# 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</u> <u>later than January 31, 2016.</u> Please keep a copy of this form for your records once completed and signed.

Permit	Tracking	Number	ARG500042
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AFIN: 55-00264

Permittee Name: R. K. Hall Construction, LTD.

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:	Kirby Asphalt Plant #20 & Crusher #15	
	3250 Highway 27 North	
	Kirby, AR 71950	
Facility Mailing Address:	222 E. Hickory Street	
	Paris, TX 75460	
Responsible Official:	Chad Stone	
Responsible Official Email:	chad.stone@rkhallconstruction.com	
Cognizant Official:	Mindy King	
Cognizant Official Email:	mindy.king@rkhallconstruction.com	
Contact Person:	Delmer Vaughn	
Phone Number:	870-260-4276	

1.	Have you attached	an	updated	disclosure
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Additional Comments:

C	Ý	eş)	or	No
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2. Is the invoice address the same as the mailing address above?

Yeson	No
( 10901	- 10

If "No" please provide invoice	
address	

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

Outfall Number		Latitude			Longitude	
001 (Type 101)	34°	13'	17"	93°	38'	34"
002 (Type 101)	34°	13'	17.6088"	-93°	38'	31.3908"

<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

Responsible Official Name: Chad Stone Responsible Official Title: EH 5 Mngr

Responsible Official Signature: Chad Stand Date: 2-18-16

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

Permit Disclos Secreta Notice	ure Statement: ary of State: of Intent:	□ New □ Public □ Yes □ PK Hall,	Private N/A (Pu	Renewal ublic/Sole Proprieto	☐ Modification rship)
Permit Financi	Fee: ial Assurance (Arkansa	IN A s Code Annota	ited 8-4-203l	o): NA No	Yes
Dischar HUC: Ecologi Extraor Natura Potent	rges to Woodall Co SOMOIOS ically Sensitive Water dinary Resource Water I Scenic Waterway (NS ial Losing Stream:	(ESW): No	nning Segme	Yes Lit. Miss. Yes Yes Yes Yes Waterbody: Lit. (	Cause: Cuado Solids)
Site Ma	ap:				
	s Water Pond:	■ No		Yes	
If Yes	New Pond:	☐ No		Yes, NPDES Permit	No.
	10 year, 24 hour cap	acity: 🔲 No		Yes	
	"Basic Industrial" Op	erator: 🔲 No	(6 mo.)	Yes	
	Name of Ope	erator:	,	Lic	ense Number:
If No	Dredge Pond:	☐ No			NoN/A 🗖
	Outfall Type 101:	□ No		Yes	
	Existing NPDES Perm	iit: 🗖 No		Yes, NPDES Permit	No
Check	with Enforcement:	☐ Iss		No Issues	
Effluen	nt Limitations:	☐ No	$\nearrow$	Yes	
Chemic	cal Addition:	D No		Yes	
If Yes	Lined Pond:	□ No		Yes (6" concrete/a	sphalt, clay, steel tank)
	Non-Hazardous Che	nicals:			
	Detectable Chemical	ls: 🔲 No		Yes	
	Qualified Operator:	☐ No		Yes	
Dredgi	ng Operations:	☐ No		Yes	
If Yes	Existing Waterbody:	☐ No		Yes	
	Dredge Water Reuse	ed: 🔲 No		Yes, dredge water	only
	Stormwater Controls	s: 🔲 No		Yes	
Operat	tor license required:	☐ No license	☐ "Basic	ndustrial"	dvanced Industrial"
Other	Comments:				



## ARKANSAS SECRETARY OF STATE Mark Martin

### Search Incorporations, Cooperatives, Banks and Insurance Companies

#### Printer Friendly Version

LLC Member information is now confidential per Act 865 of 2007

Use your browser's back button to return to the Search Results

#### Begin New Search

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

Corporation Name

RK HALL, LLC

Fictitious Names

RK HALL CONSTRUCTION, LTD.

Filing #

811057695

Filing Type

Foreign Limited Liability Company

Filed under Act

Foreign LLC; 1003 of 1993

Status

Good Standing

Principal Address

1550 WYNKOOP ST 3RD FLOOR

**DENVER, CO 80202** 

Reg. Agent

CORPORATION SERVICE COMPANY

Agent Address

300 SPRING BUILDING, SUITE 900

300 S SPRING ST

LITTLE ROCK, AR 72201

Date Filed

07/23/2014

Officers

BRAD BANKSTON , Manager ANNE LEE BENEDICT , Incorporator/Organizer

VICKI JAN GROSS, Tax Preparer ROBERT K HALL, Manager JASON EXUM, Manager LEX HUIE, Manager

Foreign Name

N/A

Foreign Address

1550 WYNKOOP ST

3RD FLOOR **DENVER, CO 80202** 

State of Origin

DE

Purchase a Certificate of Good

Standing for this Entity

Pay Franchise Tax for this corporation

#### Department of State: Division of Corporations

Allowable Characters

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SERVICES

Pay Taxes Bulk Tax Payment (alternative entity payment only) File UCC's

Delaware Laws Online Name Reservation **Entity Search** Status Validate Certificate

**Customer Service Survey** 

INFORMATION Corporate Forms

Corporate Fees UCC Forms and Fees Taxes **Expedited Services** Service of Process Registered Agents

GetCorporate Status Submitting a Request

How to Form a New Business Entity Certifications, Apostilles & Authentication of

Documents

Frequently Asked Questions View Search Results

**Entity Details** 

THIS IS NOT A STATEMENT OF GOOD STANDING

4878948 File Number:

Incorporation Date / 10/19/2010 Formation Date:

(mm/dd/yyyy)

Entity Name: **RK HALL, LLC** 

Limited

Entity Kind: Liability Entity Type: General

Company

Residency: **Domestic** State: DELAWARE

REGISTERED AGENT INFORMATION

Name:

CORPORATION SERVICE COMPANY

Address:

2711 CENTERVILLE RD SUITE 400

City:

WILMINGTON

County: New Castle

State:

DE

Postal Code: 19808

Phone:

302-636-5401

Additional Information is available for a fee. You can retrieve Status for a fee of \$10.00 or more detailed information including current franchise tax assessment, current filing history and more for a fee of \$20.00.

Would you like 
Status 
Status, Tax & History Information Submit

Back to Entity Search

For help on a particular field click on the Field Tag to take you to the help area.

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# 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)  RY HOUL CONSTRUCTION, Ltd  2. MAILING ADDRESS (Number and Street, P.O.Box Or Rural Route):
222 E Hickory Street
3. CITY, STATE, AND ZIPCODE:
Paris, TX 75460
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. Division:  Air W Water Hazardous Waste Regulated Storage Tank Mining Solid Waste
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 $0513203$

6. Describe the experience and credentials of the Applicant, including the receipt of any authorization relating to environmental regulation. (Attach additional pages, if necessar	past or present permits, licenses, certifications or operational ry.)	
	<del>.</del>	
7. List and explain all civil or criminal legal actions by government agencies involving en in the last ten (10) years including:	vironmental protection laws or regulations against the Applicant *	_
1. Administrative enforcement actions resulting in the imposition of sanctions;		
<ol> <li>Permit or license revocations or denials issued by any state or federal authorit</li> <li>Actions that have resulted in a finding or a settlement of a violation; and</li> </ol>	ity;	
4. Pending actions. (Attach additional pages, if necessary.)		
	·	
* Firms or other legal entities shall also include this information for all persons and legal		

8. List all officers of the Applicant. (Add additio	nal pages, if necessary.)
NAME:	
CITY, STATE, ZIP:	
NAME:	TITLE:
<del>-</del>	<u> </u>
CITY, STATE, ZIP:	
NAME:	TITLE:
STREET:	
CITY, STATE, ZIP:	
O Tint all discontant of the Amelicant (Add addit	in all magnes if accompany)
9. List all directors of the Applicant. (Add addit	
	_ TITLE:
CITY, STATE, ZIP:	
NA ME.	TITLE:
244267	TOTAL D
	_ TITLE:
CITY, STATE, ZIP:	
10. List all partners of the Applicant. (Add addi	tional pages, if necessary.)
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NAME:	TITLE:
NAME:STREET:	
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NAME:	TITLE:

12. List all persons or legal entities, who own or	control more than five percent (5%) of the Applicant's debt or equity.
NAME:	TITLE:
STREET:	
CITY, STATE, ZIP:	
NAME:	TITLE:
STREET:	
CITY, STATE, ZIP:	
NAME:	TITLE:
STREET:	
CITY, STATE, ZIP:	
12 714 11 1 22 1 11 11 11 12 12	
	holds a debt or equity interest of more than five percent (5%).
	TITLE:
	<del></del>
CITY, STATE, ZIP:	
NAME:	
•	
NAME.	TITI E.
CITT, STATE, ZIT.	
14. List any parent company of the Applicant. I	Describe the parent company's ongoing organizational relationship with the Applicant.
NAME:	
STREET:	
CITY, STATE, ZIP:	
Organizational Relationship:	
Organizational Remoteration	
[	
15. List any subsidiary of the Applicant. Descri	ibe the subsidiary's ongoing organizational relationship with the Applicant.
NAME:	<del></del>
STREET:	
CITY, STATE, ZIP:	<del></del>
Organizational Relationship:	

NAME: STREET: CITY, STATE, ZIP: TITLE: STREET: CITY, STATE, ZIP: TITLE: STREET: CITY, STATE, ZIP: TITLE: STREET: Applicant.	jurisdiction and who through rela	w in compliance or has a history of noncompliance with the environmental laws or regulations of this state or any other ationship by blood or marriage or through any other relationship could be reasonably expected to significantly influence could adversely affect the environment.
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 state of the state of the state that have or have had regulatory responsibility over the state of the sta	NAME:	TITI E.
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#### 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, Chad Stone, 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: Chad Stene
TITLE: EHS Manager  DATE: 2-18-16