Recertification Notice of Intent (NOI) NPDES General Permit for Water Treatment Facilities ARG640000

You must complete and certify this Recertification Notice of Intent (NOI) form and return it to the Department, with an updated disclosure statement, in order to continue permit coverage under the General Permit ARG250000. You must submit this form no later than October 31, 2017. Please keep a copy of this form for your records once completed and signed.

| Permit | Tracking | Number: | ARG250012 |
|--------|----------|---------|-----------|
|--------|----------|---------|-----------|

AFIN: 47-00909

Permittee Name: Atlas Tube (Arkansas), Inc.

485 81 70 g

If any changes need to be made to the information shown below, please update the new information in the corrections section below and/or attach documentation.

| and/or attach documentation. | Current Information in ADEQ's Database | Corrections, If Needed |
|------------------------------|--|---------------------------|
| Facility Physical Address: | Atlas Tube-Blytheville Plant | |
| | 5039 N. County Road 1015 | |
| | Armorel, AR 72310 | |
| Facility Mailing Address: | PO Box 243 | |
| | Armorel, AR 72310 | |
| Responsible Official: | Michael McNamara | |
| Responsible Official Email: | Mr. McNamara | |
| Cognizant Official: | Ray Falk | Mike Shannon |
| Cognizant Official Email: | ray.falk@jmcsteel.com | mike.shannon@zekelman.com |
| Contact Person: | ARG250012 | |
| Phone Number: | 870-838-2002x227 | |

| Have you attached an updated disc statement? | closure |
|--|---------|
|--|---------|

Yes or No Yes

2. Is the invoice address the same as the mailing address above?

Yes or No Yes If "No" please provide invoice address

Outfall Currently Listed in ADEO's Database*

| Outfall Number | Latitude | | Longitude | | | |
|----------------|----------|-----|-----------|------|-----|-----|
| 004 | 35° | 56' | 10" | -89° | 44' | 49" |
| | 0 | , | 17 | 0 | , | 99 |
| | 0 | 1 | >> | 0 | , | 33 |

^{*} If a change to the above outfall is needed, please be sure to provide the outfall number, coordinates, and an explanation of the required changes.

Additional Comments: Facility is currently 30% operational but there are plans to increase production levels.

"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 certify that I have read and will comply with all the requirements of the NPDES General Permit ARG640000 for Water Treatment Facilities.

| Facilities. | | | |
|--------------------------------|-----------------|-----------------------------|-------------------------------|
| Responsible Official Name: | Mickey McNamara | Responsible Official Title: | EVP Zekelman Industries, Lega |
| Responsible Official Signatu | e MDM4 | Date: | June 9/2017 |
| Responsible Official orginatur | c. ////// | | |

Return the NOI form to the address below or send it electronically to: water.permit.application@adeq.state.ar.us

Office of Water Quality, General Permits Section Arkansas Department of Environmental Quality 5301 Northshore Drive North Little Rock, AR 72118-5317