#### ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY NOTICE OF INTENT

#### AGGREGATE FACILITIES NPDES GENERAL PERMIT ARG500000

Applicat	ion Type:	New X	R	enewai 🗌 (Peri	mit # ARG	50		<u> </u>
I. PERMITTEE/	OPERATOR I	NFORMATI	ON					
Permittee (Leg	al Name): (	Cross Cou	nty Ark	ansas		Op	erator Type:	
Permittee Mailing					X State ☐ Partnership			
-	ittee City:	Wynne			∏ Federa	al		rporation*
	ttee State:	ÁR	Zi	p: 72396	🔲 Sole P	roprieto	rship/Private	-
Permittee Telephone	Number:	870-238	5750		*State of I	Incorpor	ration:N	<u> </u>
Permittee Far		870-238-					of the Permi	
Permittee E-mai	l Address: (	dsanders@	<u>Dcross</u>	countyar.org			me listed with	the Arkansas
II. INVOICE MAI	LING INFOR	MATION						
Invoice Contact P	erson: Doni	nie Sande	rs		City	, W	ynne	
Invoice Mailing Con	,	s County			State		R Z	ip: <b>72</b> 396
Invoice Mailing Ad	—	F Union-R			Telephone		70-238-57	
		rry Valley,	<u>ierry V</u>	_ ^	Number:	870-	<u>-238-5740</u>	
Facility County:	Cross			Facility City, Sta	ate & Zip:	Cher	ry Valley, A	AR 72324
Facility Latitude:	35 Deg 39	Min 48.	<del>152</del> c	Facility Longitud	le:	<u>.90</u>	Deg <b>74</b> M	4in 41.26cc
Accuracy:	Method		_ Datu <del>n</del>		cale:		Description:	
Facility SIC Code:		Ç		Faci	lity NAICS	÷		
IV. DISCHARGE I Outfall Number: Effluent Description:	INFORMATIC	)N		Estimated Flow:	_0_м	IGD (M:	illionGallons	per Day)
Stream Segment:	5B			Hydrologic	Basin Cod	le:	8020205	
Outfall Latitude:	Deg	Min	Sec	Outfall Longitu	de:	Deg	Min	Sec
Accuracy:	Method	:	Datum	n: So	cale:		Description:	·
Receiving Stream:	St Fi	rancis Riv	er		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Treatment System*:	NA							
Outfall Number:	NA			Flow:	_0_ M	IGD (M	illion Gallons	per Day)
Effluent Description	NA					•		
Stream Segment:	5B			Hydrologic Bas	in Code:		8020205	
Outfall Latitude:	Deg	Min	Sec	Outfall Longitu	****	Deg	Min	Sec
		***************************************						<del></del>

WATER DIVISION

5301 NORTHSHORE DRIVE / NORTH LITTLE ROCK, ARKANSAS 72118 PHONE 501-682-0623 / FAX 501-682-0880

www.adeq.state.ar.us - 2 -

2017/WED 02:48 PM	Cross Cty Ju	dge	FAX No. 87023	385752	P. 003
Accuracy:	Method:	Datum:	Scale:	Descripti	rham v
Receiving Stream:	1710tilod.	Datum	Some	Dosoriping	J11
Treatment System*:					
*Include addition of any chemi	cals, if applicable.	<del></del>			
v. FACILITY PER	MIT INFORMATIO	ON			
	NPDES Individual	l Permit Number	(If Applicable): AF	100	
	NPDES General	l Permit Number	(If Applicable): AF	tG	
	Sta	ate Construction I	Permit Number: _AF	kG50 C	
NPDES General Cor	struction Stormwater	Permit Number	(If Applicable): _AF	ERI5	
N	PDES Industrial Stor	mwater General I	Permit Number: _AF	R00	
	•	Mining I	Permit Number:		
		Other Depa	rtment Permits:		
within the submer,  2. Is the facility a pro Geological Descripti Additional Location D Additional C Consultant Con Consultant Ema	escription: Comments: noi tact Name: NA il Address: NA	am or drainage? and? g and Memphis s ne	ilt Joam	te: NA umber: NA	Zip: NA
"I certify that, if this facili official designated in this 122.22(b). If no cognizar Applicant. I certify under in accordance with a syste Based on my inquiry of the best of my knowledge false information, including	s Application is quality official has been despended to the penalty of law that the modesigned to assure the person or persons of and belief, true, according to the person of the perso	is registered with iffed to act as a casignated, I under his document and that qualified perfectly responsiblicate, and comple	tuly authorized repre- stand that the Departs all attachments were p rsonnel properly gath le for gathering the in te. I am aware that th	sentative under the pr nent will accept report prepared under my dire er and evaluate the inf formation, the informa ere are significant pen	ovisions of 40 CFF is signed only by the ection or supervision formation submitted ation submitted is, to
Responsible Official Pri	inted Name: Done	nie Sanders	Title: _	Cross County .	ludge

Responsible Official Signature:

Responsible Official Email: dsanders@crosscountyar.org

Cognizant Official Printed Name: Mike Hamrick Title: Admin. Asst.

Cognizant Official Signature: Telephone: 870-238-5750

Cognizant Official Email: \_mhamrick@crosscountyar.org

### X. PERMIT REQUIREMENT VERIFICATION

Please check the following to verify application will be considered incomp			or permit requirements. It you answer "NO te a delay in the permitting process.	or to any of questions below the
-	Yes	No		
Submittal of Complete NOI?	X			•
Submittal of Required Permit Fee?	X		New Permittees Only Check Number:	
Submittal of Topographic Map?	X			
Submittal of Disclosure Statement?	X			
Industrial Operator's License Num	ber:			

last Disclosure Statement that was filed with ADEQ on\_

# 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.
f Not Submitting by ePortal, Mail Original to:
ADEO
DISCLOSURE STATEMENT
List Proper Division(s)]
301 Northshore Drive
North Little Rock, AR 72118-5317
I. APPLICANT: (Full Name)
Cross County Road Department
L. MAILING ADDRESS (Number and Street, P.O.Box Or Rural Route):
705 E Union RM 4 3. CITY, STATE, AND ZIPCODE:
Wynne, AR 72396
4a. Applicant Type:
☐ Individual
4b. Reason for Submission:
Permit License Certification Operational Authority
✓ New Application
4c. Division:
Air 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

#### 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:

all attachments were prepared und designed to assure that qualified pe Based on my inquiry of the person responsible for gathering the infor- and belief, true, accurate, and com	, certify under penalty of law that this document and ler my direction or supervision in accordance with a system ersonnel properly gather and evaluate the information submitted. or persons who manage the system, or those persons directly mation, the information submitted is, to the best of my knowledge plete. I am aware that there are significant penalties for submitting ssibility of fines and imprisonment for knowing violation.
APPLICANT SIGNATURE:  TITLE: Cross County Judge	Sanden
DATE: 8/9/2017	



## **COUNTY OF CROSS**

## DONNIE SANDERS, COUNTY JUDGE

705 E. Union • Room 4 • Wynne, AR 72396 Phone 870-238-5750 • Fax 870-238-5752



8/28/2017

Cross County Pit #3 will be used to supply clay gravel, sand and dirt for road repair and construction in Cross County. There will be no washing process at the pit. No fuel or chemicals will be stored at the pit. We will utilize one dozer and one track hoe at the pit and they will be fueled via our fuel truck eliminating the need for fuel storage at the pit. This process is the same utilized at Pits 1 and 2.

Storm water will flow from the south end of the property and leave on the NW corner and flow in to the L'anguille River.

Donnie Sanders

¢ross County Judge

## 9/13/17

- 1.2.6.4 #1 outfall Coordinates 39.39 48.19 -90.74 41.26 #

  This is the only outfall for the pit and it is storm water only,

  Existing ditch across property
- 1.2.6.5 St Francis River, via L'anguille River, via unnamed stream
- 1.2.6.10 Map Includes outfall # 1

  Direction of storm water flow 
  North Gast to Each Property

  Areas of active mining

Processing areas – not applicable

Location of potential pollutants- not applicable, no fuel or chemicals stored at location

Location of nearby receiving waters- unnamed ditch at outfall # 1, approximately 3 miles to L'anguille River due west, south to St Francis River

1.2.6.11 Geological description- Loring and Memphis silt loam

