	Minimum	Maximum		

Part B - List each pollutant that is limited in an effluent guideline which the facility is subject to or any pollutant listed in the facility's NPDES permit for its process wastewater (if the facility is operating under an existing NPDES permit). Complete one table for each outfall. See the instructions for additional details and requirements.

Pollutant And CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number Of Storm Events Sampled	Sources of Pollutants
	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite		

Continue on Reverse

Continued from the Front

Part C - List each pollutant shown in Tables 2F-2, 2F-3, and 2F-4 that you know or have reason to believe is present. See the instructions for additional details and requirements. Complete one table for each outfall.

Pollutant And CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number Of Storm Events Sampled	Sources of Pollutants
	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite		

Part D - Provide data for the storm event(s) which resulted in the maximum values for the flow weighted composite sample.

1. Date of Storm Event	2. Duration of Storm Event *(in minutes)*	3. Total rainfall during storm event *(in inches)*	4. Number of hours between beginning of storm measured and end of previous measurable rain event	5. Total flow from rain event *(gallons or specify units)*

7. Provide a description of the method of flow measurement or estimate.

Form 2F VI - Significant Leaks or spils

Approximate dates or Periods of Waste Spills	Material Type and Amount Spilled	Location of Spill	Description of Response Actions (Federal, State, Local, or Private	Incident Number
November 15, 2003	Less than 100 gal HWDF	During a transfer operation, less than 100 gallons were released through the magnetic pressure relief hatch from a 25,000 gal tank in the containment area. Less than 1 gallon was released outside of the containment area onto the concrete apron	All liquid was pumped back into the tank. The area ws cleaned with sovent and then steam cleaned. All cleaning materials generated were put into 6-gallon buckets and burned in the facility's permitted cement kiln.	70542
May 3, 2003	Off-road diesel 1500 gallons	The diesel was spill outside of the containment area of the 'old quarry' above ground storage tank. High pressure from the off loading operation to the tank forced the hose out of the tank and discharged fuel against the inside wall of the building where the tank resides. The building protects the above ground tank containment from rainwater, but does not provide containment. The fuel flowed out of the building down a ditch and into a second major plant ditch where it was stopped. It covered the floor of the concrete building that houses the fuel tank and an area of about 100 sqyare feet including the ditches that diverted its flow.	a contractor pumped the fuel out of the ditch and tank containment area.	643931
February 1, 2003	One quart HWDF	HWDF leaked from a blow down line onto the concrete thermal oxidizer pad at the LWDF storage facility	There was no release to soil or water outside the concrete suface of the thermal oxidizer pad. Employees cleaned up the material with absorbant and placed it into twoo 6-gallon pails and subsequently disposed of in Ash Grove's permitted cement kilns.	635673

Form 2F VI - Significant Leaks or spils

Approximate dates or Periods of Waste Spills	Material Type and Amount Spilled	Location of Spill	Description of Response Actions (Federal, State, Local, or Private	Incident Number
June 11, 2002	50 gallons HWDF	A pipe nipple inside the containment area brok off the transfer line. The spill was contained within the containment area.	The liquid was pumped into the north 30,000 gallon storage tank and the containment floor was steam cleaned;Spilled material was also cleaned up by using sand to absorb the liquid. The sand/HWDF mixture was shoveled into 6-gallon buckets and subsequently burned in the facility's permitted cement kilns. A contracor was used to further decontaminate the affected concrete surface.	609980
October 24, 2002	30 gallons of HWDF	Pipeline rupture in the HWDF containment area. Less than one-half pound of fuel escaped the facility through a small opening in the facilities run-on control system.	Water and foam fire suppression fluid, and less than 30-gallons of fuel that collected in the secondary containment system was pumped by an outside contractor.	NA