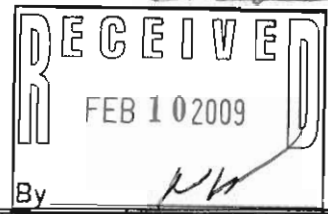


Arkansas Department of Environmental Quality
Permits Branch, Water Division
5301 Northshore Drive
North Little Rock, AR 72118
(501) 682-0623



**NOTICE OF INTENT
FOR DISCHARGERS OF STORMWATER RUNOFF
ASSOCIATED WITH LARGE CONSTRUCTION ACTIVITY
AUTHORIZED UNDER NPDES GENERAL PERMIT ARR150000**

Application Type: New Renewal (Permit Tracking Number ARR())

I. PERMITTEE/OPERATOR INFORMATION

2462 -NAW 2/10/09

Permittee (Legal Name): Ash Grove Cement Company
Permittee Mailing Address: 4457 Highway 108
Permittee City: Foreman
Permittee State: AR Zip: 71836
Permittee Telephone Number: 870-542-6217
Permittee Fax Number: 870-542-6227
Permittee E-mail Address: _____

Operator Type:
 STATE PARTNERSHIP
 FEDERAL CORPORATION*
 SOLE PROPRIETORSHIP
 PUBLIC OTHER

*State of Incorporation: _____

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

II. INVOICE MAILING INFORMATION

Invoice Contact Person: Keith Byerly City: Foreman
Invoice Mailing Company: Ash Grove Cement Company State: AR Zip: 71836
Invoice Mailing Address: 4457 Highway 108 Telephone: 870-542-6217

III. FACILITY/PROJECT CONSTRUCTION SITE INFORMATION

1 acre = 43,560 square feet

Project Name: New Kiln construction Contact Person: Keith Byerly
Project County: Little River Project Physical Address: 4457 highway 108
Directions to the Project: Southwest on Highway 108 Project City: Foreman Zip: 71836
From foreman, Arkansas Telephone Number: 870-542-6217
Project Estimated Start Date: October 2007 Total amount of soil to be disturbed (estimate to nearest 1/2 acre): 104
Project Estimated End Date: December 2009 Total Project Acreage (Estimate to nearest 1/2 acre): 104
Project Latitude: 33 degrees 41 minutes 40 seconds
Project Longitude: 94 degrees 25 minutes 10 seconds
Type of Project: Subdivision School Other: Industrial Facility
Is the Project part of a larger common plan of development or sale? Yes No X
Linear Project Starting Coordinates (if applicable): Linear Project Ending Coordinates (if applicable):
Latitude: ____° ____' ____" Longitude: ____° ____' ____" Latitude: ____° ____' ____" Longitude: ____° ____' ____"

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IV. DISCHARGE INFORMATION

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

An unnamed tributary of French Creek, thence to French Creek, thence to Walnut Bayou, thence to Segment 1B of Red River

Choose Your Ultimate Receiving Stream: Red River Ouachita River Arkansas River
White River St. Francis River Mississippi River

Name of Receiving Municipal Storm Sewer System (If applicable): _____

Is the stormwater discharge from the construction site likely to adversely affect a listed endangered or threatened species or its critical habitat? Yes No

V. FACILITY/SITE PERMIT INFORMATION

NPDES Individual Permit Number (If Applicable): AR0042846

NPDES General Permit Number (If Applicable): ARG

NPDES General Industrial Stormwater Permit Number (If Applicable): ARR00

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

VI. OTHER INFORMATION:

Location of SWPPP on the Construction Site: Keith Byerly's office
Consultant Company: Schreiber & Yonley Associates
Consultant Contact Name: Nancy J. Morgan, P.E.
Consultant Email Address: Nancym@syaeng.com
Consultant Address: 16252 Westwoods Business Park Drive City: Ellisville State: MO Zip: 63021
Consultant Phone Number: 636-256-7200 Consultant Fax Number: 636-256-7202

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VII. CERTIFICATION OF OPERATOR

S (Initial) "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."

LS (Initial) "I certify that as a whole the stormwater discharge(s), and the construction and implementation of Best Management Practices (BMP's) to control stormwater runoff, are not likely to adversely affect species of critical habitat for a listed species."

LS (Initial) "I certify that a stormwater pollution prevention plan has been prepared for this facility in accordance with Part II.A of this permit, which provides for, or will provide for, compliance with local sediment and erosion plans, local stormwater permits or stormwater management plans, in accordance with Part II.A.4.c of this permit."

S (Initial) "I certify that the cognizant official designated in Part VIII 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 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 knowing violations."

Responsible Official Printed Name: Dan Peterson

Title: Plant Manager

Responsible Official Signature: [Signature]

Date: 1/30/09

VIII. COGNIZANT OFFICIAL

Cognizant Official Printed Name: Dan Peterson

Title: Plant Manager

Cognizant Official Signature: [Signature]

Telephone: 870 542 6217

IX. PERMIT REQUIREMENT VERIFICATION

Please check the following to verify completion of permit requirements.

	Yes	No*
Submittal of Complete NOI?	X	<input type="checkbox"/>
Submittal of Required Permit Fee?		<input type="checkbox"/>
Check Number: _____		
Complete SWPPP?	X	<input type="checkbox"/>

* If you answer No to any of the above questions, then a permit can not be issued!