

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

version 1.22

(Submission #: HP6-STBM-BMFKP, version 1)

Details

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

Form Started 2/25/2021 3:18 PM by Ann Sudmeyer

Form Submitted 3/1/2021 1:48 PM by Matthew O'Bryhim Porter

Submission # HP6-STBM-BMFKP

Submission Reason Renewal

Status In Review

Reference # ARG500027

Description Recertification ARG500027- CertainTeed Gypsum

Form Input

Permittee Information

Facility/Contact Information

Permit Tracking Number
ARG500027

AFIN
31-00010

Permittee Legal Name

CertainTeed Gypsum Manufacturing

Facility Name

CertainTeed Gypsum Manufacturing

Facility Address

794 HWY 369 North

Facility City

Nashville

Facility State

AR

Facility Zip Code

71852

Mailing Address

794 HWY 369 North

Mailing Address City

Nashville

Mailing Address State

AR

Mailing Address Zip Code

71852

Responsible Official Name & Title

Matthew Porter, Mine Superintendent

Responsible Official Email

matthew.o.porter@saint-gobain.com

Cognizant Official Name & Title

Christopher J. Holder, Engineering Manager

Cognizant Official Email

christopher.j.holder@saint-gobain.com

Primary Phone Number

(903) 748-8446

Contact Person

Michael Hanney

Contact Person Email

michael.hanney@saint-gobain.com

Contact Person Phone Number

870-845-7180

Invoice Address (line1)

RANDY KUYKENDALL

Invoice Address (line 2)

CERTAINTED GYPSUM MFG., INC

Invoice Address (line 3)

794 HWY 369 N

Invoice Address City

NASHVILLE

Invoice Address State

AR

Invoice Address Zip

71852

Is the above facility/contact information correct?

No

Outfall Information

First Outfall Number

001

First Outfall Latitude Degrees

34

First Outfall Latitude Minutes

04

First Outfall Latitude Seconds

19.87

First Outfall Longitude Degrees

93

First Outfall Longitude Minutes

53

First Outfall Longitude Seconds

42.59

Second Outfall Number (if applicable)

002

Second Outfall Latitude Degrees (if applicable)

34

Second Outfall Latitude Minutes (if applicable)

04

Second Outfall Latitude Seconds (if applicable)

05.81

Second Outfall Longitude Degrees (if applicable)

93

Second Outfall Longitude Minutes (if applicable)

54

Second Outfall Longitude Seconds (if applicable)

36.70

Third Outfall Number (if applicable)

003

Third Outfall Latitude Degrees (if applicable)

34

Third Outfall Latitude Minutes (if applicable)

04

Third Outfall Latitude Seconds (if applicable)

21.66

Third Outfall Longitude Degrees (if applicable)

93

Third Outfall Longitude Minutes (if applicable)

54

Third Outfall Longitude Seconds (if applicable)

08.09

Is the above outfall information correct?

Yes

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

NONE PROVIDED

Facility Name

NONE PROVIDED

Permit Transfer Form

NONE PROVIDED

Comment

NONE PROVIDED

Facility Address

NONE PROVIDED

Facility City

NONE PROVIDED

Facility State

NONE PROVIDED

Facility Zip Code

NONE PROVIDED

Mailing Address

NONE PROVIDED

Mailing Address City

NONE PROVIDED

Mailing Address State

NONE PROVIDED

Mailing Address Zip Code

NONE PROVIDED

Responsible Official Name & Title

Matthew Porter, Mine Manager

Responsible Official Email

NONE PROVIDED

Cognizant Official & Title

Gretchen Baker, Plant Manager

Cognizant Official Email

gretchen.baker@saint-gobain.com

Primary Phone Number

304-215-6826

Contact Person

Michael Hanney

Contact Person Email

Michael.Hanney@saint-gobain.com

Contact Person Phone Number

8705574299

Invoice Address (line 1)

Michael Hanney

Invoice Address (line 2, if applicable)

NONE PROVIDED

Invoice Address (line 3, if applicable)

NONE PROVIDED

Invoice Address City

Nashville

Invoice Address Zip Code

71852

Invoice Address State

AR

Other Comments/Notes

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
3/5/2021 2:47 PM	ARG500027_review.txt	Submission	Zachary Carroll
3/5/2021 2:14 PM	ARG500027_UpdatedDisclosureStatement.pdf	Submission	Zachary Carroll

Date	Attachment Name	Context	User
3/4/2021 9:07 AM	ARG500027_GoodStandingAR.pdf	Submission	Zachary Carroll
3/4/2021 9:07 AM	ARG500027_ActiveNV.pdf	Submission	Zachary Carroll
3/4/2021 9:07 AM	ARG500027_EnforcementReview.pdf	Submission	Zachary Carroll
3/4/2021 9:07 AM	ARG500027_InvoiceReview.pdf	Submission	Zachary Carroll

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)

CertainTeed Gypsum Manufacturing, Inc.

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

794 HWY 369 N.

3. CITY, STATE, AND ZIPCODE:

Nashville, AR 71852

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 3/2019

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.)

This facility is currently owned by CertainTeed Gypsum Inc. and has been in business since 1964 at the same location. Over the 57 years that the plant has been at this same site it has had several different permits that have always been in good standings with ADEQ. At this time we have several different permits with ADEQ. Title V air, 3 different stormwater permits, SARA Title II, SWPPP, SPCC, Waste, Dam, Mining and Storage Tank.

Matthew Porter: Mine Manager of CertainTeed Gypsum, Bachelor and Master Degrees from the University Of Arkansas. Over 10 years of mining experience.

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: Roberto Margutti TITLE: US Mining Operations Manager

STREET: 13500 Blue Diamond RD.

CITY, STATE, ZIP: Las Vegas, Nevada 89161

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: N/A TITLE:

STREET:

CITY, STATE, ZIP:

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: N/A 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: Matthew Porter TITLE: Mine Manager

STREET: 794 HWY 369 N.

CITY, STATE, ZIP: Nashville, AR 71852

NAME: TITLE:

STREET:

CITY, STATE, ZIP:

NAME: TITLE:

STREET:

CITY, STATE, ZIP:

12. List all persons or legal entities, who own or control more than five percent (5%) of the Applicant's debt or equity.

NAME: N/A TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

13. List all legal entities, in which the Applicant holds a debt or equity interest of more than five percent (5%).

NAME: N/A TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

14. List any parent company of the Applicant. Describe the parent company's ongoing organizational relationship with the Applicant.

NAME: Saint Gobain

STREET: 20 Moores Road

CITY, STATE, ZIP: Malvern, PA 19355

Organizational Relationship:

CertainTeed is a wholly owned Subsidiary of Saint Gobain Corporation.

15. List any subsidiary of the Applicant. Describe the subsidiary's ongoing organizational relationship with the Applicant.

NAME: N/A

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: N/A 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.

N/A

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, Matthew Porter, 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: Mine Manager

DATE: 3.5.2021