

ARG500000 Recertification Notice of Intent for Aggregate Facilities & ARG790000 Recertification Notice of Intent for Groundwater Cleanup

version 1.20

(Submission #: HP5-JDT1-42XRV, version 1)

Details

Form Alias	ARG500000 Recertification Notice of Intent for Aggregate Facilities & ARG790000 Recertification Notice of Intent for Groundwater Cleanup
Form Started	1/6/2021 12:11 PM by Keshab Simkhada
Form Submitted	1/6/2021 3:45 PM by Keshab Simkhada
Submission #	HP5-JDT1-42XRV
Submission Reason	Renewal
Status	Submitted
Reference #	ARG500013
Description	Recertification ARG500013- Hanson Aggregates- Little River

Form Input

Permittee Information

Facility/Contact Information

Permit Tracking Number

ARG500013

AFIN

41-00082

Permittee Legal Name

Hanson Aggregates, LLC

Facility Name

Little River Plant

Facility Address

306 Little River 60

Facility City

Ashdown

Facility State

AR

Facility Zip Code

71822

Mailing Address

300 E. John Carpenter Fwy, Ste. 1645

Mailing Address City

Irving

Mailing Address State

TX

Mailing Address Zip Code

75062

Responsible Official Name & Title

Lalit Bhatnagar

Responsible Official Email

lalit.bhatnagar@leighhanson.com

Cognizant Official Name & Title

Julia Andoe

Cognizant Official Email

julia.andoe@leighhanson.com

Primary Phone Number

(972) 898-5183

Contact Person

Julia Andoe

Contact Person Email

julia.andoe@leighhanson

Contact Person Phone Number

972-653-3747

Invoice Address (line1)

LALIT BHATNAGAR

Invoice Address (line 2)

HANSON AGGREGATES, LLC

Invoice Address (line 3)

300 E.JOHN CARPENTER FRWY#1645

Invoice Address City

IRVING

Invoice Address State

TX

Invoice Address Zip

75063

Is the above facility/contact information correct?

No

Outfall Information

First Outfall Number

001

First Outfall Latitude Degrees

33

First Outfall Latitude Minutes

46

First Outfall Latitude Seconds

57.24

First Outfall Longitude Degrees

94

First Outfall Longitude Minutes

11

First Outfall Longitude Seconds

12.32

Second Outfall Number (if applicable)

002

Second Outfall Latitude Degrees (if applicable)

33

Second Outfall Latitude Minutes (if applicable)

48

Second Outfall Latitude Seconds (if applicable)

0.73

Second Outfall Longitude Degrees (if applicable)

94

Second Outfall Longitude Minutes (if applicable)

11

Second Outfall Longitude Seconds (if applicable)

41.07

Third Outfall Number (if applicable)

NONE PROVIDED

Third Outfall Latitude Degrees (if applicable)

NONE PROVIDED

Third Outfall Latitude Minutes (if applicable)

NONE PROVIDED

Third Outfall Latitude Seconds (if applicable)

NONE PROVIDED

Third Outfall Longitude Degrees (if applicable)

NONE PROVIDED

Third Outfall Longitude Minutes (if applicable)

NONE PROVIDED

Third Outfall Longitude Seconds (if applicable)

NONE PROVIDED

Is the above outfall information correct?

No

Facility/Contact info Corrections**Instructions**

Include any necessary corrections in this form. If the permittee legal name or facility name needs to be corrected, a permit transfer form must be attached to this submission.

Permittee Legal Name

Lehigh Hanson Materials South LLC

Facility Name

Little River Plant

Permit Transfer Form

Permit-Transfer-Form.pdf - 01/06/2021 03:42 PM

Comment

NONE PROVIDED

Facility Address

306 Little River 60

Facility City

Ashdown

Facility State

AR

Facility Zip Code

71822

Mailing Address

300 E. John Carpenter Freeway, Suite 1645

Mailing Address City

Irving

Mailing Address State

TX

Mailing Address Zip Code

75062

Responsible Official Name & Title

Lalit Bhatnagar, P.E., Region Director, land, Environment and Sustainability

Responsible Official Email

Lalit.Bhatnagar@lehighhanson.com

Cognizant Official & Title

Keshab Simkhada, Area Environmental Manager

Cognizant Official Email

Keshab.Simkhada@lehighhanson.com

Primary Phone Number

9722097709

Contact Person

Keshab Simkhada

Contact Person Email

keshab.simkhada@lehighhanson.com

Contact Person Phone Number

9722097709

Invoice Address (line 1)

300 E. John Carpenter Freeway, Suite 1645

Invoice Address (line 2, if applicable)

NONE PROVIDED

Invoice Address (line 3, if applicable)

NONE PROVIDED

Invoice Address City

Irving

Invoice Address Zip Code

75062

Invoice Address State

TX

Other Comments/Notes

NONE PROVIDED

Outfall Corrections**Instructions**

Please provide a description of why the outfall information has changed, such as "clerical error", "Outfall XXX relocated", "Outfall XXX eliminated", etc.

Substantial changes may require additional documentation; DEQ will contact you if any additional information is needed.

Description of Outfall Changes

No changes

First Outfall Number

001

First Outfall Latitude Degrees

33

First Outfall Latitude Minutes

46

First Outfall Latitude Seconds

57.24

First Outfall Longitude Degrees

94

First Outfall Longitude Minutes

11

First Outfall Longitude Seconds

12.32

Second Outfall Number (if applicable)

002

Second Outfall Latitude Degrees (if applicable)

33

Second Outfall Latitude Minutes (if applicable)

48

Second Outfall Latitude Seconds (if applicable)

0.73

Second Outfall Longitude Degrees (if applicable)

94

Second Outfall Longitude Minutes (if applicable)

11

Second Outfall Longitude Seconds (if applicable)

41.07

Third Outfall Number (if applicable)

NONE PROVIDED

Third Outfall Latitude Degrees (if applicable)

NONE PROVIDED

Third Outfall Latitude Minutes (if applicable)

NONE PROVIDED

Third Outfall Latitude Seconds (if applicable)

NONE PROVIDED

Third Outfall Longitude Degrees (if applicable)

NONE PROVIDED

Third Outfall Longitude Minutes (if applicable)

NONE PROVIDED

Third Outfall Longitude Seconds (if applicable)

NONE PROVIDED

Disclosure Statement**Declaration of No Changes**

The violation history, experience and credentials, involvement in current or pending environmental lawsuits, civil and criminal, have not changed since the last Disclosure Statement that was filed with DEQ.

Attachments

Date	Attachment Name	Context	User
1/6/2021 3:42 PM	Permit-Transfer-Form.pdf	Attachment	Keshab Simkhada

PERMIT TRANSFER FORM

PERMIT NUMBER: AR9500013

SELECT ALL OF THE FOLLOWING THAT APPLY:

☒ Permittee (legal name) change [CHANGE OF OWNERSHIP]

☒ Permittee (legal name) change [NAME CHANGE ONLY]

☐ Facility name change

☐ Responsible official name change

I. CURRENT PERMITTEE INFORMATION

Permittee (legal name):

Hanson Aggregates, LLC

Facility Name:

Little River Plant

Responsible Official Name (see Section IV below):

Is the permittee identified above, the owner of the facility?

☒ Yes

☐ No

If No, list owner name:

II. NEW PERMITTEE INFORMATION

Permittee (legal name):

Lehigh Hanson Materials South LLC
Little River Plant

Facility Name (if different from Permittee Name):

Is the Permittee the owner of the facility? ☒ Yes ☐ No If No, list owner name:

Responsible Official Name (see Section IV below): Lalit Bhatnagar, P.E.

Responsible Official Title: Region Director, Land, Environment & Sustainability

Permittee Type:

Responsible Official E-mail: lalit.bhatnagar@lehighhanson.com

☐ STATE

☐ PARTNERSHIP

Permittee Mailing Address: 300 E John Carpenter Freeway, Ste. 1645

☐ FEDERAL

☐ PUBLIC

Permittee City:

Irving

☒ CORPORATION/LLC

Permittee State:

TX

Zip:

75062

State of Incorporation: DE

Permittee Phone No.:

(972) 653-3735

☐ SOLE PROPRIETORSHIP

☐ OTHER:

Is the new permittee registered with the Arkansas Secretary of State?

☒ Yes ☐ No

If yes, the Permittee (legal name) above must EXACTLY match the name registered with the Arkansas Secretary of State.

A current Certificate of Good Standing from the State of Incorporation must be submitted with this form.

Facility Mailing Address: 306 Little River 60

Facility City: Ashdown

Facility State: AR Zip: 71822

Facility Contact Person Name: Keshab Simkhada

Contact Person Title: Area Environmental Manager

Phone Number: (972) 653-3747

Fax Number:

E-mail: Keshab.Simkhada@lehighhanson.com

Invoice Contact Person: Keshab Simkhada

City: Irving

Invoice Mailing Address: 300 E John Carpenter Freeway, Ste. 1645

State: TX Zip: 75062

Invoice Mailing Address:

Phone: (972) 653-3747

Cognizant Official Name*: Keshab Simkhada

Cognizant Official Title: Area Environmental Manager

Phone Number: (972) 653-3747

Fax Number:

E-mail: Keshab.Simkhada@lehighhanson.com

* Duly Authorized Representative as outlined in 40 CFR 122.22(b)

PERMIT TRANSFER FORM

III. OWNERSHIP CHANGE AGREEMENT

Please note you must complete Section III only if this permit transfer is for a change of ownership.

Please specify the closing date for this transaction: 1/1/2021

Current Permittee (Seller): Hanson Aggregates LLC

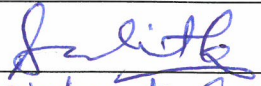
Signature of Responsible Corporate Officer: 

Title of Responsible Corporate Officer: Assistant Secretary

Printed Name of Responsible Corporate Officer: Lalit Bhatnagar

Date: 1/6/2021

New Permittee (Buyer): Lehigh Hanson Materials South LLC

Signature of Responsible Corporate Officer: 

Title of Responsible Corporate Officer: Assistant Secretary

Printed Name of Responsible Corporate Officer: Lalit Bhatnagar

Date: 1/6/2021

Disclosure Statement:

Disclosure Statement must be submitted for new permittee. **Disclosure Statement is not required for Stormwater Permits.**

Is Disclosure Statement enclosed: ☐ Yes ☒ No

Trust Fund Requirements:

If this facility is subject to the trust fund requirements (Ark. Code Ann. §8-4-203(b)(1)(B)), the permittee must also submit the ADEQ Trust Fund Requirements form with this transfer form. A form may be obtained from the ADEQ website:

<https://www.adeq.state.ar.us/water/permits/npdes/individual/pdfs/ndstw-trust-fund-certification-form.pdf>

Land Use Contract:

For **land application permits** you must submit a new land use contracts for all the sites permitted under the current permit for land application. The new land use contract must be signed by the new permittee and land owner.

IV. CERTIFICATION OF NEW PERMITTEE (Responsible Official in Section II)

"I certify that the cognizant official designated in this Permit Transfer Form (Section II) is qualified to act as a duly authorized representative under the provisions of 40 CFR Part 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."

In addition, I certify that there will be no operational changes that warrant a permit modification. (Please note that if there are changes that warrant a permit modification, then you must submit a complete application, updated plans, design calculations and specifications, and the permit modification fee along with this Ownership Change Form. The transfer may be made effective prior to permit modification.)

Typed or Printed Name: Lalit Bhatnagar, P.E.

Signature: 

Title: Region Director, Land Env. & Sustainability

Date: 1/6/2021

ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY
5301 NORTHSHORE DRIVE / NORTH LITTLE ROCK / ARKANSAS 72118-5317
TELEPHONE 501-682-0744 / FAX 501-682-0880 / www.adeq.state.ar.us



Arkansas Secretary of State John Thurston

State Capitol Building ♦ Little Rock, Arkansas 72201-1094 ♦ 501-682-3409

Certificate of Good Standing

I, John Thurston, Secretary of State of the State of Arkansas, and as such, keeper of the records of domestic and foreign corporations, do hereby certify that the records of this office show


LEHIGH HANSON MATERIALS SOUTH LLC

formed under the laws of the state of Texas, and authorized to transact business in the State of Arkansas as a Foreign Limited Liability Company, was granted a Registration of Foreign Limited Liability Company by this office October 28, 2020.

Our records reflect that said entity, having complied with all statutory requirements in the State of Arkansas, is qualified to transact business in this State.



In Testimony Whereof, I have hereunto set my hand and affixed my official Seal. Done at my office in the City of Little Rock, this 6th day of January 2021.


John Thurston
Secretary of State

Online Certificate Authorization Code: 05cb5cc719bd339

To verify the Authorization Code, visit sos.arkansas.gov