

ARG500000 Notice of Intent for Aggregate Facilities

version 1.25

(Submission #: HP5-XJK8-Q57Q8, version 1)

Details

Form Alias	ARG500000 Notice of Intent for Aggregate Facilities	
Form Started	1/20/2021 4:43 PM by Dane Braden	
Form Submitted	1/20/2021 5:37 PM by Dane Braden	
Submission #	HP5-XJK8-Q57Q8	
Submission Reason	Renewal	
Status	Submitted	
AFIN:	05-00171	Reference # ARG500015
Description	Recertification ARG500015- Razorback Farms of Missouri	
Fee	\$200.00 (Due)	

NOTE (CREATED)

Note to Jim

a recert. but JIC, however, as listed a potential losing stream,
Created on 2/24/2021 11:43 AM by **Carrie McWilliams**

NOTE (CREATED)

This is a recertification

The ePortal form/steps are for new coverage since the permittee didn't use the recertification form, but that's really what it is.

Created on 2/23/2021 9:29 AM by **Faizan Khan**

Form Input

Common Information

Facility Information

Please provide the following information about the Facility.

Facility Name

Razorback Farms - Long Creek Mine

North American Industry Classification System (NAICS)

Please provide the NAICS codes and descriptions for your facility.

[Click here to search for and review the NAICS Codes via the Census Bureau NAICS Lookup](#)

Primary NAICS Code and Description

212321 - Construction Sand and Gravel Mining

Secondary NAICS Code and Description

NONE PROVIDED

Tertiary NAICS Code and Description

NONE PROVIDED

Facility Physical Address**Contact****Prefix**

NONE PROVIDED

First Name

Dane

Last Name

Braden

Title

Member

Organization Name

Razorback Farms of Missouri dba Explosive Cattle Company

Phone Type

Business

Number

417-337-7600

Extension**Email**

office@explosivecontractorsinc.com

Fax

NONE PROVIDED

Physical Address

15772 Richesin Lane

Omaha, AR 72662

Boone, United States

Facility Physical Location Latitude and Longitude

36.416658,-93.306800

NONE PROVIDED

Facility Mailing Address**Contact****Prefix**

NONE PROVIDED

First Name

Dane

Last Name

Braden

Title

Member

Organization Name

Razorback Farms of Missouri dba Explosive Cattle Company

Phone Type

Business

Number

417-337-7600

Extension**Email**

office@explosivecontractorsinc.com

Fax

NONE PROVIDED

Mailing Address

118 STATE DR

HOLLISTER, MO 65672

United States

Owner Information

Please provide the following information for the owner. If the owner is a corporation it must exactly match the name registered with the Secretary of State. Please use the following link to reference the Secretary of State registered name listing.

[Click here to view the Secretary of State registered name listing](#)

Secretary of State's Filing Number

800070114

Legal Organization

Limited Liability Company

Owner Type

Private Industry

Owner Information**Contact****Prefix***NONE PROVIDED***First Name***Dane***Last Name***Braden***Title***Member***Organization Name***Razorback Farms of Missouri dba Explosive Cattle Company***Phone Type***Business***Number***417-337-7600***Extension****Email***office@explosivecontractorsinc.com***Fax***NONE PROVIDED***Owner Address***118 STATE DR**HOLLISTER, MO 65672**United States***Billing Information**

Please provide the following information for the Billing contact for this permit application.

Billing Information**Billing Contact****Prefix***NONE PROVIDED***First Name***Dane***Last Name***Braden***Title***NONE PROVIDED***Organization Name***Razorback Farms of Missouri dba Explosive Cattle Company***Phone Type***Business***Number***417-337-7600***Extension****Email***office@explosivecontractorsinc.com***Fax***NONE PROVIDED***Billing Address***118 STATE DR**HOLLISTER, MO 65672**United States***Other Information****Permittee (Legal Name)***Razorback Farms of MO dba Explosive Cattle Company***State of Incorporation***AR***Facility SIC Code***1442***Current Facility Permit Information***ARG500000, AFIN 05-00171*

Consultant Information**Contact****Prefix**

NONE PROVIDED

First Name

NONE PROVIDED

Last Name

NONE PROVIDED

Title

NONE PROVIDED

Organization Name

NONE PROVIDED

Phone Type**Number****Extension**

NONE PROVIDED

Email

NONE PROVIDED

Fax

NONE PROVIDED

Address

118 STATE DR

HOLLISTER, MO 65672

United States

Additional Information

NONE PROVIDED

Geological Description of the Site

Boone County; Township 21 North, Range 22 West, Section 35

Driving Directions to Facility

Hwy 65 south - west on 396 - north on 311 - east on 824 to location

Does this facility intend to dredge or remove sand or gravel from within the submerged portions of a stream or drainage?

No

Is the facility a producer of industrial sand?

No

Discharge Information (1 of 1)**Outfall Number**

001

Estimated Flow (MGD)

0

Map showing Stream Segments and Hydrologic Basin Codes

If you need assistance determining the Stream Segment and/or Hydrologic Basin Code for this location, please use the map at the link provided below.

The Stream Segment is a number followed by a letter.

The Hydrologic Basin Code is a seven or eight digit number.

[Map showing Stream Segments and Hydrologic Basin Codes](#)

Stream Segment

4I

Hydrologic Basin Code

11010003

Outfall Latitude and Longitude

36.416658,-93.306800

NONE PROVIDED

Receiving Stream

n/a, no discharge; all process water returns back to pit and sediment basin

Effluent Description

n/a

Treatment System

n/a, no discharge; all process water returns back to pit and sediment basin

Required Attachments**Topographic Map Attachment**

[ARG500015 Site Layout 2.pdf - 01/20/2021 05:17 PM](#)

[ARG500015 Site Layout.pdf - 01/20/2021 05:17 PM](#)

Comment

NONE PROVIDED

Disclosure Statement (or both 10Q and 10K) Attachment

[Disclosure Statement.pdf - 01/20/2021 05:28 PM](#)

Comment

NONE PROVIDED

Proof of Good Standing

NONE PROVIDED

Comment

NONE PROVIDED

Responsible and Cognizant Official Information

Responsible Official Signatory Requirements

The information contained in this form must be certified by a RESPONSIBLE OFFICIAL as defined below:

Corporation: principal officer at least the level of vice president

Partnership: a general partner

Sole Proprietorship: the proprietor/owner

Municipal, State, Federal, or other public facility: principal executive officer, or ranking elected official

Responsible Official First Name

Dane

Responsible Official Last Name

Braden

Responsible Official Job Title

Member

Responsible Official Email Address

office@explosivecontractorsinc.com

Cognizant Official Requirements

A COGNIZANT OFFICIAL is an individual that is given signature authority from the Responsible Official.

Cognizant Official First Name

NONE PROVIDED

Cognizant Official Last Name

NONE PROVIDED

Cognizant Official Email Address

NONE PROVIDED

Attachments

Date	Attachment Name	Context	User
2/23/2021 9:27 AM	ARG500015_Technical Review_2021.docx	Submission	Faizan Khan
2/23/2021 9:26 AM	ARG500015_Enforcement Review_20210222.pdf	Submission	Faizan Khan

Date	Attachment Name	Context	User
2/23/2021 9:26 AM	ARG500015_Stream Path_20210223.pdf	Submission	Faizan Khan
2/23/2021 9:26 AM	ARG500015_Google Earth_20210223.pdf	Submission	Faizan Khan
2/23/2021 9:26 AM	ARG500015_MO SoS Good Standing_20210201.pdf	Submission	Faizan Khan
2/23/2021 9:26 AM	ARG500015_AR SoS Good Standing_20210201.pdf	Submission	Faizan Khan
2/23/2021 9:25 AM	ARG500015_Invoice Summary_20210201.pdf	Submission	Faizan Khan
1/20/2021 5:28 PM	Disclosure Statement.pdf	Attachment	Dane Braden
1/20/2021 5:17 PM	ARG500015 Site Layout 2.pdf	Attachment	Dane Braden
1/20/2021 5:17 PM	ARG500015 Site Layout.pdf	Attachment	Dane Braden

ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY DISCLOSURE STATEMENT

Instructions for the Completion of this Document:

- A. Individuals, firms or other legal entities with no changes to an ADEQ Disclosure Statement, complete items 1 through 5 and 18.**
- B. Individuals who never submitted an ADEQ Disclosure Statement, complete items 1 through 4, 6, 7, and 16 through 18.**
- C. Firms or other legal entities who never submitted an ADEQ Disclosure Statement, complete 1 through 4, and 6 through 18.**

If Not Submitting by ePortal, Mail Original to:

ADEQ

DISCLOSURE STATEMENT

[List Proper Division(s)]

5301 Northshore Drive

North Little Rock, AR 72118-5317

1. APPLICANT: (Full Name)

Razorback Farms of Missouri dba Explosive Cattle Company

2. MAILING ADDRESS: (Number and Street, P.O.Box Or Rural Route)

118 State Drive

3. CITY, STATE, AND ZIPCODE:

Hollister, MO 65672

4a. Applicant Type:

☐ Individual ☒ Corporate or Other Entity

4b. Reason for Submission:

☒ Permit ☐ License ☐ Certification ☐ Operational Authority

☐ New Application ☐ Modification ☒ Renewal Application (If no changes from previous disclosure statement, complete number 5 and 18.)

4c. Programs:

☐ Air ☒ Water ☐ Hazardous Waste ☐ Regulated Storage Tank ☐ Mining ☐ Solid Waste ☐ Used Tire Program

5. 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 ADEQ on 04/27/2011

6. Describe the experience and credentials of the Applicant, including the receipt of any past or present permits, licenses, certifications or operational authorization relating to environmental regulation. (Attach additional pages, if necessary.)

The only permits obtained for this property have been through ADEQ.

7. List and explain all civil or criminal legal actions by government agencies involving environmental protection laws or regulations against the Applicant * in the last ten (10) years including:

1. Administrative enforcement actions resulting in the imposition of sanctions;
2. Permit or license revocations or denials issued by any state or federal authority;
3. Actions that have resulted in a finding or a settlement of a violation; and
4. Pending actions.

(Attach additional pages, if necessary.)

None

* Firms or other legal entities shall also include this information for all persons and legal entities identified in sections 8-16 of this Disclosure Statement.

8. List all officers of the Applicant. (add additional pages, if necessary.)

NAME: Dane Braden TITLE: Member

STREET: 118 State Dr.

CITY, STATE, ZIP: Hollister, MO 65672

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

9. List all directors of the Applicant. (Add additional pages, if necessary.)

NAME: Dane Braden TITLE: Member

STREET: 118 State Dr.

CITY, STATE, ZIP: Hollister, MO 65672

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

10. List all partners of the Applicant. (Add additional pages, if necessary.)

NAME: none TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

11. List all persons employed by the Applicant in a supervisory capacity or with authority over operations of the facility subject to this application.

NAME: none TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

NAME: Dane Braden TITLE: President

STREET: 118 State Dr.

CITY, STATE, ZIP: Hollister, MO 65672

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

NAME: Explosive Contractors, Inc. TITLE: President

STREET: 118 State Dr.

CITY, STATE, ZIP: Hollister, MO 65672

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

NAME: none

STREET: _____

CITY, STATE, ZIP: _____

Organizational Relationship:

[illegible]

NAME: none

STREET: _____

CITY, STATE, ZIP: _____

Organizational Relationship:

16. List any person who is not now in compliance or has a history of noncompliance with the environmental law or regulations of this state or any other jurisdiction and who through relationship by blood or marriage or through any other relationship could be reasonably expected to significantly influence the Applicant in a manner which could adversely affect the environment.

NAME: none TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

17. List all federal environmental agencies and any other environmental agencies outside this state that have or have had regulatory responsibility over the Applicant.

No other agencies have regulatory responsibility over Razorback Farms of Missouri dba Explosive Cattle Company

18. VERIFICATION AND ACKNOWLEDGEMENT

The Applicant agrees to provide any other information the director of the Arkansas Department of Environmental Quality may require at any time to comply with the provisions of the Disclosure Law and any regulations promulgated thereto. The Applicant further agrees to provide the Arkansas Department of Environmental Quality with any changes, modifications, deletions, additions or amendments to any part of this Disclosure Statement as they occur by filing an amended Disclosure Statement.

DELIBERATE FALSIFICATION OR OMISSION OF RELEVANT INFORMATION FROM DISCLOSURE STATEMENTS SHALL BE GROUNDS FOR CIVIL OR CRIMINAL ENFORCEMENT ACTION OR ADMINISTRATIVE DENIAL OF A PERMIT, LICENSE, CERTIFICATION OR OPERATIONAL AUTHORIZATION.

COMPLETE THIS SECTION ONLY IF SUBMITTING OTHER THAN BY EPORTAL:

I, Dane Braden, 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 fines and imprisonment for knowing violation.

APPLICANT
SIGNATURE: _____



TITLE: Member

DATE: 01/20/2021