## C3964

## Recertification Notice of Intent (NOI) NPDES General Permit for Aggregate Facilities ARG500000

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 ARG500000. You must submit this form <u>no later than January 31, 2016.</u> Please keep a copy of this form for your records once completed and signed.

Permit Tracking Number: ARG500008

AFIN: 03-00214

Permittee Name: North Central Arkansas Quarry, Inc.

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.

	Current Information in ADEQ's Database	Corrections, If Needed
Facility Physical Address:	North Central Arkansas Quarry, Inc.	
	311 Baxter County Road 603	
	Mountain Home, AR 72653	
Facility Mailing Address:	P.O. Box 1570	
	Mountain Home, AR 72654	
Responsible Official:		2 20
Responsible Official Email:		
Cognizant Official:	Mike Dilbeck	
Cognizant Official Email:	mtnhomeconcrete@yahoo.com	
Contact Person:	Mike Dilbeck	
Phone Number:	870-424-3839	*

1. Have you attached an updated disclosure statement?

Additional Comments:

Yes or No

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



If "No" please provide invoice address



## Outfall Currently Listed in ADEQ's Database\*

Outfall Number	Latitude		Longitude			
001	36°	17'	7.5"	-92°	26'	8"
002	36°	16'	56.4"	-92°	26'	7.5"

<sup>\*</sup> 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.

"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 ARG500000 for Aggregate Facilities.

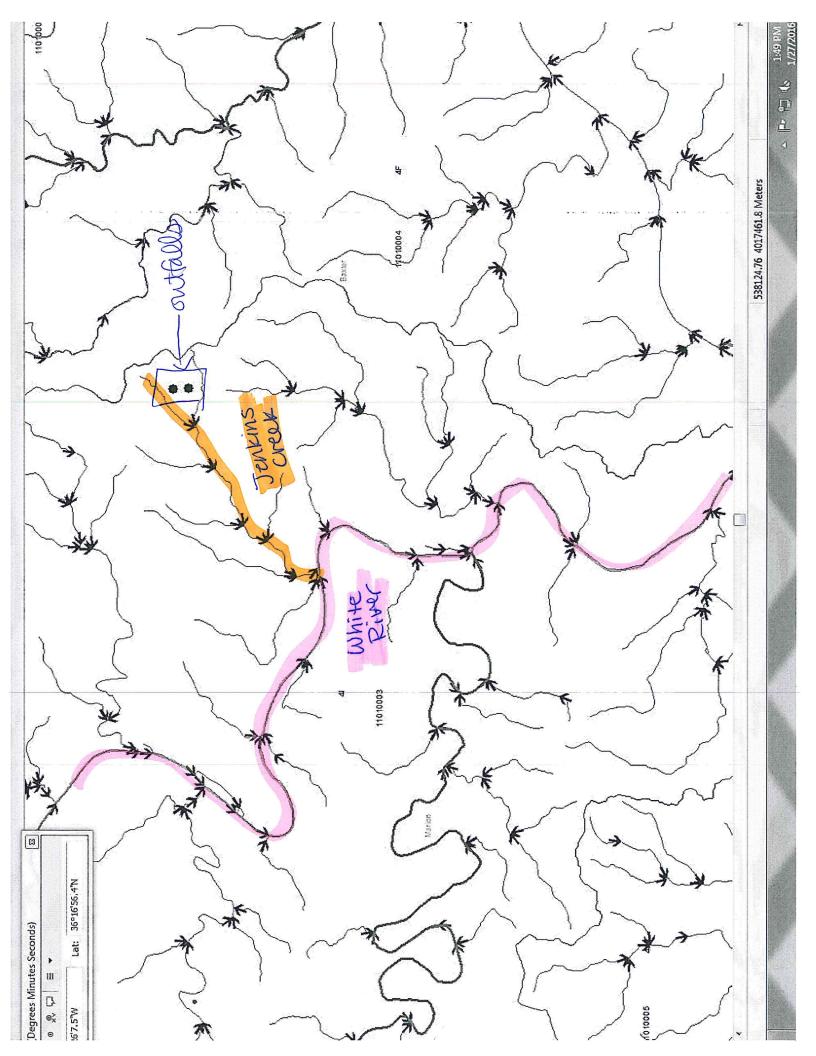
Responsible Official Name:	ike Dilbeck	Responsible Official Title:
Responsible Official Signature:	My Dille	Date: 1 20 110

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

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

## ARG500000 Checklist

ARG50 Ne Permittee Type: Pu Disclosure Statement: Yes Secretary of State: Notice of Intent: Permit Fee: Contact Contac	blic Property No.	Renewal rivate /A (Public/Sole Propi	☐ Modification rietorship) ☐ Yes		
2			La res		
Discharges to Jenkins Cree					
HUC: 11010003		Segment: 4.1			
Ecologically Sensitive Water (ESW):	1	Yes			
Extraordinary Resource Water (ERW)		Yes			
Natural Scenic Waterway (NSW):	₩ No □ No	Yes	Distance:		
Potential Losing Stream:		Yes	Course		
303(d) Impaired: No			cause: Cause:		
Impaired for Minerals	□ No	and the same of th			
Impaired for Minerals:	■ NO	res (Sunates,	Chlorides, Total Dissolved Solids)		
Site Map:					
Process Water Pond:	☐ No	Yes			
If Yes New Pond:	□ No		rmit No		
10 year, 24 hour capacity:	☐ No	☐ Yes			
"Basic Industrial" Operator					
Name of Operator:		, _	License Number:		
If No Dredge Pond:	□ No	Yes, NPDES Pe	rmit NoN/A		
Outfall Type 101:	□ No	☐ Yes			
Existing NPDES Permit:	□ No	☐ Yes, NPDES Pe	rmit No.		
Check with Enforcement:	☐ Issues		moviled 1-27-16		
Effluent Limitations:	□ No	Yes	esponded 2-2-16		
Chemical Addition:	□ No	Yes			
If Yes Lined Pond:	□ No	☐ Yes (6" concre	te/asphalt, clay, steel tank)		
Non-Hazardous Chemicals:		· ·	, , , , , , , , , , , , , , , , , , , ,		
Detectable Chemicals:	□ No	Yes			
Qualified Operator:	☐ No	☐ Yes			
Dredging Operations:	□ No	☐ Yes			
If Yes Existing Waterbody:	☐ No	Yes			
Dredge Water Reused:	□ No	☐ Yes, dredge w	ater only		
Stormwater Controls:	☐ No	☐ Yes			
Operator license required: 🗖 No license 🗖 "Basic Industrial" 🗖 "Advanced Industrial"					
Other Comments:					





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For service of process contact the Secretary of State's office.

Corporation Name

NORTH CENTRAL ARKANSAS QUARRY, INC.

Fictitious Names

Filing #

800054509

Filing Type

For Profit Corporation

Filed under Act

Dom Bus Corp; 958 of 1987

Status

Good Standing

Principal Address

Reg. Agent

DAVID L. ETHREDGE

Agent Address

119 EAST 6TH STREET

MOUNTAIN HOME, AR 72653

Date Filed

03/16/2005

Officers

DAVID L. ETHREDGE, Incorporator/Organizer VICKIE RENEE DILBECK, Tax Preparer MICHAEL DILBECK, President VICTORIA CRYSTAL DAVIS, Secretary WILLIAM CASEY DILBECK, Vice-President

VICKIE DILBECK, Treasurer VICKIE RENEE DILBECK, Controller

Foreign Name

N/A

Foreign Address

State of Origin

N/A

Purchase a Certificate of Good Standing for this Entity

Pay Franchise Tax for this

corporation