

Gage, Hannah

From: Amanda Gallagher <agallagher@gbmcassoc.com>
Sent: Wednesday, September 14, 2016 9:47 AM
To: Water Permit Application
Cc: Randy Evans
Subject: Anthony Forest Product Company - Urbana Sawmill
Attachments: ADEQ - Delegation of Responsible Official (9-8-16).pdf; Anthony Forest Products - Urbana Sawmill Change of Authorization Form.pdf

To Whom It May Concern:

On behalf of Anthony Forest Products – Urbana Sawmill, please find attached a completed Change of Authorization Form and Delegation of Responsible Official Letter. Please don't hesitate to contact me (501) 847-7077 or Randy Evans with Anthony Forest Products at (870) 962-3206 should you have any questions or need any additional information.

Thank you,

Amanda Gallagher, P.E.
GBMc & Associates
219 Brown Lane
Bryant, AR 72022
Phone: (501) 847-7077



• P. O. BOX 1877 • (870) 862-3414 • EL DORADO, AR 71731

AUBRA ANTHONY, JR.
Executive Vice President
Fax (870) 863-0809
E-mail: aanthony@anthonyforest.com

September 8, 2016

Tammera Harrelson
Chief, Legal Division
Arkansas Department of Environmental Quality
5301 Northshore Drive
North Little Rock, AR 72118-5317

Re: Delegation of Responsible Official
Anthony Forest Products – Urbana, AR
ADEQ AFIN: 70-00473


Ms. Harrelson:

Please find enclosed a signed and notarized confirmation of my delegation of Responsible Official duties to Mr. Derek Ratchford, Area Manager, Arkansas, and for the Urbana Sawmill.

If you have any questions or concerns regarding this information please do not hesitate to contact me.

Respectfully submitted,

Anthony Forest Products Company, LLC


Aubra Anthony, Jr.
Executive Vice President

Enclosure

DELEGATION OF AUTHORITY

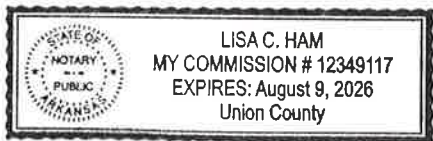
I, Aubra Anthony, Jr., Executive Vice President of Anthony Forest Products Company, LLC, hereby confirm my delegation to Derek Ratchford, Area Manager, at Anthony Forest Products - Urbana AR, the authority of Responsible Official, to sign permit submissions, routine reports, and other documents on behalf of Anthony Forest Products - Urbana AR, AFIN 70-00473, before the Arkansas Department of Environmental Quality.

Aubra Anthony Jr
Aubra Anthony, Jr.

Date: September 8, 2016

STATE OF ARKANSAS)
)
COUNTY OF UNION)

SUBSCRIBED AND SWORN to before me a Notary Public this 8th day of
September 2016.



Lisa C. Ham
Lisa C. Ham
Notary Public

Date: 9/8/16

**REQUEST FOR CHANGE OF AUTHORIZATION
(CERTIFICATION AND SIGNATORY REQUIREMENTS)**

AR0047384
ARG550398
NPDES Permit Number: ARR000977 Facility Name: Anthony Forest Products, LLC - Urbana Sawmill

- Type of Change: New Cognizant Official (or duly authorized representative) (sections 1 and 2)
(check one) New Responsible Official (complete section 2 only)
 Both (sections 1 and 2)
 Additional Cognizant Official (or duly authorized representative) (sections 1 and 2)

1. **NEW COGNIZANT OFFICIAL** (or duly authorized representative) (See 122.22(b); the individual, authorized by the ranking official in writing, as **having responsibility for the overall operation** of the regulated facility or activity responsibility, or having overall responsibility for environmental matters for the company.)

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

N/A

Signature of the Cognizant Official (Duly Authorized Representative)


Name (First Name, MI, Last Name) Typed or Printed

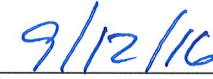
Mailing Address City, State, and Zip

Title ()
A/C Phone Fax
Email Address: _____

By signature below, the responsible official certifies that the above named **individual** is qualified to act as the duly authorized representative under the provisions of 40 CFR 122.22(b).

2. **RESPONSIBLE OFFICIAL** (**Note:** The responsible official is the person authorized to sign the permit application i/a/w 40 CFR 122.22(a). For a Corporation: it is the responsible corporate officer. Partnership or Sole Proprietorship: the general partner or proprietor. Municipality, State, Federal or other Public Agency: the principal executive officer ranking elected official.)



Signature of the Responsible Official 
Date

Derek Ratchford

Name (First Name, MI, Last Name) Typed or Printed

P.O. Box 724 Strong, AR 71765
Mailing Address City, State, and Zip

Plant Manager (870) 962-3206 (870) 962-3320
Title A/C Phone Fax
Email Address: dratchford@anthonyforest.com

Certification: I certify under penalty of law that this document and all attachments were prepared under my direct 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.

Will the Responsible Official also be the person signing submittals? Yes No