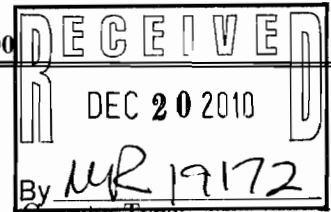


NOTICE OF INTENT (NOI)
FOR DISCHARGERS OF STORMWATER RUNOFF
ASSOCIATED WITH INDUSTRIAL ACTIVITY
AUTHORIZED UNDER NPDES GENERAL PERMIT ARR000000



Application Type: New Renewal Permit No. ARR00B007

I. PERMITTEE/OPERATOR INFORMATION

Permittee (Legal Name)*: Alliance Rubber Company
Permittee Mailing Address: P.O. Box 20950
Permittee City: Hot Springs
Permittee State: AR Zip: 71903
Permittee Telephone Number: 501.262.2700
Permittee Fax Number: 501.262.8192
Permittee E-mail Address: thamilton@alliance-rubber.com

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

* 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: Trevor Hamilton City: Hot Springs
Invoice Mailing Company: Alliance Rubber Company State: AR Zip: 71903
Invoice Mailing Address: P.O. Box 20950 Telephone: 501.262.8175

III. FACILITY INFORMATION

Facility Name
(if different from Permittee): Alliance Rubber Company
Facility Physical Address: 210 Carpenter Dam Road Contact Person: Trevor Hamilton
Facility County: Garland Contact Title: Safety/Training Coordinator
Facility City: Hot Springs Zip: 71903 Telephone Number: 501.262.8175
Directions to the Facility: Off MLKJ Blvd. Expressway to Carpenter Dam Rd. Fax Number: 501.262.8192
AFIN (if known): 26-00039 Email Address: thamilton@alliance-rubber.com

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

Mailing Address: P.O. Box 20950
City: Hot Springs State: AR Zip: 71970

Type of Business:	Manufacturing	Facility SIC Code(s):	3061	NAICS Code (s):	326291	Industrial Sector:	***
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*** 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:

Indoor manufacturing of rubber bands using natural and synthetic materials

List of Chemicals Used in the Process: Raw materials for this operation consist of natural and synthetic rubber, accelerators, retardants, curing agents, elemental sulfur, acids, talc, various waxes, bonding preventatives, and limestone.

Facility Latitude: * 34 degrees 28 minutes 12.6582 seconds

Facility Longitude: * -93 degrees 1 minutes 14.466 seconds

* Facility coordinates should be taken at the entrance to the facility.

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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 28 minutes 2.8668 seconds

Outfall Longitude: -93 degrees 1 minutes 14.9586 seconds

Receiving Stream: _____

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: _____

VI. CONSULTANT INFORMATION (If applicable)

Consultant Company: Felton Environmental Services, Inc.

Consultant Contact Name: James Felton

Consultant Email Address: feltonenv@gmail.com

Consultant Address: 679 Whippoorwill Rd. City: Story State: AR Zip: 71970

Consultant Phone Number: 870.867.3630 Consultant Fax Number: _____

**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.)

JA

"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."

JA

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

JA

"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."

JA

"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: BRIAN WILCOX Title: OPERATIONS MGR. - VICE PRESIDENT
Responsible Official Signature: Brian Wilcox Date: 12-15-2010

VIII. COGNIZANT OFFICIAL

Cognizant Official Printed Name: TREVOR HAMILTON Title: SAFETY/TRAINING COORDINATOR
Cognizant Official Signature: Trevor Hamilton Telephone: 501-262-8175
Cognizant Official E-mail: thamilton@alliance-rubber.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)	<input checked="" type="checkbox"/>	<input type="checkbox"/>



ARKANSAS
Department of Environmental Quality

**NOTICE OF INTENT (NOI)
FOR DISCHARGES OF STORMWATER ASSOCIATED WITH INDUSTRIAL ACTIVITY
(EXCEPT FROM CONSTRUCTION ACTIVITY)
AUTHORIZED UNDER NPDES GENERAL PERMIT ARR000000**

The enclosed form may be used to obtain coverage under NPDES general permit ARR000000 for discharges of stormwater associated with industrial activity (except from construction activity). **Only** a copy of the attached authorized Notice of Intent form will be accepted by this Department.

DIRECTIONS:

Industrial Stormwater Permit:

Anyone seeking coverage under the ARR000000 General Permit must perform the following:

- complete all sections of the Notice of Intent.
- Sign the Certification in Section VII.
- submit the following to the Department:

	Complete NOI	SWPPP	Site Map	Initial Permit Fee
New Applicant	Yes	Yes	Yes	Yes*
Renewal	Yes	No (but must update SWPPP)	Yes	No

* Required by APCEC Regulation No. 9. Subsequent annual fees of \$200.00 per year will be billed by the Department. Failure to remit the required permit fee may be grounds for the Director to deny coverage under this general permit, and to require the owner or operator to apply for an individual NPDES permit.

No Exposure Exclusions:

A condition of No Exposure exists at an industrial facility when all industrial materials and activities are protected from exposure to rain, snow, snowmelt, and/or runoff. Anyone seeking a No Exposure Exclusion must complete the No Exposure Certification Form, which can be found at the following website: http://www.adeq.state.ar.us/water/branch_permits/general_permits/stormwater/industrial.htm.

Return the completed forms to:

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

Or by or by electronic mail (Complete documents (NOI and/or SWPPP) must be submitted in Adobe Acrobat format (.pdf) to: Water-permit-application@adeq.state.ar.us **Notice of Coverage (NOC) will not be issued until payment has been received by ADEQ.**

ADEQ

ARKANSAS
Department of Environmental Quality

NOTE: DO NOT LEAVE BLANK SPACES IN THE NOTICE OF INTENT. IF ANY QUESTION DOES NOT APPLY, MARK "N/A" IN THE SPACE PROVIDED.

For additional information please contact:

General Permits Section
Ph.: (501) 682-0623
Fax: (501) 682-0910
Email: adeq@state.ar.us

Additional Instructions:

I. How to Determine Latitude and Longitude:

If a physical address is known go to www.teraserver-usa.com and proceed with the following steps:

1. Select Advanced Find
2. Select Address
3. Input address
4. Click on Aerial Photo
5. Click on the Info link at the top of the page
6. Note the Latitude and Longitude are in Decimal Coordinates.
7. Go to www.geology.enr.state.nc.us/gis/latlon.html to convert coordinates to Degrees, Minutes, and Seconds.

NOTE: If a physical address does not exist you may find the coordinates in the Legal Description of the property.

II. 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, treasurer

Partnership, a general partner

Sole proprietorship: the proprietor

Municipal, state, federal, or other public facility: principal executive officer, or ranking elected official

Industrial Stormwater Renewal Route Sheet

Facility Name: <u>Alliance Rubber Company</u>			
Permit Number: <u>ARR003007</u>		AFIN NO. <u>26-00039</u>	
No Exposure Exclusion: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Monitoring Category: <u> </u>	Industrial Sector: <u>1</u>
Stream Segment: <u>2F</u>		Nearest Receiving Water: <u>Occhite River</u>	HUC: <u>8040101</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: <ul style="list-style-type: none"> <input type="checkbox"/> Check Permittee Name on SOS (if applicable) <input type="checkbox"/> Check SIC Code <input 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 <u>MT</u> submitted Dates not submitted:	<u>MR</u>	<u>12/29/10</u>
AA (max 5 business days unless AFIN Change is Required*)	Check the following into PDS: <ul style="list-style-type: none"> <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 	<u>MR</u>	<u>1/12/11</u>
Engineer (2 days)	Merge Permit Authorization Letter	<u>MR</u>	<u>1/12/11</u>
Engineer Supervisor (1-day)	Review all the documents. Make recommendation.	<u>MR</u>	<u>1/18/11</u>
Assistant Chief (1-day)	Review the documents and sign the authorization letter or the permit.		
Sect.	<ul style="list-style-type: none"> <input type="checkbox"/> Scan complete packet <input type="checkbox"/> E-mail to everyone cc on the letter <input type="checkbox"/> Mail Letter 	<u>MR</u>	<u>1/25/11</u>

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

Comments:

1/19/11