



# ARG (NPDES non-stormwater general permit) Notice of Intent - ARG160000, ARG250000, ARG500000, ARG550000, ARG640000, ARG670000, ARG750000, and ARG790000 Applications for New Permit Coverage

version 1.27

(Submission #: HQ4-TKTG-WDXPX, version 4)

## Details

AFIN 32-00270  
Reference # ARG500119  
Submission ID HQ4-TKTG-WDXPX

## Form Input

### Type of Permit Application

Permit Type  
ARG500000 - Aggregate Facility

Are you constructing or installing a new treatment system?  
Yes

CORRECTION REQUEST (APPROVED)  
Change to "Yes" if constructing new pond.  
A pond counts as a treatment system. If you are going to construct a new pond, mark this as "Yes" and it will generate more sections of this form for information about the construction of the new pond.  
Created on 7/8/2024 2:04 PM by Ryan Grandgenett

Initial Fee (in dollars)  
200

Construction Fee  
There is a one-time \$500 fee for construction

Total Fee due with Application (in dollars)  
700

### ARG500000: Specific Information

Exclusions  
Please note that the following types of discharges are explicitly excluded from ARG500000 coverage:

- 1. Facilities producing sand for industrial use (as opposed to construction use)
- 2. Facilities conducting streambed mining as regulated by APC&EC Rule 15.403 or in-stream dredging operations as described by Section 404 of the Clean Water Act.

I certify that to the best of my knowledge, this facility is not subject to any of the exclusions listed above.  
Yes

CORRECTION REQUEST (CORRECTED)

Change to Yes

Created on 11/14/2024 9:55 AM by Ryan Grandgenett

### Other Exclusions

In addition to the above list, waterbody-specific exclusions and/or other exclusions may be applicable.

See the permit for details:

<https://www.adeq.state.ar.us/downloads/WebDatabases/PermitsOnline/NPDES/Permits/ARG500000.pdf>

The Aquaview application may be useful if you wish to check the status of receiving waters for the facility:

<https://arkansasdeq.maps.arcgis.com/apps/webappviewer/index.html?id=fb5a6aa70fd940cda4c9a3d7bc2fbb15>

### Geological Description of Site

The site is located within the Ozark Plateaus Province, specifically on the Salem Plateau. Hardrock mined at this location is Upper Ordovician to Middle Ordovician aged limestone with quarry depths to reach approximately 80-100 feet in depth. The topography slopes to the north draining to Curia Creek that flows east and southeast to the Black River.

### Chemicals used onsite coming into contact with water (if applicable)

None

### Site map

Please attach a site map that shows the following:

1. All outfalls discharging water at the site (including outfalls permitted under other NPDES permits),
2. Direction of stormwater flow onsite,
3. Areas of active and inactive mining,
4. Processing areas,
5. Location of potential pollutant sources, and
6. Nearby receiving waters.

### Site Map

[CordQuarrySiteMap.pdf - 07/02/2024 11:09 AM](#)

#### Comment

NONE PROVIDED

### Will the facility be using an existing process water pond not previously covered under the ARG500000 general permit, or converting a mine pit into a process water pond?

No, this facility is constructing a new process water pond and I have submitted plans and specifications in the construction section of this application

## Permittee Information

### AFIN (Enter if available)

32-00270

### Permittee (Legal Name)

The permittee means any person (an individual, association, partnership, corporation (i.e. LLC or Inc.), municipality, state, or federal agency) who has the primary management and ultimate decision-making responsibility over the operation of a facility or activity.

For individual homeowners, the permittee must be the name of the homeowner or homeowners, e.g. "Jane Doe" or "John and Jane Doe"

For corporations, the permittee legal name must be an EXACT MATCH with the Arkansas Secretary of State (including all punctuation). Below is a link to verify the match:

[Arkansas Secretary of State](#)

### Permittee (Legal Name)

Rogers Group, Inc.

**Permittee Type**  
Corporation/LLC

**State of Incorporation or Registration**  
Indiana

**State of Origin Secretary of State Certification**  
[RGI Indiana CertOfExist..pdf - 07/03/2024 04:47 PM](#)  
**Comment**  
NONE PROVIDED

**Permittee Mailing Information**

**Prefix**  
*Mr.*

<b>First Name</b>	<b>Middle Name</b>	<b>Last Name</b>
Nathan	NONE PROVIDED	Peterson

**Title**  
*Environmental Manager*

<b>Phone Type</b>	<b>Number</b>	<b>Extension</b>
Mobile	8172195526	

**Email**  
nathan.peterson@rogersgroupinc.com

**Address**  
1223 FRONT ST  
CONWAY, AR 72032

**Is the invoice address the same as the mailing address for permit documents?**  
No

**Invoice Address**

**Prefix**  
*Mr.*

<b>First Name</b>	<b>Middle Name</b>	<b>Last Name</b>
Erik	NONE PROVIDED	Knowles

**Title**  
NONE PROVIDED

<b>Phone Type</b>	<b>Number</b>	<b>Extension</b>
Mobile	6154189474	

**Email**  
NONE PROVIDED

**Address**  
421 Great Circle Road  
Nashville, TN 37228

**Is there an active consultant for this facility?**  
Yes

## Consultant Information

### Prefix

Mr.

### First Name

Jason

### Middle Name

NONE PROVIDED

### Last Name

MacDonald

### Title

Water Resources - Director

### Consulting Firm Name

Fisher Arnold

### Phone Type

Business

### Number

8709322019

### Extension

### Email

jmacdonald@fisherarnold.com

### Address

404 CREATH AVE

JONESBORO, AR 72401

United States

## Facility/Site Information

### Facility/Site Name

Cord Quarry

### Location of the Facility/Site

Please provide the 911 address if available. If a 911 address is not available, please provide a description of the site location (e.g. 0.5 miles north of intersection of A Street and B Street).

## Facility/ Site Information

### Facility/Site Contact

#### Prefix

NONE PROVIDED

#### First Name

Dwayne

#### Middle Name

NONE PROVIDED

#### Last Name

Gabbard

#### Title

Area Manager

#### Phone Type

Mobile

#### Number

4794096989

#### Extension

#### Email

dwayne.gabbard@hunt-rogers.com

### Facility/Site Address

500 BRADLEY LN

CORD, AR 72524

### Facility County (if the facility/site is in multiple counties, choose "other" and explain)

Independence

### Coordinates of the Facility/Site Entrance. This should be the driveway or front gate for most facilities, or the location of the project trailer/other local staging point for hydrostatic testing

35.86025692260538,-91.32964611053467

## Common SIC & NAICS Codes

Facility Type	SIC Code	NAICS Code
Individual Homeowner (sewage treatment)	4952	221320

Facility Type	SIC Code	NAICS Code
Solid Waste Landfill	4953	562212
Construction Sand and Gravel	1442	212321
Crushed and Broken Limestone	1422	212321
Crushed and Broken Stone, Not Elsewhere Classified	1429	212319
Water Supply	4941	221310
Carwashes	7542	811192

**For other SIC and NAICS codes, you can search the following website:**

<https://www.naics.com/search/>

**Primary SIC Code**

1422

**Primary NAICS Code**

212321

**Other applicable SIC codes and/or NAICS codes**

NONE PROVIDED

**Permit Numbers and/or names of any permits issued by DEQ or EPA for an activity located in Arkansas that is presently held by the applicant or its parent or subsidiary corporation**

Permit Name	Permit Number	Held By
NPDES Industrial Stormwater Permit	ARR00C465	Rogers Group, Inc.
AR General Air Permit	1916-AGP-019	Rogers Group, Inc.
AR Mining Permit	0756-MN	Rogers Group, Inc.

**Licensed Wastewater Operator(s) (if applicable). ARG55 coverage requires a Class II Municipal or higher license. ARG64 coverage requires a Class I Municipal or Basic Industrial, or higher license. ARG16 and ARG79 coverage requires a Basic Industrial or higher license or higher. ARG67 coverage does not require a licensed operator. Other ARG coverage may or may not require a licensed operator depending on the type of treatment, see the permits for details.**

Operator Name	License Number	Municipal License Class	Industrial License Class
---------------	----------------	-------------------------	--------------------------

## Discharge/Outfall Information

### Receiving Stream Information

Below is a link the DEQs AquaView Mapping Tool that may be useful for receiving stream information and ultimate receiving stream information. You can also check for special waterbody designations and impairments that could exclude discharges from coverage under a general permit.

[Aquaview](#)

**The outfall latitude and longitude must be entered in decimal format (like 36.1234, -92.1234). Do you have a Degree/Minute/Second measurement (like 36°12'34.56", 92°12'34.56") that you need to convert?**

No

### Outfall Information

Outfall Number	Latitude	Longitude	Estimated Flow - Please include units, such as MGD or GPD	Effluent Description	Name of Receiving Stream (i.e. an unnamed tributary of Mill Creek, thence into Mill Creek, thence into the Arkansas River)	Type of Treatment System (Include all components of the treatment system. Can be "none" if no treatment is used)	Coordinates Check
003	35.862783	-91.330656	0.72 MGD	Aggregate Wash Water	Curia Creek	Sedimentation	NONE PROVIDED
NONE PROVIDED	NONE PROVIDED	NONE PROVIDED	NONE PROVIDED	NONE PROVIDED	NONE PROVIDED	NONE PROVIDED	NONE PROVIDED
NONE PROVIDED	NONE PROVIDED	NONE PROVIDED	NONE PROVIDED	NONE PROVIDED	NONE PROVIDED	NONE PROVIDED	NONE PROVIDED

**CORRECTION REQUEST (APPROVED)**

**Needs an estimated amount of flow**

Created on 7/8/2024 1:53 PM by **Ryan Grandgenett**

**Responsible and Cognizant Official Information**

**Cognizant Official (duly authorized representative)**

40 CFR 122.22(b) states that all reports required by the permit, or other information requested by the Director, shall be signed by the applicant (or person authorized by the applicant) or by a duly authorized representative of that person. A person is a duly authorized representative only if:

- (1) the authorization is made in writing by the applicant (or person authorized by the applicant);
- (2) the authorization specifies either an individual or a position having responsibility for the overall operation of the regulated facility or activity responsibility, or an individual or position having overall responsibility for environmental matters for the company.

**Cognizant Official Designation**

More than one Cognizant Official is designated for this facility

The applicant hereby designates the following person as a Cognizant Official, or duly authorized representative, for signing reports, etc., including Discharge Monitoring Reports (DMR) required by the permit, and other information requested by the Director:

**Cognizant Official**

**Prefix**

Mr.

**First Name**

Nathan

**Middle Name**

NONE PROVIDED

**Last Name**

Peterson

**Title**

Environmental Manager

**Phone Type**

**Number**

**Extension**

Mobile

8172195526

**Email**

nathan.peterson@rogersgroupinc.com

The applicant hereby designates the following additional person(s) as Cognizant Official(s), or duly authorized representative(s), for signing reports, etc., including Discharge Monitoring Reports (DMR) required by the permit, and other information requested by the Director:

### Additional Cognizant Officials

Name	Title	Telephone	Email
Erik Knowles	Dir. Environmental Services	6154189474	erik.knowles@rogersgroupinc.com

### Responsible Official

In accordance with 40 CFR 122.22, all NOI shall be signed as follows:

- 1) For a corporation: by a responsible corporate officer. For purposes of this section, a responsible corporate officer means:
  - a. A president, treasurer, or vice-president of the corporation in charge of a principal business function, or any other person who performs similar policy or decision-making functions for the corporation; or
  - b. The manager of one or more manufacturing, production, or operating facilities, provided, the manager is authorized to make management decisions which govern the operation of the regulated facility including having the explicit or implicit duty of making major capital investment recommendations, and initiating and directing other comprehensive measures to ensure long term environmental compliance with environmental laws and regulations; the manager can ensure that the necessary systems are established or actions taken to gather complete and accurate information for permit application requirements; and where authority to sign documents has been assigned or delegated to the manager in accordance with corporate procedures.
- 2) For a partnership or sole proprietorship: by a general partner or the proprietor, respectively;
- 3) For a municipality, State, Federal or other public agency: by either a principal executive or ranking elected official. For purposes of this section, a principal executive officer of a Federal agency includes:
  - a. The chief executive officer of the agency; or
  - b. A senior executive officer having responsibility for the overall operations of a principal geographic unit of the agency.

For individual homeowners seeking coverage under the ARG550000 general permit, the homeowner is the responsible official. For joint ownership, one of the co-owners must sign as the responsible official.

### Responsible Official Information

**Prefix**

Mr.

**First Name**

Nathan

**Middle Name**

NONE PROVIDED

**Last Name**

Peterson

**Title**

Manager of Environmental Services

**Phone Type**

Mobile

**Number**

8172195526

**Extension****Email**

nathan.peterson@rogersgroupinc.com

**CORRECTION REQUEST (CORRECTED)****Change to Nathan Peterson's information**

Internal review has decided that Nathan Peterson is qualified to be the RO. Change the RO to Mr. Peterson so that his certification signature is valid.

Created on 11/14/2024 9:55 AM by **Ryan Grandgenett**

### Disclosure Statement or SEC Forms

Ark. Code Ann. 8-1-106 requires that applicants for any type of permit or transfer of any permit, license, certification or operational authority issued by the DEQ file a Disclosure Statement with their application unless exempt for doing so under Ark. Code Ann. 8-1-106(b)(2). The filing of a Disclosure Statement is mandatory. No application can be considered administratively complete without a completed Disclosure Statement unless that facility is exempt. Publicly traded companies may submit the most recent 10-K and 10-Q filings to the Securities and Exchange Commission (SEC) in lieu of the Disclosure Statement.

[https://www.adeq.state.ar.us/ADEQ\\_Disclosure\\_Statement.pdf](https://www.adeq.state.ar.us/ADEQ_Disclosure_Statement.pdf)

**Disclosure Statement**

I will attach a disclosure statement

## Disclosure Statement or SEC 10-K and 10-Q forms

[adeq-disclosure-statementCORD.pdf - 07/02/2024 05:44 PM](#)

### Comment

NONE PROVIDED

## Construction Forms

DEQ Form 1 is available at the following links:

[pdf version](#)

[word version](#)

Please attach DEQ Form 1 here

[form1.pdf - 07/10/2024 01:12 PM](#)

### Comment

NONE PROVIDED

**One set of construction plans and specifications, approved (signed and stamped) by a Professional Engineer (PE) registered in Arkansas, must be submitted as follows:**

- The plans must show flow rates in addition to pertinent dimensions so that detention times, overflow rates, and loadings per acre, etc. can be calculated.
- Specifications and complete design calculations.
- All treated wastewater discharges should have a flow measuring device such as a weir or Parshall flume installed after the final treatment unit. Where there is a significant difference between the flow rates of the raw and treated wastewater, a flow measuring device should be provided both before and after treatment.
- The plans and specifications must be final documents. Plans and specifications marked "preliminary", "for review only", or "not for construction" are not acceptable.

**Upload plans, specifications, and design calculations**

[CordQuarryPondEngineering\\_DEQ.pdf - 07/10/2024 01:13 PM](#)

[Cord Process Water Pond Civil Sheets.pdf - 09/25/2024 12:42 PM](#)

### Comment

NONE PROVIDED

If the construction activity will disturb 5 acres or more of land, you must obtain separate coverage under the general permit for stormwater discharges associated with construction activity (ARR150000). A separate application through ePortal is required for the construction stormwater coverage.

## Revisions

Revision	Revision Date	Revision By
Revision 1	7/2/2024 8:55 AM	Nathan Peterson
Revision 2	7/8/2024 2:49 PM	Nathan Peterson
Revision 3	9/25/2024 12:41 PM	Nathan Peterson
Revision 4	11/14/2024 12:11 PM	Nathan Peterson



## Agreements and Signature(s)

---

### **SUBMISSION AGREEMENTS**

- ☒ I am the owner of the account used to perform the electronic submission and signature.
- ☒ I have the authority to submit the data on behalf of the facility I am representing.
- ☒ I agree that providing the account credentials to sign the submission document constitutes an electronic signature equivalent to my written signature.
- ☒ I have reviewed the electronic form being submitted in its entirety, and agree to the validity and accuracy of the information contained within it to the best of my knowledge.

*"I certify that, if this facility is a corporation, it is registered with the Secretary of the State of Arkansas. I certify that the cognizant official designated in this Application is qualified to act as a duly authorized representative under the provisions of 40 CFR 122.22(b). If no cognizant official has been designated, I understand that the Division will accept reports signed only 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 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."*

**Signed**  
**By** Nathan Peterson on 11/14/2024 at 12:18 PM

**State of Indiana**  
**Office of the Secretary of State**

CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

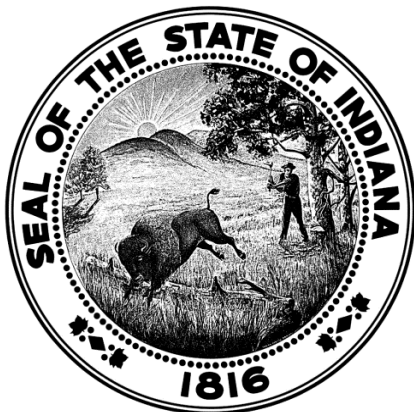
I, DIEGO MORALES, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

**ROGERS GROUP, INC.**

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on December 01, 1977, and was in existence or authorized to transact business in the State of Indiana on April 23, 2024.

I further certify this Domestic For-Profit Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution, or expiration has been filed or taken place. All fees, taxes, interest, and penalties owed to Indiana by the domestic or foreign entity and collected by the Secretary of State have been paid.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, April 23, 2024

*Diego Morales*

DIEGO MORALES  
SECRETARY OF STATE

197712-028 / 20243732272

All certificates should be validated here: <https://bsd.sos.in.gov/ValidateCertificate>

Expires on May 23, 2024.



July 3, 2024

Arkansas Department of Environmental Quality  
Office of Water Quality  
5301 Northshore Drive  
North Little Rock, AR 72118-5317

**RE: Rogers Group, Inc. – Cord Quarry  
NPDES ARG500000 Permit Application  
Process Water Pond Design  
Independence, Arkansas**

To whom it may concern:

Rogers Group, Inc. has applied for an NPDES ARG500000 general discharge permit for the process water used in aggregate washing. A process water pond will be designed for this project, and Rogers Group has contracted a Professional Engineer based in Jonesboro, AR to perform the engineering of the pond. Jason MacDonald, a licensed Professional Engineer (PE), holds the position of Water Resource Director at Fisher Arnold. He will be responsible for overseeing the design work and serving as the primary engineer for this project.

If you have any questions or need any additional information, please do not hesitate to contact me at (817) 219-5526.

Sincerely,



*Nathan Peterson*

Nathan Peterson, PG  
Environmental Manager





Scale: 1:6,000

-  Cord Boundary  
224-Acres
-  SWPPP\_Outfalls

Map By: N Peterson

DATUM: NAD 1983 (2011) StatePlane  
Arkansas North FIPS 0301 (US Feet)

Cord Quarry  
Cord, Arkansas  
Independence County  
June, 2024





ROGERS GROUP, INC.  
SAND PROCESS  
WATER POND  
CONSTRUCTION PLANS  
500 BRADLEY LANE  
CORD, INDEPENDENCE COUNTY, ARKANSAS



SHEET INDEX	
PAGE	DESCRIPTION
C1.01	COVER SHEET
C2.01	SWPPP
C3.01	SITE PLAN
C3.02	POND CROSS SECTION VIEW
C3.03	POND CROSS SECTION VIEW
C5.01	SWPPP/SITE DETAILS

VICINITY MAP

(NOT TO SCALE)



Know what's below.  
Call before you dig.

COVER SHEET

SAND PROCESS WATER POND DESIGN  
CORD, INDEPENDENCE COUNTY, ARKANSAS



JASON MACDONALD - CIVIL  
ARKANSAS - PE # 14044



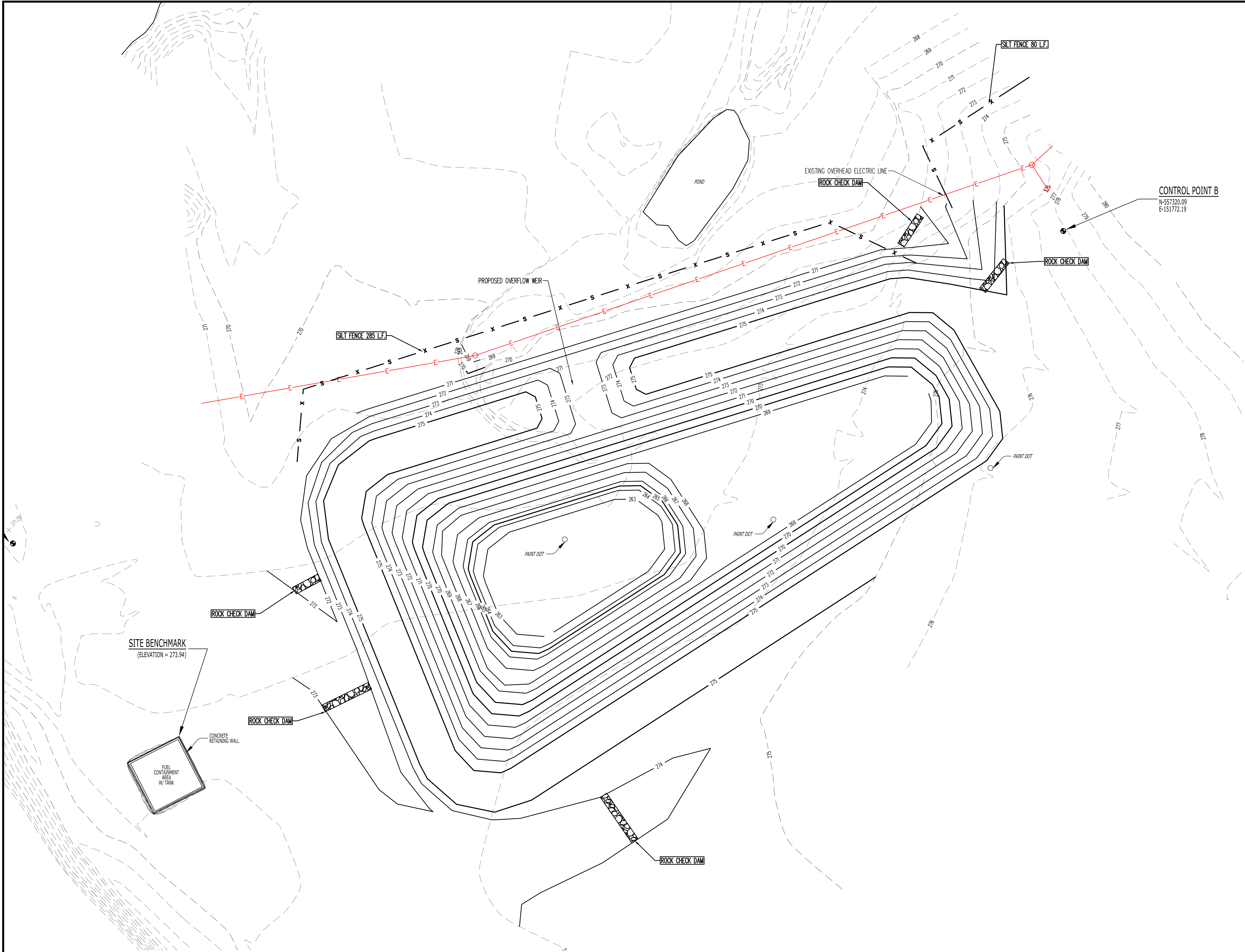
FISHER & ARNOLD, INC.  
Arkansas - 248

CLIENT:  
ROGERS GROUP, INC.

COPYRIGHT 2022, ALL RIGHTS RESERVED

REVISIONS		
DATE	BY	DESCRIPTION
PROJECT NO.		
ROGRSGRP.0001LD		
DRAWN BY		CHECKED BY
JAM		JAM
DATE	SCALE	
9-05-2024	NTS	
SHEET		
C1.01		





LEGEND:

- FOUND MONUMENT (AS NOTED)
- ▲ COMPUTED POINT (NOT MONUMENTED)
- UTILITY POLE
- LIGHT POLE
- PAD MOUNTED TRANSFORMER
- GUY WIRE
- TRAFFIC SIGNAL BOX
- TRAFFIC SIGNAL POLE
- WATER VALVE
- FIRE HYDRANT
- SANITARY SEWER MANHOLE
- STORM DRAIN MANHOLE
- GAS VALVE
- GAS RISER
- GAS BLOW-OFF
- TELECOMMUNICATIONS PEDESTAL
- TELECOMMUNICATIONS BOX
- SANITARY SEWER LINE MARKER
- BURIED CABLE MARKER
- REINFORCED CONCRETE PIPE
- CORRUGATED PLASTIC PIPE
- BOUNDARY LINE
- OVERHEAD ELECTRIC LINE
- UNDERGROUND ELECTRIC LINE
- WATER LINE
- SANITARY SEWER FORCE MAIN
- SANITARY SEWER LINE
- TELECOMMUNICATIONS LINE
- GAS LINE

EROSION CONTROL

- SILT FENCE
- 1.0% EXISTING SLOPES
- 0.0% PROPOSED SLOPES
- ROCK CHECK DAM
- INLET PROTECTION

GENERAL NOTES:

- THE STORM WATER POLLUTION PREVENTION PLAN (SWPPP) MEASURES PRESENTED ON THIS PLAN ARE INTENDED TO MINIMIZE POLLUTANT LOADS OCCURRING IN STORM WATER DISCHARGES FROM THE CONSTRUCTION SITE.
- THE CONTROL MEASURES SHALL BE PROPERLY SELECTED, INSTALLED, AND MAINTAINED IN ACCORDANCE WITH THE MANUFACTURER'S SPECIFICATIONS, GOOD ENGINEERING, AND CONSTRUCTION PRACTICES.
- IF THERE ARE ANY QUESTIONS REGARDING PERMIT COMPLIANCE, IT IS THE RESPONSIBILITY OF THE RESPONSIBLE OFFICIAL AND/ OR THE GENERAL CONTRACTOR'S TO REFER TO THE AR150000 PERMIT AND/ OR THE ENGINEER OF RECORD.
- THE OPERATOR, RESPONSIBLE COGNIZANT OFFICIAL IS REQUIRED TO PROVIDE A DESCRIPTION OF MEASURES THAT WILL BE INSTALLED DURING THE CONSTRUCTION PROCESS TO CONTROL POLLUTANTS IN STORMWATER DISCHARGES THAT WILL OCCUR AFTER CONSTRUCTION IS COMPLETE TO ENSURE MINIMIZING POLLUTANT DISCHARGE UNTIL FINAL STABILIZATION IS OBTAINED.
- AREAS WHERE CONSTRUCTION ACTIVITIES HAVE TEMPORARILY CEASED, STABILIZATION MEASURES MUST BE TAKEN NO LATER THAN 14 CALENDAR DAYS AFTER CONSTRUCTION ACTIVITIES HAVE CEASED; AREAS WHERE CONSTRUCTION ACTIVITIES HAVE PERMANENTLY CEASED, STABILIZATION MEASURES MUST BE TAKEN IMMEDIATELY.

EROSION AND SEDIMENT CONTROL NOTES:

- INSTALL EROSION AND SEDIMENT CONTROL MEASURES AND CONSTRUCTION ENTRANCES AT LOCATIONS AS INDICATED ON PLANS PRIOR TO EARTHWORK.
- ALL EROSION AND SEDIMENT CONTROL MEASURES SHALL BE LOCATED AND MAINTAINED SUCH THAT THE LOCATION DOES NOT INTERFERE WITH CONSTRUCTION ACTIVITIES.
- CONTRACTOR SHALL BE RESPONSIBLE TO MAINTAIN ALL EROSION AND SEDIMENT CONTROL MEASURES ON SITE WITH ACCORDANCE WITH AR150000.
- HAY BALES, WATTLES, AND ADDITIONAL RIP RAP OR SILT FENCE THAN WHAT IS SHOWN ON PLAN ARE TO BE UTILIZED IN ORDER TO MINIMIZE SUSPENDED SOLIDS ON STORMWATER RUNOFF IF NECESSARY.

GENERAL NOTES: EROSION BALES

- DESCRIPTION: STRAW OR HAY EROSION BALES MAY BE USED AS FILTERS ALONG THE TOE OF FILL SLOPES, AS EROSION CHECKS IN DITCHES, AND AS SEDIMENT TRAPS AT INLETS AND OUTLETS. STRAW BALES MAY BE PLACED BELOW FILL SLOPES TO PROTECT ROADS, AND AS ENERGY DISSIPATORS FOR HIGH VELOCITY RUNOFF.
- CONSTRUCTION: BALES SHALL BE LAID TO MAINTAIN TIGHT JOINTS. EROSION BALES WILL NOT FILTER SEDIMENT OUT OF WATER IF THE WATER IS ALLOWED TO FLOW BETWEEN, AROUND, OR UNDERNEATH THE BALES. THE BALES SHOULD BE ENTRENCHED 6 INCHES AND ANCHORED SECURELY.
- MAINTENANCE: EROSION BALES REQUIRE FREQUENT INSPECTION AS THEY DETERIORATE QUICKLY AND MAY NEED TO BE REPLACED. WHEN NO LONGER NEEDED, THE ACCUMULATED SEDIMENT SHALL BE SPREAD, SEED, AND MULCHED WITH THE EROSION BALES AS APPROVED BY COGNIZANT OFFICIAL OR DULY AUTHORIZED REPRESENTATIVE.
- HAY BALES ARE A TEMPORARY MEASURE ONLY. THEY SHALL BE INSTALLED, REPAIRED OR REPLACED AT THE DIRECTION OF THE COGNIZANT OFFICIAL OF DULY AUTHORIZED REPRESENTATIVE.

INSPECTIONS AND MAINTAINENCE:

- AN INSPECTION SHALL BE MADE EVERY 7 DAYS. INSPECTION FORMS CAN BE FOUND ON DEQ'S WEBSITE AT WWW.ADEQ.STATE.AR.US
- ALL OBSERVED DEFICIENCIES IN BEST MANAGEMENT PRACTICES (BMP'S) SHALL BE RECORDED ON THE INSPECTION FORM, AND ANY REPAIRS THAT ARE NEEDED BASED ON AN INSPECTION SHALL BE COMPLETED BEFORE THE NEXT STORM EVENT; BUT NOT TO EXCEED OF PERIOD OF THREE (3) DAYS FROM DISCOVERY.
- SEDIMENT SHALL BE REMOVED BEHIND SILT FENCING OR STRAW BALES ONCE THE CAPACITY OF THE RESPECTIVE BMP HAS REACHED 50%.
- IN THE EVENT THAT WEATHER DOESN'T NOT ALLOW SAFE ACCESS TO THE SITE (IE. LOCAL FLOODING, HIGH WINDS, OR EXTENDED FROZEN CONDITIONS) AN INSPECTION SHALL BE COMPLETED AS SOON AS IT IS SAFE AND FEASIBLE.
- EACH INSPECTION REPORT SHALL BE RETAINED AS PART OF THE SWPPP FOR AT LEAST THREE (3) YEARS FROM THE DATE THE SITE IS FINALLY STABILIZED.



Know what's below.  
Call before you dig.



**FISHER ARNOLD**  
ENGINEERS | ARCHITECTS | CONSULTANTS | PLANNERS

404 CREATH AVE. | JONESBORO, AR 72401  
870.932.2019 | Fax: 870.932.1076 | www.fisherarnold.com

SWPPP

SAND PROCESS WATER POND DESIGN  
CORD, INDEPENDENCE COUNTY, ARKANSAS



JASON MACDONALD - CIVIL  
ARKANSAS - PE # 14044



FISHER & ARNOLD, INC.  
Arkansas - 248

CLIENT:  
ROGERS GROUP, INC.

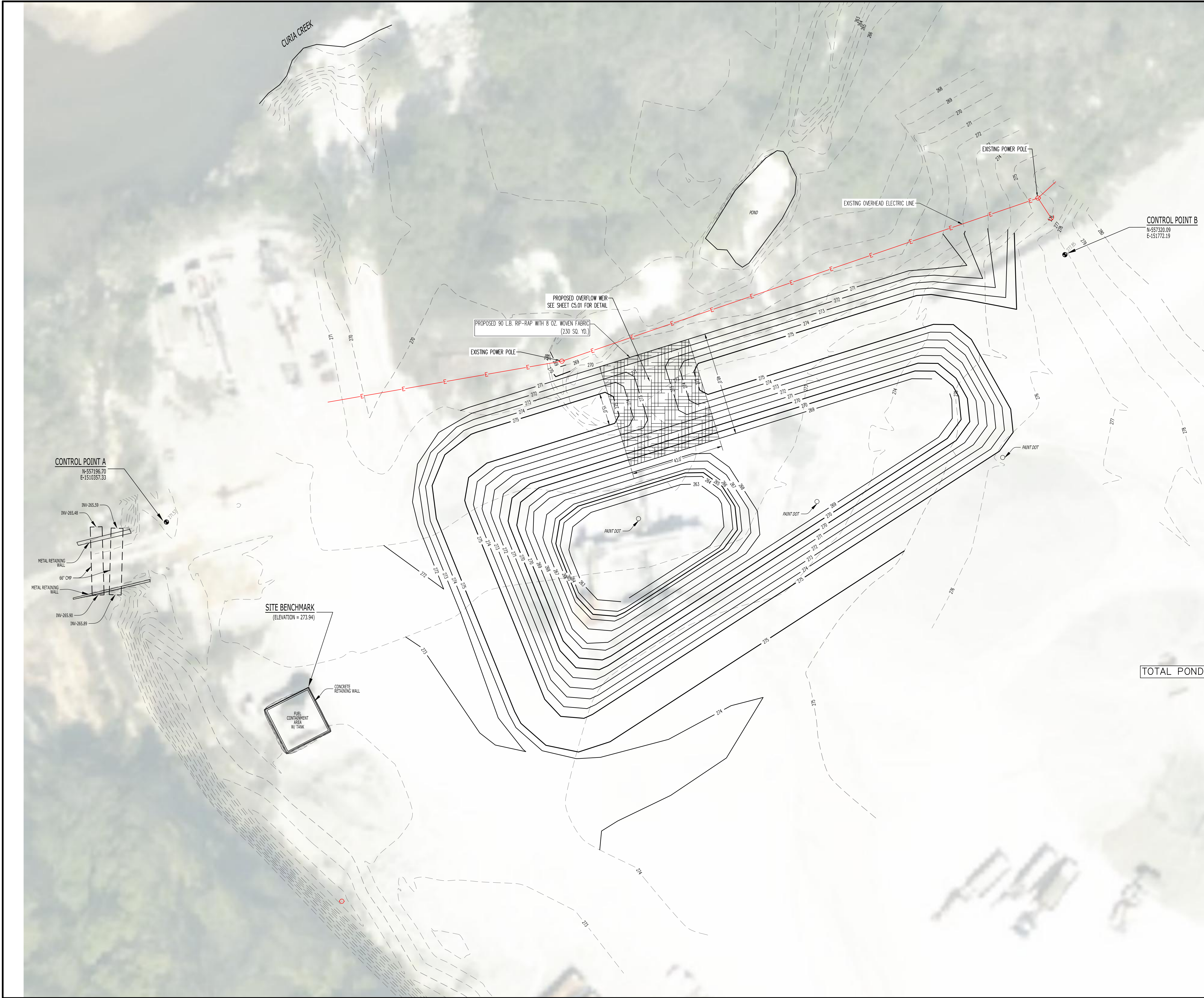
COPYRIGHT 2022, ALL RIGHTS RESERVED

REVISIONS		
DATE	BY	DESCRIPTION

PROJECT NO. ROGRSGRP.0001LD	
DRAWN BY JAM	CHECKED BY JAM
DATE 9-05-2024	SCALE 1"=20'

SHEET  
C2.01





**LEGEND:**

- FOUND MONUMENT (AS NOTED)
- ▲ COMPUTED POINT (NOT MONUMENTED)
- UTILITY POLE
- LIGHT POLE
- PAD MOUNTED TRANSFORMER
- GUY WIRE
- TRAFFIC SIGNAL BOX
- TRAFFIC SIGNAL POLE
- WATER VALVE
- FIRE HYDRANT
- SANITARY SEWER MANHOLE
- STORM DRAIN MANHOLE
- GAS VALVE
- GAS RISER
- GAS BLOW-OFF
- TELECOMMUNICATIONS PEDESTAL
- TELECOMMUNICATIONS BOX
- SANITARY SEWER LINE MARKER
- BURIED CABLE MARKER
- REINFORCED CONCRETE PIPE
- CORRUGATED PLASTIC PIPE
- BOUNDARY LINE
- OVERHEAD ELECTRIC LINE
- UNDERGROUND ELECTRIC LINE
- WATER LINE
- SANITARY SEWER FORCE MAIN
- SANITARY SEWER LINE
- TELECOMMUNICATIONS LINE
- GAS LINE

- ENGINEERING NOTES:**
- CONTRACTOR IS RESPONSIBLE FOR INSTALLING AND MAINTAINING ADEQUATE EROSION/SEDIMENTATION CONTROL DURING ALL PHASES OF CONSTRUCTION.
  - CONTRACTOR IS RESPONSIBLE FOR KEEPING MUD AND DEBRIS OFF CITY STREETS AND OFF OF PAVED DRIVEWAYS WHERE APPLICABLE. CLEAN UP IS REQUIRED DAILY.
  - DEVIATION FROM ENGINEERING DESIGN PLANS IS NOT PERMITTED. ANY CHANGE IN THE CONSTRUCTION DOCUMENTS THAT ARE NOT APPROVED BY THE ENGINEER WILL RESULT IN CONSTRUCTION TERMINATION UNTIL A RESOLUTION IS MET. MODIFICATION NEEDED TO UPDATE DESIGN PLANS WILL RESULT IN DESIGN EXPENSES FOR THE CONTRACTOR.
  - CONTRACTOR SHALL NOTIFY THE ENGINEER AND OWNER OF ANY INFORMATION FOUND IN THE FIELD THAT IS DIFFERENT FROM WHAT IS SHOWN ON THESE DESIGN PLANS.
  - ALL DISTURBED AREAS ARE TO BE STABILIZED UPON COMPLETION OF EARTHWORK (SEE SPECIFICATION).
  - CONTRACTOR IS RESPONSIBLE FOR ALL CITY, STATE, OR FEDERAL PERMIT FEES ASSOCIATED WITH CONSTRUCTION.
  - ALL EXISTING UTILITIES/FACILITIES SHOWN ON THE PLANS ARE APPROXIMATE. THE CONTRACTOR SHALL FIELD VERIFY UTILITIES IN CONFLICT PRIOR TO CONSTRUCTION.
  - ALL DAMAGES TO THE EXISTING FACILITIES/UTILITIES CAUSED BY CONSTRUCTION SHALL BE REPAIRED OR REPLACED AT THE CONTRACTOR'S EXPENSE.
  - CONTRACTOR SHALL ENSURE POSITIVE DRAINAGE FOR THE SITE.

- GEOTECH NOTES:**
- RECOMMENDED THAT ANY LEVEE AND POND REQUIRED FOR DETENTION OF WATER BE CONSTRUCTED WITH A MINIMUM 2 FT LAYER OF CL OR CH. THE BORROWED CLAY SHOULD HAVE A MINIMUM P.I. OF 20%, A MINIMUM OF 50% OF FINES PASSING THE #200 SIEVE, AND A COEFFICIENT OF PERMEABILITY OF  $10^{-5}$  CM/SEC. THE IN-SITU SOIL WILL NOT DETAIN WATER OVER TIME.
  - POSITIVE DRAINAGE SHOULD BE ESTABLISHED AT THE START OF THE PROJECT AND MAINTAINED THROUGHOUT CONSTRUCTION. GROUNDWATER WAS ENCOUNTERED WITHIN 12 FT BELOW THE CURRENT GRADES AT 2 LOCATION ONLY: BORING B-1 AND B-4.

TOTAL POND VOLUME = 1,085,408 GALLONS

**811**  
Know what's below.  
Call before you dig.

20 0 20 40  
GRAPHIC SCALE 1"=20'

**FISHER ARNOLD**  
ENGINEERS | ARCHITECTS | CONSULTANTS | PLANNERS  
404 CREATH AVE. | JONESBORO, AR 72401  
870.932.2019 | Fax: 870.932.1076 | www.fisherarnold.com

**SITE PLAN**  
SAND PROCESS WATER POND DESIGN  
CORD, INDEPENDENCE COUNTY, ARKANSAS

STATE OF ARKANSAS  
REGISTERED PROFESSIONAL ENGINEER  
No. 14044  
JASON MACDONALD

JASON MACDONALD - CIVIL  
ARKANSAS - PE # 14044

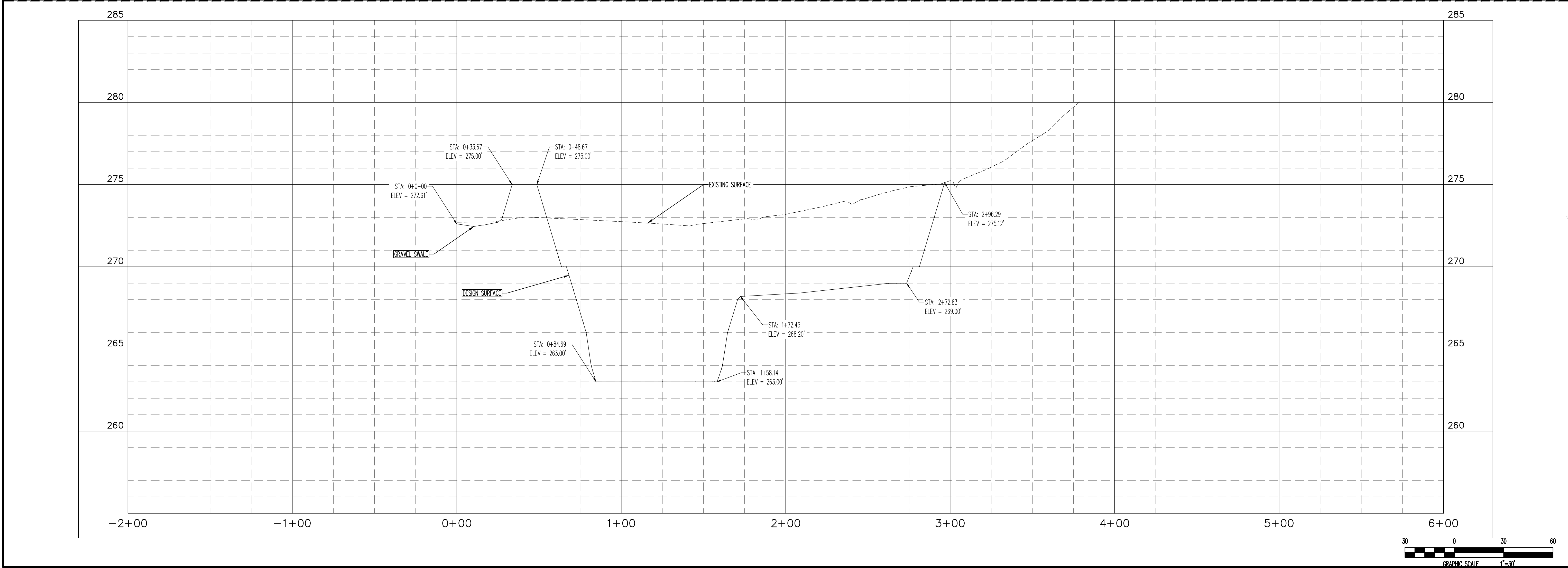
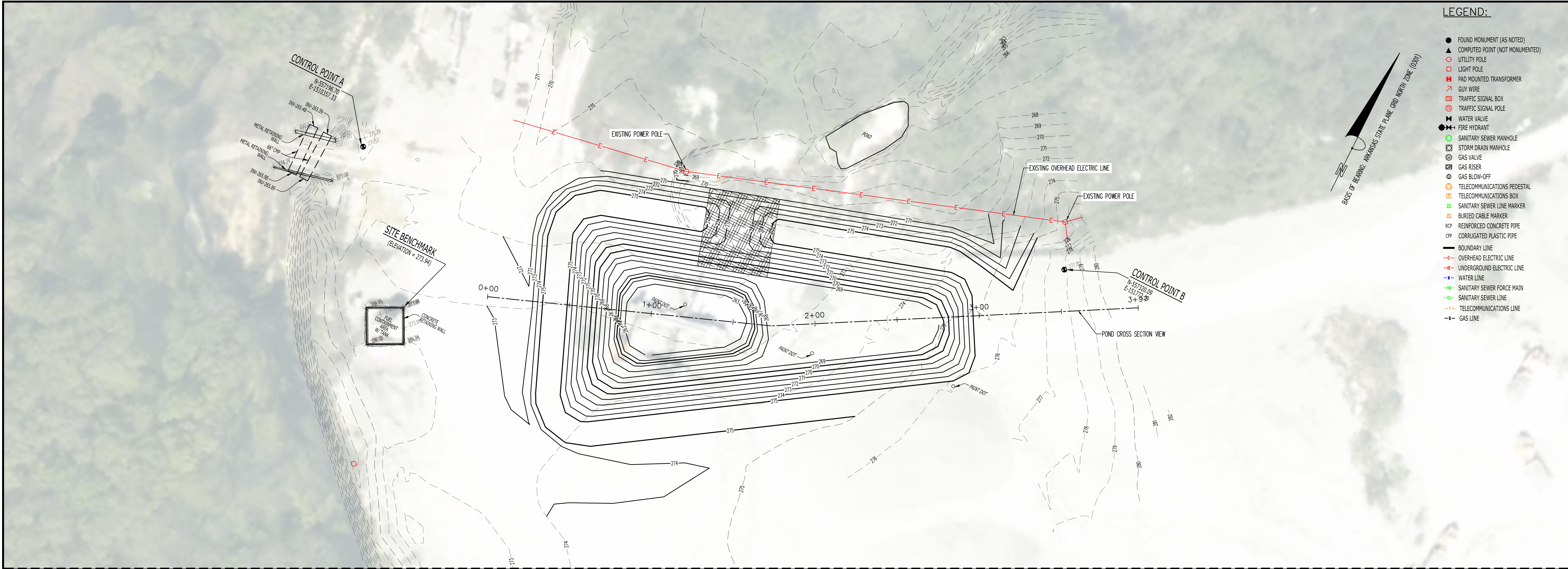
CERTIFICATE OF AUTHORIZATION  
FISHER & ARNOLD, INC.  
No. 248  
ARKANSAS

FISHER & ARNOLD, INC.  
Arkansas - 248  
CLIENT:  
ROGERS GROUP, INC.  
COPYRIGHT 2022, ALL RIGHTS RESERVED

REVISIONS		
DATE	BY	DESCRIPTION

PROJECT NO.  
ROGRSGRP.0001LD  
DRAWN BY  
JAM  
CHECKED BY  
JAM  
DATE  
9-05-2024  
SCALE  
1"=20'  
SHEET  
C3.01





**FISHER & ARNOLD**  
ENGINEERS | ARCHITECTS | CONSULTANTS | PLANNERS  
404 CREATH AVE. | JONESBORO, AR 72401  
870.932.2019 | Fax: 870.932.1076 | www.fisherarnold.com

**CROSS SECTION VIEW**  
SAND PROCESS WATER POND DESIGN  
CORD, INDEPENDENCE COUNTY, ARKANSAS

STATE OF ARKANSAS  
REGISTERED PROFESSIONAL ENGINEER  
No. 14044  
JASON MACDONALD

seal

JASON MACDONALD - CIVIL  
ARKANSAS - PE # 14044

CERTIFICATE OF AUTHORITY  
FISHER & ARNOLD, INC.  
No. 248  
ARKANSAS

seal

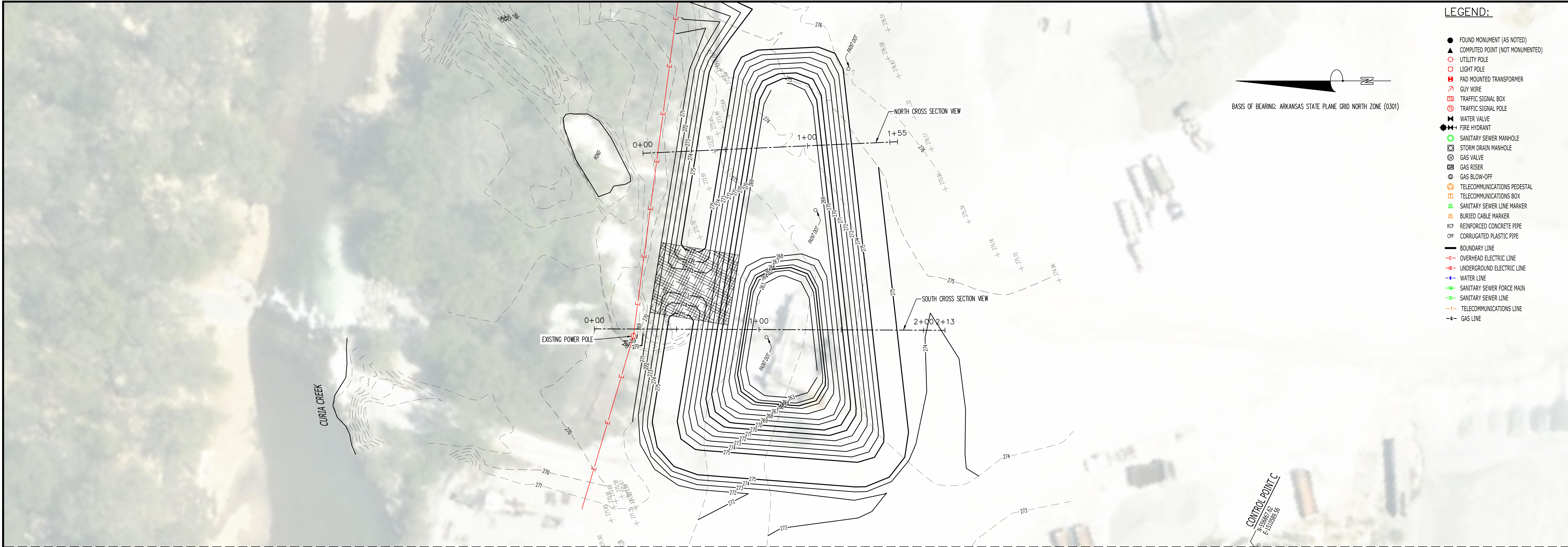
FISHER & ARNOLD, INC.  
Arkansas - 248  
CLIENT:  
ROGERS GROUP, INC.  
COPYRIGHT 2022, ALL RIGHTS RESERVED

REVISIONS		
DATE	BY	DESCRIPTION

PROJECT NO.	
ROGRSGRP.0001LD	
DRAWN BY	CHECKED BY
JAM	JAM
DATE	SCALE
9-05-2024	1"=30'

SHEET  
C3.02



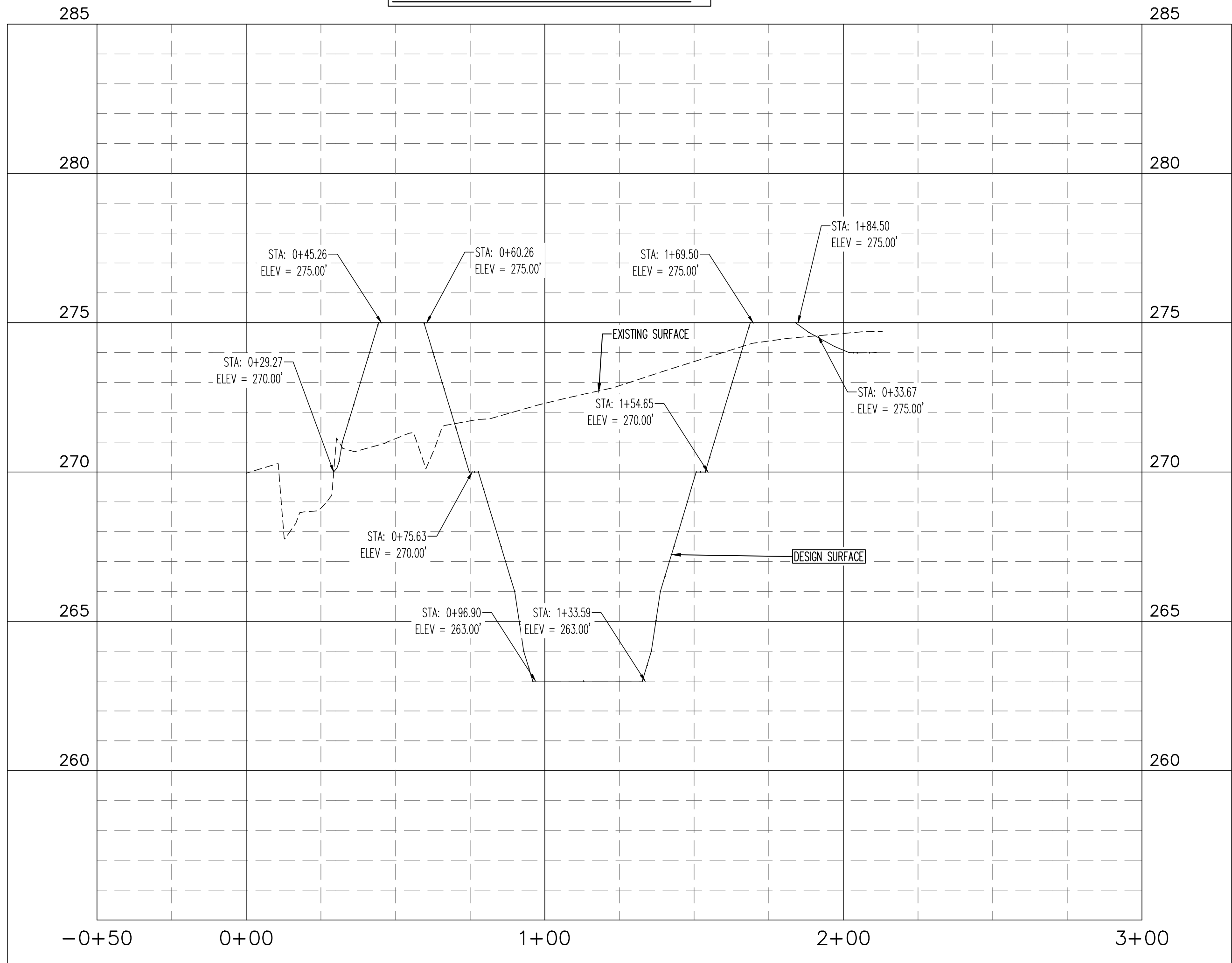


LEGEND:

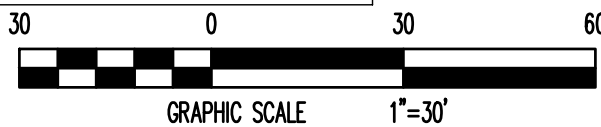
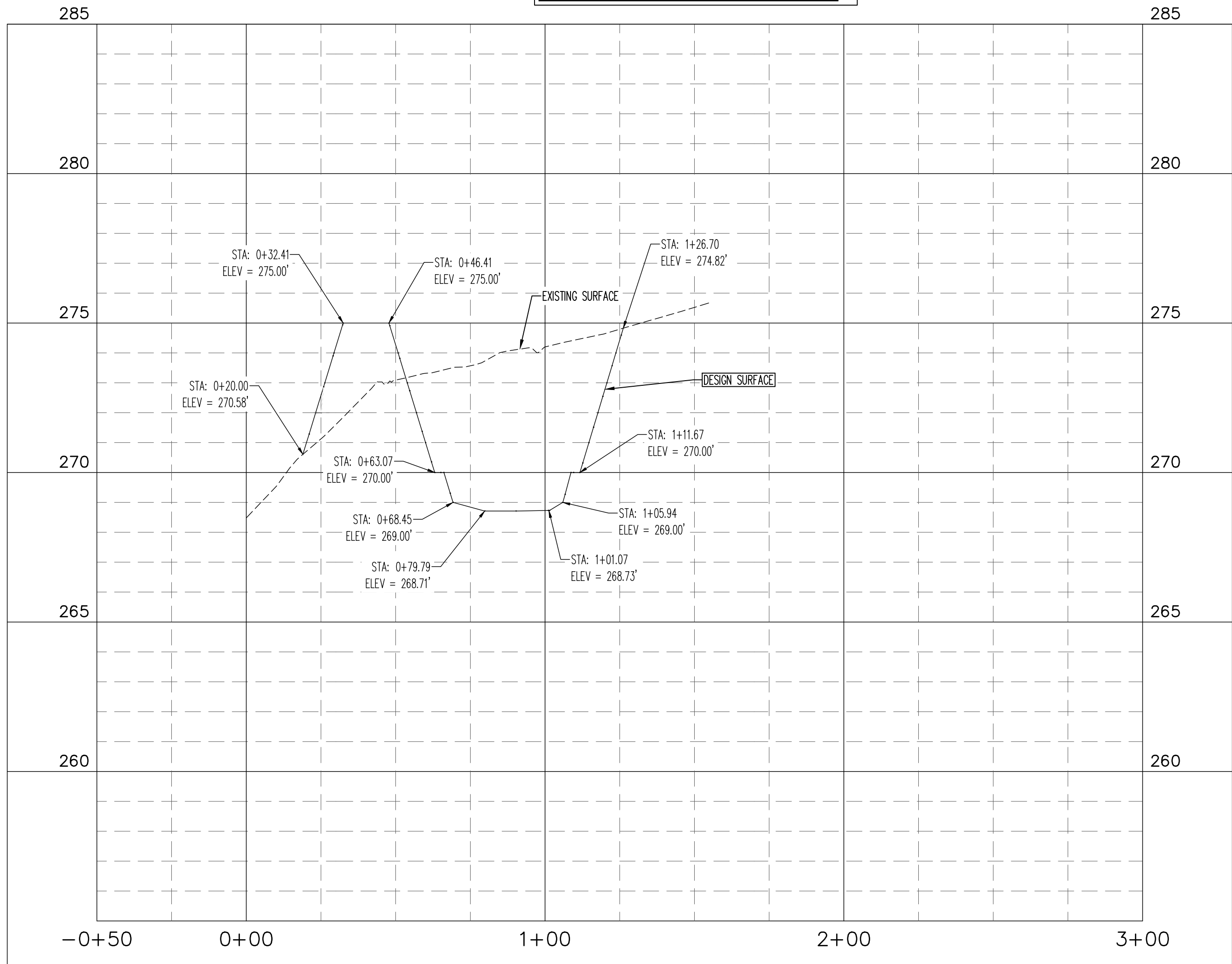
- FOUND MONUMENT (AS NOTED)
- ▲ COMPUTED POINT (NOT MONUMENTED)
- UTILITY POLE
- LIGHT POLE
- PAD MOUNTED TRANSFORMER
- GUY WIRE
- TRAFFIC SIGNAL BOX
- TRAFFIC SIGNAL POLE
- ⊕ WATER VALVE
- ⊕ FIRE HYDRANT
- SANITARY SEWER MANHOLE
- STORM DRAIN MANHOLE
- ⊕ GAS VALVE
- ⊕ GAS RISER
- ⊕ GAS BLOW-OFF
- ⊕ TELECOMMUNICATIONS PEDESTAL
- TELECOMMUNICATIONS BOX
- SANITARY SEWER LINE MARKER
- BURIED CABLE MARKER
- ⊕ REINFORCED CONCRETE PIPE
- ⊕ CORRUGATED PLASTIC PIPE
- BOUNDARY LINE
- OVERHEAD ELECTRIC LINE
- UNDERGROUND ELECTRIC LINE
- WATER LINE
- SANITARY SEWER FORCE MAIN
- SANITARY SEWER LINE
- TELECOMMUNICATIONS LINE
- GAS LINE

CONTROL POINT C  
E=559.85  
E=559.85  
E=559.85

SOUTH CROSS SECTION VIEW



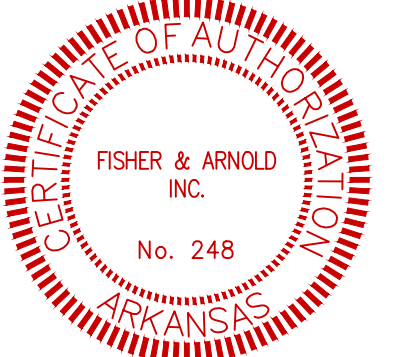
NORTH CROSS SECTION VIEW



CROSS SECTION VIEW



JASON MACDONALD - CIVIL  
ARKANSAS - PE # 14044



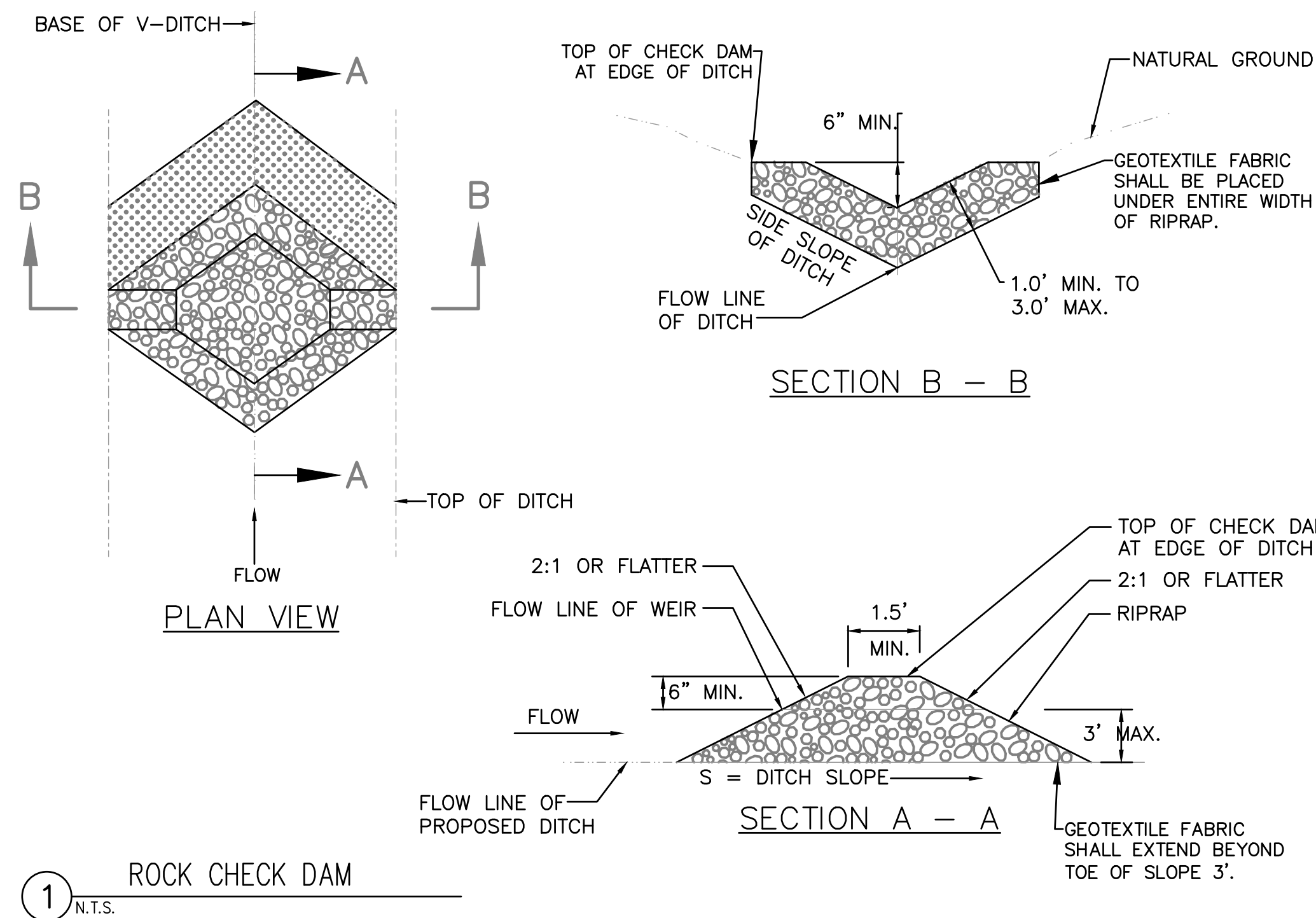
FISHER & ARNOLD, INC.  
Arkansas - 248  
CLIENT:  
ROGERS GROUP, INC.

COPYRIGHT 2022, ALL RIGHTS RESERVED

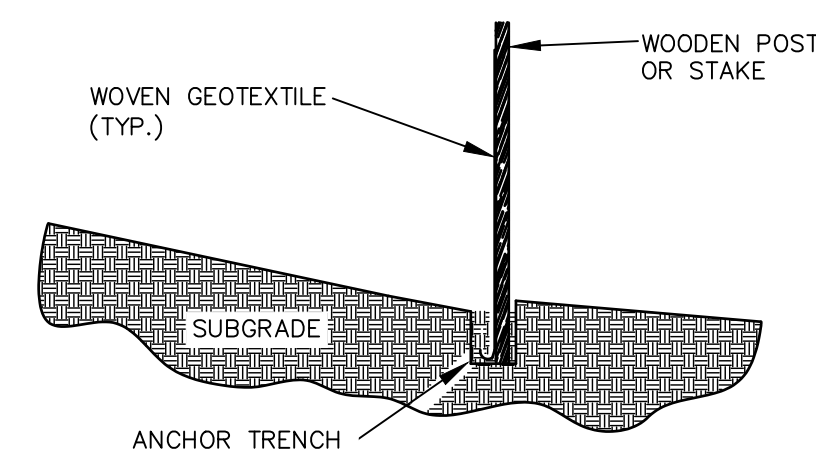
REVISIONS		
DATE	BY	DESCRIPTION

PROJECT NO. ROGRSGRP.0001LD	
DRAWN BY JAM	CHECKED BY JAM
DATE 9-05-2024	SCALE 1"=30'
SHEET C3.03	





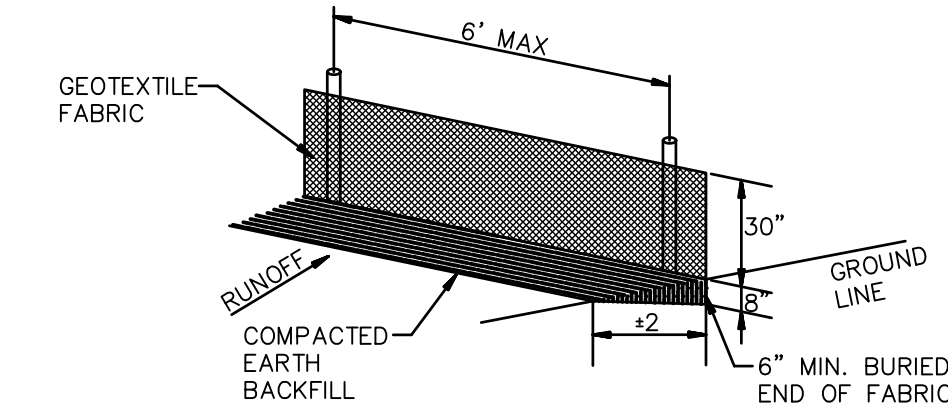
1 N.T.S. ROCK CHECK DAM



- NOTES:
1. GEOTEXTILE ANCHORED IN TRENCH A MINIMUM OF 15 CM (6 IN). TRENCH BACKFILLED WITH TAMPED NATURAL SOIL.
  2. DEPENDING UPON CONFIGURATION, ATTACH GEOTEXTILE TO STEEL POST WITH TIE WIRES OR WOOD POSTS WITH STAPLES.

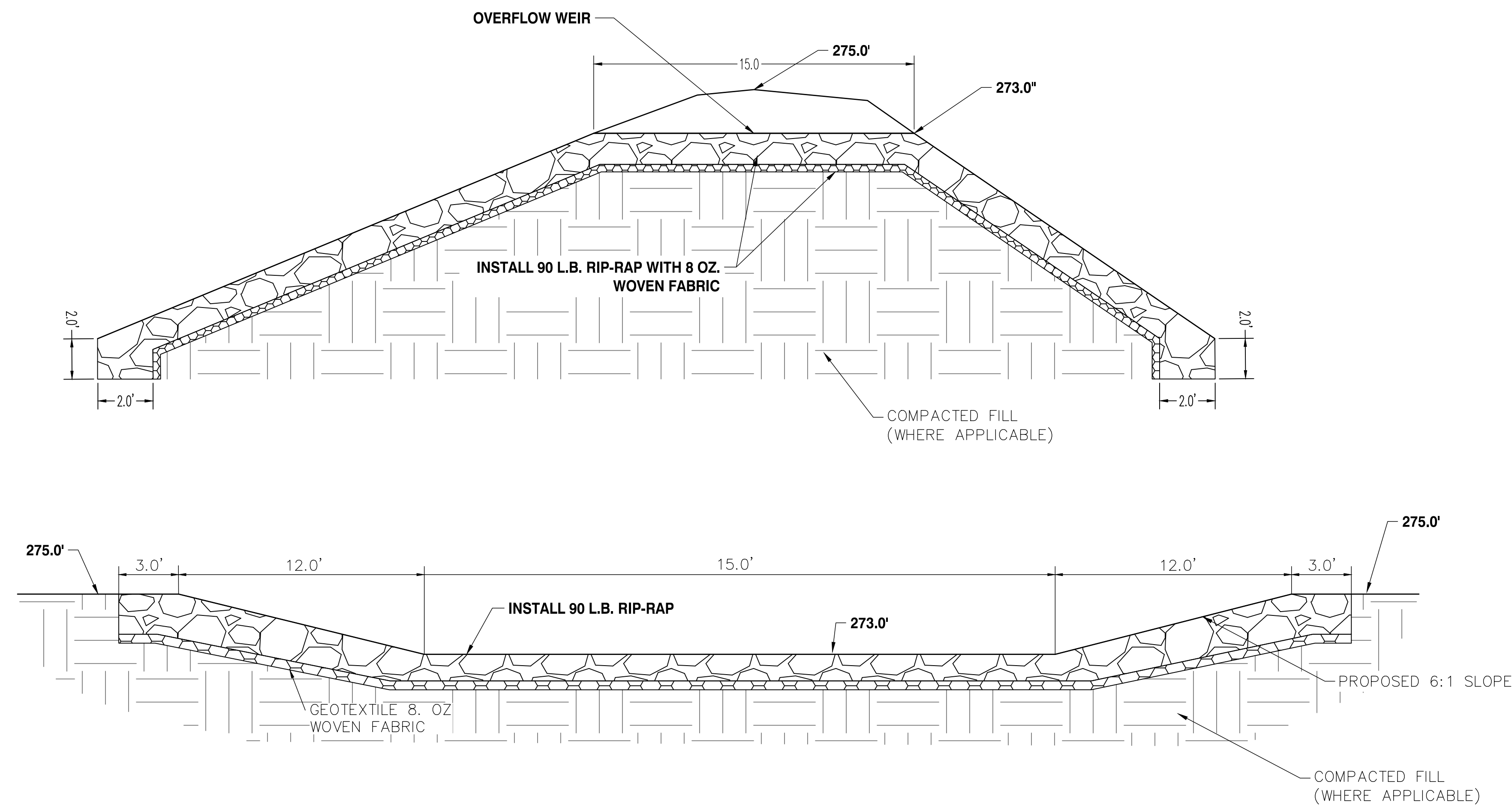
CROSS SECTION

2 N.T.S. SILT FENCE



- NOTES:
- GEOTEXTILE FABRIC SHALL BE SPLICED TOGETHER WITH A SEWN SEAM ONLY AT A SUPPORT POST, OR TWO SECTIONS OF FENCE MAY BE OVERLAPPED INSTEAD. PAYMENT OF ADDITIONAL MATERIAL FOR OVERLAP WILL NOT BE MADE.

CROSS SECTION



3 N.T.S. OVERFLOW WEIR



JASON MACDONALD - CIVIL  
ARKANSAS - PE # 14044



FISHER & ARNOLD, INC.  
Arkansas - 248

CLIENT:  
ROGERS GROUP, INC.

COPYRIGHT 2022. ALL RIGHTS RESERVED

REVISIONS		
DATE	BY	DESCRIPTION

PROJECT NO.  
ROGRSGRP.0001LD

DRAWN BY  
JAM

CHECKED BY  
JAM

DATE  
9-05-2024

SCALE  
N.T.S.

SHEET  
C5.01



**DIVISION OF  
ENVIRONMENTAL QUALITY**

Sarah Huckabee Sanders  
GOVERNOR

Shane E. Khoury  
SECRETARY

**NPDES Individual Permit Application  
Form 1**

5301 Northshore Drive  
North Little Rock, AR 72118-5317

**PURPOSE OF THIS APPLICATION (check all that apply)**

- ☐ INITIAL APPLICATION FOR NEW FACILITY  
☐ INITIAL APPLICATION FOR EXISTING FACILITY  
☐ MODIFICATION OF EXISTING PERMIT  
☐ REISSUANCE (RENEWAL) OF EXISTING PERMIT  
☐ CONSTRUCTION PERMIT
- 

**SECTION A - GENERAL INFORMATION**

A.1. Legal Applicant Name: \_\_\_\_\_

A.2. Operator Type: \_\_\_\_\_

A.3. Corporation? ☐ Yes ☐ No → Skip to A.4

A.4. State of Incorporation, if not Arkansas: \_\_\_\_\_

Attach a Proof/Status of Good Standing from Arkansas Secretary of State and from the state of incorporation, if applicable.

A.5. Facility Name: \_\_\_\_\_

A.6. Is the applicant identified in A.1, the owner of the facility? ☐ Yes → Skip to A.6 ☐ No

Owner of the facility: \_\_\_\_\_

A.7. Is there an outstanding state construction permit for this facility that needs to be terminated?

☐ Yes ☐ No → Skip to A.7

A state construction permit can be terminated by submitting Notice of Completion of Construction for State Construction Permits found through the link below:

<https://www.adeq.state.ar.us/water/permits/npdes/individual/pdfs/state-construction-permit-completion-of-construction.pdf>

NPDES Permit Number	AFIN	Facility Name	County
AR00			

- A.8. Indicate below any NPDES permits issued by DEQ to this facility, if applicable. (Check all that apply and list the corresponding permit number for each.)

NPDES permits issued by DEQ		
<input type="checkbox"/> NPDES Individual Discharge Permit AR00_____	<input type="checkbox"/> NPDES Non-Stormwater General Permit ARG_____	<input type="checkbox"/> NPDES Industrial Stormwater General Permit ARR00_____

- A.9. List permit numbers and/or names of any permits issued by DEQ or EPA for an activity located in Arkansas that is presently held by the applicant or its parent or subsidiary corporation which are not listed above:

Permit Name	Permit Number	Held by

- A.10. Is the facility required to file a disclosure statement?

☐ Yes, one has been attached

☐ Exempt

The disclosure statement form may be obtained from the DEQ web site at:

[https://www.adeg.state.ar.us/ADEQ\\_Disclosure\\_Statement.pdf](https://www.adeg.state.ar.us/ADEQ_Disclosure_Statement.pdf)

- A.11. Facility Physical Location. Attach a location map.

Street address _____			
City or town _____	State _____	ZIP code _____	County _____

**Front Door (gate) location of the facility.**

Latitude:	____°	____'	____"
Longitude:	____°	____'	____"

NPDES Permit Number	AFIN	Facility Name	County
AR00			

A.12. Mailing Address for permit, DMR, and invoices (Street or Post Office Box):

Street Address _____			P.O. Box _____
City or town _____	State _____	ZIP code _____	

A.13. Neighboring States Within 20 Miles of the permitted facility (Check all that apply):

- |                                    |                                      |                                   |
|------------------------------------|--------------------------------------|-----------------------------------|
| <input type="checkbox"/> Louisiana | <input type="checkbox"/> Mississippi | <input type="checkbox"/> Missouri |
| <input type="checkbox"/> Oklahoma  | <input type="checkbox"/> Tennessee   | <input type="checkbox"/> Texas    |

A.14. Standard Industrial Classification (SIC) code and North America Industrial Classification System (NAICS) code for primary process and secondary process if applicable.

Primary SIC _____	Primary NAICS _____
Secondary SIC <input type="checkbox"/> N/A _____	Secondary NAICS <input type="checkbox"/> N/A _____

A.15. Did a consulting firm prepare this application?

- ☐ Yes                      ☐ No

Contact Name (First and Last) _____	Title _____
Company Name _____	
E-mail Address _____	Phone Number _____
Street Address _____	
City or town _____	State _____
ZIP Code _____	

NPDES Permit Number	AFIN	Facility Name	County
AR00			

A.16. Wastewater Operator Information

<b>Name (First and Last)</b>	<b>License Number</b>	<b>Municipal Wastewater Operator</b>	<b>Industrial Wastewater Operator</b>
		Class	
		Class	
		Class	
		Class	

NPDES Permit Number	AFIN	Facility Name	County
AR00			

## SECTION B - OUTFALL INFORMATION

### B.1. Outfall Information (If more than two outfalls, attach additional pages)

Outfall _____								
Design Flow _____ MGD				Highest Monthly Average flow over the last two years _____ MGD				
End-of-Pipe Location:	Latitude:	_____°	_____’	_____” N	Longitude:	_____°	_____’	_____” W
Monitoring Location (If different from End-of-Pipe Location:	Latitude:	_____°	_____’	_____” N	Longitude:	_____°	_____’	_____” W
Name of Receiving Stream _____								
Treatment system (Include all components of the treatment system and attach a process flow diagram): _____								
How and where are effluent samples collected? Include a narrative description of where samples are collected relative to the treatment system. <input type="checkbox"/> Grab <input type="checkbox"/> Composite <input type="checkbox"/> Both _____								
How is flow measured and where (relative to the process flow diagram)? _____								
Is the outfall equipped with a diffuser? <input type="checkbox"/> Yes <input type="checkbox"/> No								
What is the diameter of the effluent pipe? _____ inches								

NPDES Permit Number	AFIN	Facility Name	County
AR00			

Outfall _____								
Design Flow _____ MGD				Highest Monthly Average flow over the last two years _____ MGD				
End-of-Pipe Location:	Latitude:	_____°	_____'	_____” N	Longitude:	_____°	_____'	_____” W
Monitoring Location (If different from End- of-Pipe Location:	Latitude:	_____°	_____'	_____” N	Longitude:	_____°	_____'	_____” W
Name of Receiving Stream _____								
Treatment system (Include all components of the treatment system and attach a process flow diagram): _____								
How and where are effluent samples collected? Include a narrative description of where samples are collected relative to the treatment system. <input type="checkbox"/> Grab <input type="checkbox"/> Composite <input type="checkbox"/> Both _____								
How is flow measured and where? _____								
Is the outfall equipped with a diffuser? <input type="checkbox"/> Yes <input type="checkbox"/> No								
What is the diameter of the effluent pipe? _____ inches								



NPDES Permit Number	AFIN	Facility Name	County
AR00			

B.2. Describe how influent is collected and conveyed to the treatment system.

\_\_\_\_\_

B.3. Are you a publicly owned treatment works?

☐ Yes ☐ No → Skip to B.4

Is this a renewal or new application for an NPDES permit?

☐ Yes ☐ No → Skip to B.4

If “Yes” to both of the above questions, complete the table below:

Pollutant	Maximum Daily Influent		Average Daily Influent		
	Value	Units	Value	Units	Number of Samples*
CBOD <sub>5</sub> /BOD <sub>5</sub>					
TSS					
How and where were the influent samples collected? Include a narrative description of where samples are collected relative to the treatment system.					
<input type="checkbox"/> Grab <input type="checkbox"/> Composite <input type="checkbox"/> Both					

\* At a minimum, influent testing data must be based on at least three samples taken within 4.5 years prior to the date of the permit application. Existing data may be used, if available, in lieu of sampling done solely for the purpose of this application

Attach the laboratory report for the CBOD<sub>5</sub>/BOD<sub>5</sub> and TSS tests.

B.4. Attach a process flow diagram.

B.5. Attach a topographic map extending at least one mile beyond the property boundary with the discharge location(s) marked with this application.

NPDES Permit Number	AFIN	Facility Name	County
AR00			

B.6. Is the proposed or existing facility located above the 100-year flood level?

☐ Yes ☐ No

If “No”, what measures are (or will be) used to protect the facility? \_\_\_\_\_

Has a FEMA map been submitted with a previous application?

☐ Yes ☐ No

If “No”, a FEMA map must be submitted with this application as an attachment.

B.7. Population served for Municipal or Domestic Sewer Systems: \_\_\_\_\_

B.8. Backup Power Generation for Treatment Plants

Are there any permanent backup generators? ☐ Yes ☐ No

If Yes, how many? \_\_\_\_\_ Total Horsepower (hp)? \_\_\_\_\_

If No, check all that apply.

- ☐ Portable generator is available.
- ☐ The WWTP does not require power to operate.
- ☐ Operations at the facility will cease if power is not available.
- ☐ The WWTP has sufficient capacity to hold influent until power is restored.
- ☐ Other, please explain. \_\_\_\_\_

NPDES Permit Number	AFIN	Facility Name	County
AR00			

## SECTION C - WASTE STORAGE AND DISPOSAL INFORMATION

C.1. Are solids/sludge produced at this facility?

☐ Yes ☐ No → Skip to Section D

C.2. Do solids/sludge remain in treatment lagoon(s)?

☐ Yes ☐ No → Skip to C.3

How many lagoon(s)? \_\_\_\_\_ How old is the lagoon(s)? \_\_\_\_\_

Has sludge depth been measured? ☐ Yes ☐ No

If yes, when was it measured (MM/YYYY)? \_\_\_\_\_ Average sludge depth? \_\_\_\_\_ ft.

If no, when will it be measured? \_\_\_\_\_

Has sludge ever been removed? ☐ Yes ☐ No

If yes, when was it removed (MM/YYYY)? \_\_\_\_\_

C.3. Are solids/sludge disposed at a landfill?

☐ Yes ☐ No → Skip to C.4

Is the Landfill located in Arkansas? ☐ Yes ☐ No

If Yes, what is the DEQ solid waste permit issued to the landfill? Permit No. \_\_\_\_\_

If No, which state? State: \_\_\_\_\_

Provide the solid waste permit Permit No. \_\_\_\_\_

C.4. Are solids/sludge disposed by land application?

☐ Yes ☐ No → Skip to C.5

Is the land application site located in Arkansas? ☐ Yes ☐ No

If Yes, what is the DEQ state permit issued to the land application site? \_\_\_\_\_

If No, what state and their state permit? State: \_\_\_\_\_ Permit No. \_\_\_\_\_

NPDES Permit Number	AFIN	Facility Name	County
AR00			

C.5. Are solids/sludge disposed by septic tank?

☐ Yes ☐ No → Skip to C.6

Arkansas Department of Health Permit No. \_\_\_\_\_

C.6. Are solids/sludge distributed and marketed?

☐ Yes ☐ No → Skip to C.7

Company Name receiving solids/sludge _____		
E-mail Address _____		Phone Number _____
Street Address _____		
City or town _____	State _____	ZIP Code _____
Distributed by (check all that applies) <input type="checkbox"/> Pipe <input type="checkbox"/> Rail <input type="checkbox"/> Truck <input type="checkbox"/> Other _____		

C.7. Are solids/sludge disposed by sludge storage lagoon? (Lagoon for which the sole purpose is storing sludge):

☐ Yes ☐ No → Skip to C.8

How many lagoon(s)? \_\_\_\_\_ How old is the lagoon(s)? \_\_\_\_\_ years

Total surface area of lagoon(s)? \_\_\_\_\_ acre

Has sludge depth been measured? ☐ Yes ☐ No

If yes, when was it measured (MM/YYYY)? \_\_\_\_\_ Average depth? \_\_\_\_\_ ft.

If no, when will it be measured? \_\_\_\_\_

Has sludge ever been removed? ☐ Yes ☐ No

If yes, when was it removed (MM/YYYY)? \_\_\_\_\_

Does lagoon(s) have a liner? ☐ Yes ☐ No

NPDES Permit Number	AFIN	Facility Name	County
AR00			

C.8. Are solids/sludge disposed by incineration?

☐ Yes      ☐ No → Skip to C.9

Company Name _____		
E-mail Address _____		Phone Number _____
Street Address _____		
City or town _____	State _____	ZIP Code _____

C.9. Are solids/sludge disposed by **Other** method? (Provide complete description)

\_\_\_\_\_

NPDES Permit Number	AFIN	Facility Name	County
AR00			

## SECTION D - WATER SUPPLY

D.1. Are there any water supply sources which are downstream of the outfall location, i.e., those which could be affected by the discharge from this facility?

☐ Yes ☐ No → Skip to Section E

D.2. Is the water supply source subsurface water?

☐ Yes ☐ No → Skip to D.3

Private Well?

☐ Yes ☐ No

Distance from discharge point: ☐ Within 5 miles ☐ Within 50 miles

Municipal Water Utility?

☐ Yes ☐ No

City or town \_\_\_\_\_

Distance from discharge point: ☐ Within 5 miles ☐ Within 50 miles

D.3. Is the water supply source surface water

☐ Yes ☐ No → Skip to D.4

Distance from discharge point: ☐ Within 5 miles ☐ Within 50 miles

D.4. **Other** (Provide complete description)

\_\_\_\_\_

Distance from discharge point: ☐ Within 5 miles ☐ Within 50 miles

NPDES Permit Number	AFIN	Facility Name	County
AR00			

## SECTION E - TRUST FUND REQUIREMENTS

E.1. Is the facility considered a “nonmunicipal domestic sewage treatment works” (NDSTW) as defined in [Ark. Code Ann. 8-4-203\(b\)?](#)

☐ Yes

☐ No

If “yes”, a completed NDSTW trust fund form must be submitted. The trust fund form may be obtained from the DEQ web site at:

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

NPDES Permit Number	AFIN	Facility Name	County
AR00			

## SECTION F - INDUSTRIAL ACTIVITY

F.1. Is this facility subject to an effluent limit guideline?

☐ Yes ☐ No → Skip to Section G

F.2. 40 CFR reference for applicable effluent limit guidelines \_\_\_\_\_

List all applicable Subpart(s) \_\_\_\_\_

F.3. Description of all operations at this facility including primary products or services (attach additional sheets if necessary):

_____
_____
_____



NPDES Permit Number	AFIN	Facility Name	County
AR00			

## SECTION G - MODIFICATION AND CONSTRUCTION INFORMATION

G.1. Was “Modification of existing permit” or “Construction permit” checked off on **Purpose of this Application?** (Above Section A - General Information)

☐ Yes ☐ No → Skip to Section H

G.2. List proposed construction activities and/or requested changes to the NPDES permit.

_____
_____
_____

G.3. If this application is for a State Construction permit, please note that, in accordance with Rule 6.202, plans and specifications and design calculations must be stamped and signed by a **Registered Professional Engineer in the State of Arkansas**. The basic design criteria for wastewater treatment plants in the State of Arkansas should be based on the latest edition of the “Recommended Standards for Sewage Works,” published by the Great Lakes-Upper Mississippi Board of State Sanitary Engineers known as 10 States Standards, with few modifications. Exception to the criteria will only be approved by DEQ when fully justified. A comprehensive list of exceptions to 10 State Standards is listed in Rule 6.202(B) and can be viewed here: [https://www.adeq.state.ar.us/regs/files/reg06\\_final\\_150918.pdf](https://www.adeq.state.ar.us/regs/files/reg06_final_150918.pdf)

Checklist of Items to Be Attached to Application	
<input type="checkbox"/>	Professional Engineer registered in the State of Arkansas
<input type="checkbox"/>	Design calculations signed & stamped, including justification for exceptions to 10 State Standards
<input type="checkbox"/>	Plans & drawings signed & stamped, including justification for exceptions to 10 State Standards
<input type="checkbox"/>	Specifications, signed & stamped, including justification for exceptions to 10 State Standards
<input type="checkbox"/>	If application is for a sanitary sewer WWTP, verification that the necessary submittals to the Arkansas Dept. of Health have been made.

G.4. In the case of construction, will the construction disturb one acre or more?

☐ Yes ☐ No → Skip to Section H

If the area disturbed is more than one acre up to, but not including, five acres, the facility is automatically covered under the Construction Stormwater General Permit ARR150000 and must comply with the terms and conditions of that permit.

If the area disturbed is five acres or more, a Construction Stormwater General Permit ARR150000 must be obtained by submitting a Notice of Intent and a Stormwater Pollution Prevention Plan to DEQ. The application information can be found here:

<https://www.adeq.state.ar.us/water/permits/npdes/stormwater/>

NPDES Permit Number	AFIN	Facility Name	County
AR00			

## SECTION H: CHECKLIST AND SIGNATORY REQUIREMENTS

H.1. Mark the sections of Form 1 below that have been completed and are being submitted as part of the application. For each section, specify any attachments that will be enclosed. Note that not all applicants are required to provide all attachments.

Form 1 Section	Attachments
<input type="checkbox"/> Section A – General Information	<input type="checkbox"/> w/Proof of Good Standing from Arkansas Secretary of State <input type="checkbox"/> w/Proof of Good Standing from State of Incorporation <input type="checkbox"/> w/Notice of Completion of Construction for State Construction Permits <input type="checkbox"/> w/Disclosure Statement <input type="checkbox"/> w/location map
<input type="checkbox"/> Section B – Outfall Information	<input type="checkbox"/> w/additional outfall information <input type="checkbox"/> w/topographic map extending at least one mile beyond the property boundary with the discharge location marked <input type="checkbox"/> w/FEMA flood plain map <input type="checkbox"/> w/process flow diagram
<input type="checkbox"/> Section C – Waste Storage and Disposal Information	
<input type="checkbox"/> Section D – Water Supply	
<input type="checkbox"/> Section E – Trust Fund Requirements	<input type="checkbox"/> w/Nonmunicipal Domestic Sewage Treatment Works Trust Fund Certification form
<input type="checkbox"/> Section F – Industrial Activity	
<input type="checkbox"/> Section G – Modification and Construction Information	<input type="checkbox"/> w/design calculations <input type="checkbox"/> w/design specifications <input type="checkbox"/> w/plans and drawing

H.2 Is this submittal for a State Construction permit or the modification or renewal of an existing permit?

- ☐ Construction or Modification → Skip to H.3, ☐ Renewal – an EPA Form(s) (in addition to this EPA Form Not Required Form 1) are required for this application:

Check all boxes that are applicable

- ☐ EPA Form 2A – Municipal Dischargers  
☐ EPA Form 2B – Concentrated Animal Feeding Operations  
☐ EPA Form 2C – Existing Manufacturing, Commercial, Mining, and Silvicultural Operations  
☐ EPA Form 2D – New Sources and New Dischargers Application for Permit to Discharge Process Wastewater  
☐ EPA Form 2E – Facilities Which Do Not Discharge Process Wastewater (i.e. domestic, non-contact cooling water, etc)  
☐ EPA Form 2F – Application for Permit to Discharge Stormwater Discharges Associated with Industrial Activity

NPDES Permit Number	AFIN	Facility Name	County
AR00	88-00716	Cord Quarry	Independence

## H.2. Cognizant Official (Duly Authorized Representative)

40 C.F.R. 122.22(b) states that all reports required by the permit, or other information requested by the Director, shall be signed by the applicant (or person authorized by the applicant) or by a duly authorized representative of that person. A person is duly authorized representative only if:

- (1) The authorization is made in writing by the applicant (or person authorized by the applicant);
- (2) The authorization specifies either an individual or a position having responsibility for the overall operation of the regulated facility or activity responsibility, or an individual or position having overall responsibility for environmental matters for the company.

The applicant hereby designates the following person as a Cognizant Official, or duly authorized representative, for signing reports, etc., including Discharge Monitoring Reports (DMR) required by the permit, and other information requested by the Director:

Print name (First and Last) Nathan Peterson	Email nathan.peterson@rogersgroupinc.com
Official title Environmental Manager	Telephone number 817-219-5526

## H.3. Additional Cognizant Officials (If necessary)

If the applicant wishes to designate more than one person as a Cognizant Official, or duly authorized representative, for all purposes expressed in part H.3, additional spaces are provided below:

Print name (First and Last) Erik Knowles	Email erik.knowles@rogersgroupinc.com
Official title Director of Environmental Services	Telephone number 615-418-9474

Print name (First and Last) _____	Email _____
Official title _____	Telephone number _____

Print name (First and Last) _____	Email _____
Official title _____	Telephone number _____

Print name (First and Last) _____	Email _____
Official title _____	Telephone number _____

NPDES Permit Number	AFIN	Facility Name	County
AR00			

#### H.4. Responsible Official

“By my signature below, I certify that I met the requirement to be the signatory as defined in 40 C.F.R. § 122.22.”

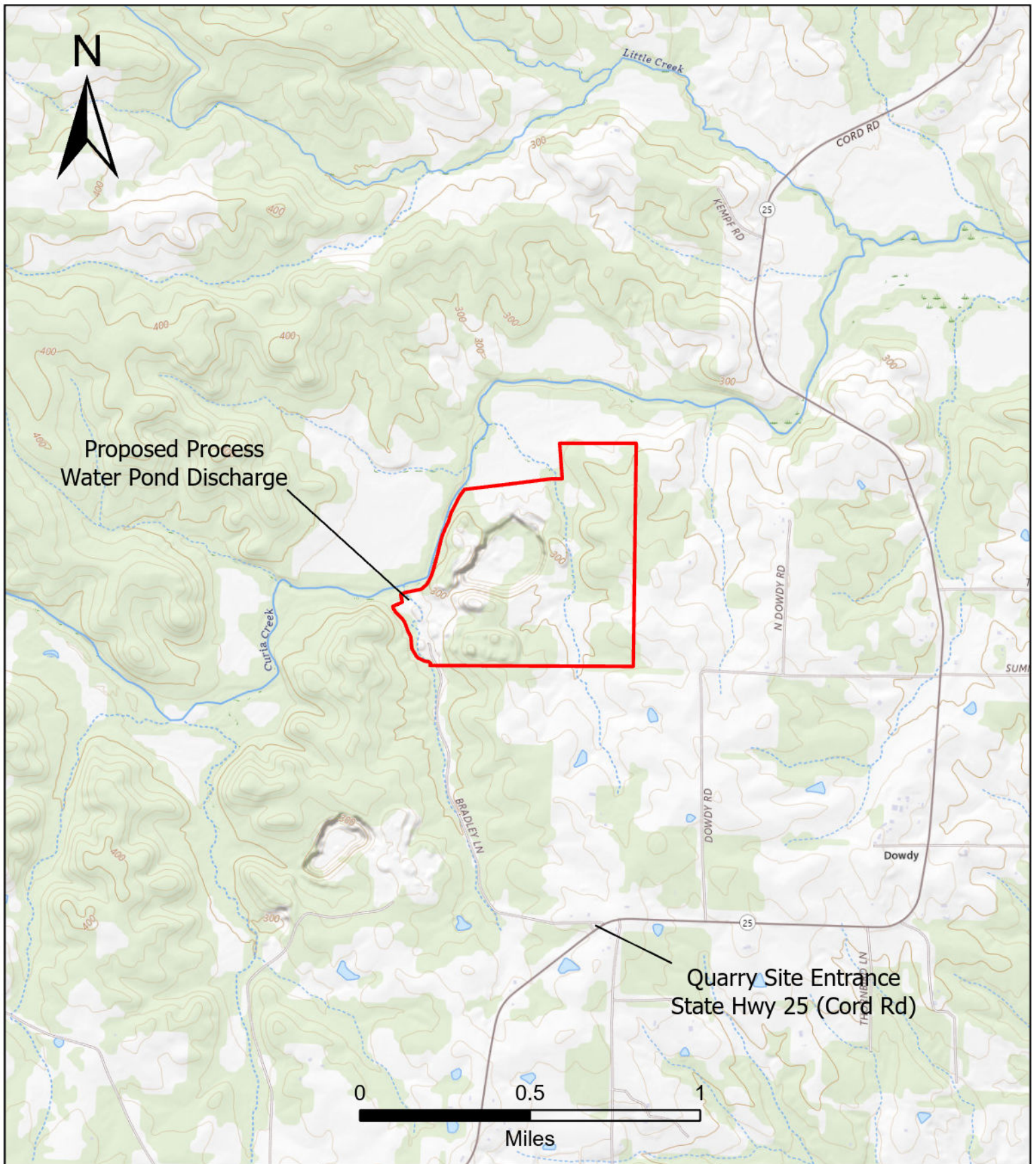
“By my signature below, I certify that the cognizant official designated above is qualified to act as a duly authorized representative under the provisions of 40 CFR 122.22(b).” NOTE: If no duly authorized representative is designated in this section, the Division considers the applicant to be the responsible official for the facility and only reports, etc., signed by the applicant will be accepted by the Division.

“By my signature below, I certify that, if this facility is a corporation, it is registered with the Secretary of State in Arkansas.”

“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 further certify under penalty of law that all analyses reported as less than detectable in this application or attachments thereto were performed using the EPA approved test method having the lowest detection limit for the substance tested.”

Print name (First and Last)	Official title	<u>Email</u>
Signature <i>Nathan Peterson</i>	Date signed	Telephone number





Scale: 1:24,000

 Cord Quarry Boundary

Cord Quarry Location Map  
Cord, Arkansas  
S1/2 Sec. 8, T14N, R3W  
Independence County





# National Flood Hazard Layer FIRMette



91°20'5"W 35°51'52"N



0 250 500 1,000 1,500 2,000 Feet 1:6,000

Basemap Imagery Source: USGS National Map 2023

## Legend

SEE FIS REPORT FOR DETAILED LEGEND AND INDEX MAP FOR FIRM PANEL LAYOUT

**SPECIAL FLOOD HAZARD AREAS**

- Without Base Flood Elevation (BFE)  
Zone A, V, A99
- With BFE or Depth Zone AE, AO, AH, VE, AR
- Regulatory Floodway

**OTHER AREAS OF FLOOD HAZARD**

- 0.2% Annual Chance Flood Hazard, Areas of 1% annual chance flood with average depth less than one foot or with drainage areas of less than one square mile Zone X
- Future Conditions 1% Annual Chance Flood Hazard Zone X
- Area with Reduced Flood Risk due to Levee, See Notes, Zone X
- Area with Flood Risk due to Levee Zone D

**OTHER AREAS**

- NO SCREEN Area of Minimal Flood Hazard Zone X
- Effective LOMRs

**GENERAL STRUCTURES**

- Area of Undetermined Flood Hazard Zone D
- Channel, Culvert, or Storm Sewer
- Levee, Dike, or Floodwall

**OTHER FEATURES**

- Cross Sections with 1% Annual Chance Water Surface Elevation
- Coastal Transect
- Base Flood Elevation Line (BFE)
- Limit of Study
- Jurisdiction Boundary
- Coastal Transect Baseline
- Profile Baseline
- Hydrographic Feature

**MAP PANELS**

- Digital Data Available
- No Digital Data Available
- Unmapped

The pin displayed on the map is an approximate point selected by the user and does not represent an authoritative property location.

This map complies with FEMA's standards for the use of digital flood maps if it is not void as described below. The basemap shown complies with FEMA's basemap accuracy standards.

The flood hazard information is derived directly from the authoritative NFHL web services provided by FEMA. This map was exported on 7/10/2024 at 1:44 PM and does not reflect changes or amendments subsequent to this date and time. The NFHL and effective information may change or become superseded by new data over time.

This map image is valid if the one or more of the following map elements do not appear: basemap imagery, flood zone labels, legend, scale bar, map creation date, community identifiers, FIRM panel number, and FIRM effective date. Map images for unmapped and unmodernized areas cannot be used for regulatory purposes.



July 3, 2024

Arkansas Department of Environmental Quality  
Office of Water Quality  
5301 Northshore Drive  
North Little Rock, AR 72118-5317

**RE: Rogers Group, Inc. – Cord Quarry  
NPDES ARG500000 Permit Application  
Process Water Pond Design  
Independence, Arkansas**

To whom it may concern:

Rogers Group, Inc. has applied for an NPDES ARG500000 general discharge permit for the process water used in aggregate washing. A process water pond will be designed for this project, and Rogers Group has contracted a Professional Engineer based in Jonesboro, AR to perform the engineering of the pond. Jason MacDonald, a licensed Professional Engineer (PE), holds the position of Water Resource Director at Fisher Arnold. He will be responsible for overseeing the design work and serving as the primary engineer for this project.

If you have any questions or need any additional information, please do not hesitate to contact me at (817) 219-5526.

Sincerely,

*Nathan Peterson*

Nathan Peterson, PG  
Environmental Manager



## Instructions for the completion of this document:

- A. Individuals, firms, or other legal entities with no changes to a DEQ Disclosure Statement, complete items I through III and XVI.
- B. Individuals who never submitted a DEQ Disclosure Statement, complete items I through II, IV, V, and XIV through XVI.
- C. Firms or other legal entities who never submitted a DEQ Disclosure Statement, complete items I through III, and IV through XVI.

## IF NOT SUBMITTING BY EPORTAL, MAIL ORIGINAL TO:

Arkansas Energy & Environment,  
Division of Environmental Quality,

Office of Water Quality



Disclosure Statement  
5301 Northshore Drive,  
North Little Rock, AR 72118-5317

## I. APPLICANT INFORMATION

**APPLICANT NAME:** Rogers Group, Inc.

**STREET ADDRESS:** 421 Great Circle Rd.

**CITY:** Nashville

**STATE:** TN



**ZIP CODE:** 37228

## II. APPLICANT CATEGORY

**APPLICANT TYPE:** ☐ INDIVIDUAL ☒ OTHER LEGAL ENTITY

### REASON FOR SUBMISSION:

- |  |  |  |
|--|--|--|
| <input checked="" type="checkbox"/> PERMIT   | <input type="checkbox"/> CERTIFICATION | <input type="checkbox"/> OPERATIONAL AUTHORITY |
| <input type="checkbox"/> LICENSE             | <input type="checkbox"/> MODIFICATION  | <input type="checkbox"/> NEW APPLICATION       |
| <input type="checkbox"/> RENEWAL APPLICATION |  |  |

(If no changes from previous disclosure statement, complete number III and XVI.)

### PROGRAMS:

- |  |                                      |   |
|--|--------------------------------------|---|
| <input type="checkbox"/> AIR               | <input type="checkbox"/> MINING      | <input type="checkbox"/> HAZARDOUS WASTE        |
| <input checked="" type="checkbox"/> WATER  | <input type="checkbox"/> SOLID WASTE | <input type="checkbox"/> REGULATED STORAGE TANK |
| <input type="checkbox"/> USED TIRE PROGRAM |                                      |   |

## III. 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 on 12/04/2023.



**IV. 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.)**

Rogers Group, Inc. operates and maintains all applicable permits, licenses. Certifications or operational authorization relating to environmental regulation at the following quarries in the state of Arkansas:

Rogers Group, Inc.

- Beebe Quarry
  - Beryl Quarry
  - Cleveland Quarry
  - Conway Co. Quarry
  - Cord Quarry
  - El Paso Quarry
  - Greenbrier Quarry
  - Toad Suck Quarry
- Hunt-Rogers, LLC
- Centerton Quarry
  - Farmington Quarry
  - Lowell Quarry
  - Springdale Quarry

**V. 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:**

- A. Administrative enforcement actions resulting in the imposition of sanctions
- B. Permit or license revocations or denials issued by any state or federal authority
- C. Actions that have resulted in a finding or a settlement of a violation
- D. Pending actions

(Attach additional pages, if necessary.)

2012 - Cabot Quarry - Rogers experienced a near miss at the intersection near the asphalt plant. To prevent an accident from occurring here, Rogers Cleared the area on the permitted property to improve sight distances in this area. During a water audit an old valve was found that drained the site pond. While the valve was closed this was considered a bypass. Rogers capped the line and permanently removed from service.

2013 - Beebe Quarry - Rogers was issued an NOV for staining on the ground related to an over turned drum. Rogers remediated the site and ADEQ was satisfied.

2022- El Paso Quarry - Rogers was issued an NOV for not having Operation and Maintenance records for 2019-2020.

2024 - Greenbrier Quarry - Consent Administrative Order (CAO) LIS 24-107 was signed and executed on June 28, 2024, to extend the individual NPDES permit beyond the permit expiration date of June 30, 2024. The CAO will become effective on August 6, 2024.

\*Firms or other legal entities shall also include this information for all persons and legal entities identified in sections VI through XIV of this Disclosure Statement.

## VI. List all officers of the Applicant. (Add additional pages, if necessary.)

**OFFICER NAME:** Mike Connelly  
**JOB TITLE:** Vice President, Arkansas SMA Manager  
**STREET ADDRESS:** 1223 Front St  
**CITY:** Conway **STATE:** AR ☐ **ZIP CODE:** 72032

**OFFICER NAME:** Jimmy Patton  
**JOB TITLE:** CEO  
**STREET ADDRESS:** 421 Great Circle Rd  
**CITY:** Nashville **STATE:** TN ☐ **ZIP CODE:** 37228

**OFFICER NAME:** Tim Wilson  
**JOB TITLE:** Vice President, Western Region  
**STREET ADDRESS:** 2020 W. Northwest Hwy  
**CITY:** Grapevine **STATE:** TX ☐ **ZIP CODE:** 76051

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

**DIRECTOR NAME:** Erik Knowles  
**JOB TITLE:** Director of Environmental Services  
**STREET ADDRESS:** 421 Great Circle Road  
**CITY:** Nashville **STATE:** TN ☐ **ZIP CODE:** 37228

**DIRECTOR NAME:** \_\_\_\_\_  
**JOB TITLE:** \_\_\_\_\_  
**STREET ADDRESS:** \_\_\_\_\_  
**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP CODE:** \_\_\_\_\_

**DIRECTOR NAME:** \_\_\_\_\_  
**JOB TITLE:** \_\_\_\_\_  
**STREET ADDRESS:** \_\_\_\_\_  
**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP CODE:** \_\_\_\_\_

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

**PARTNER NAME:** \_\_\_\_\_  
**JOB TITLE:** \_\_\_\_\_  
**STREET ADDRESS:** \_\_\_\_\_  
**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP CODE:** \_\_\_\_\_

**PARTNER NAME:** \_\_\_\_\_  
**JOB TITLE:** \_\_\_\_\_  
**STREET ADDRESS:** \_\_\_\_\_  
**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP CODE:** \_\_\_\_\_

**PARTNER NAME:** \_\_\_\_\_  
**JOB TITLE:** \_\_\_\_\_  
**STREET ADDRESS:** \_\_\_\_\_  
**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP CODE:** \_\_\_\_\_

**IX. List all persons employed by the Applicant in a supervisory capacity or with authority over operations of the facility subject to this application. (Add additional pages, if necessary.)**

**EMPLOYEE NAME:** Dwayne Gabbard  
**JOB TITLE:** Area Manager - Arkansas  
**STREET ADDRESS:** 21202 N Parsons Rd  
**CITY:** Springdale **STATE:** AR ☐ **ZIP CODE:** 72764

**EMPLOYEE NAME:** \_\_\_\_\_  
**JOB TITLE:** \_\_\_\_\_  
**STREET ADDRESS:** \_\_\_\_\_  
**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP CODE:** \_\_\_\_\_

**EMPLOYEE NAME:** \_\_\_\_\_  
**JOB TITLE:** \_\_\_\_\_  
**STREET ADDRESS:** \_\_\_\_\_  
**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP CODE:** \_\_\_\_\_

**X. List all persons or legal entities, who own or control more than five percent (5%) of the Applicant's debt or equity. (Add additional pages, if necessary.)**

**INDIVIDUAL/ENTITY NAME:** Rogers Group, Inc.  
**JOB TITLE:** Managing Member  
**STREET ADDRESS:** 421 Great Circle Road  
**CITY:** Nashville **STATE:** AR ☐ **ZIP CODE:** 37228

**ORGANIZATIONAL RELATIONSHIP:**

Parent Corporation

INDIVIDUAL/ENTITY NAME: \_\_\_\_\_  
JOB TITLE: \_\_\_\_\_  
STREET ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_  
ORGANIZATIONAL RELATIONSHIP:

INDIVIDUAL/ENTITY NAME: \_\_\_\_\_  
JOB TITLE: \_\_\_\_\_  
STREET ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_  
ORGANIZATIONAL RELATIONSHIP:

**XI. List all legal entities, in which the Applicant holds a debt or equity interest of more than five percent (5%). (Add additional pages, if necessary.)**

ENTITY NAME: \_\_\_\_\_  
JOB TITLE: \_\_\_\_\_  
STREET ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_  
ORGANIZATIONAL RELATIONSHIP:

**ENTITY NAME:** \_\_\_\_\_  
**JOB TITLE:** \_\_\_\_\_  
**STREET ADDRESS:** \_\_\_\_\_  
**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP CODE:** \_\_\_\_\_  
**ORGANIZATIONAL RELATIONSHIP:**

**ENTITY NAME:** \_\_\_\_\_  
**JOB TITLE:** \_\_\_\_\_  
**STREET ADDRESS:** \_\_\_\_\_  
**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP CODE:** \_\_\_\_\_  
**ORGANIZATIONAL RELATIONSHIP:**

**XII. List any parent company of the Applicant. Describe the parent company's ongoing organizational relationship with the Applicant. (Add additional pages, if necessary.)**

**COMPANY NAME:** \_\_\_\_\_  
**STREET ADDRESS:** \_\_\_\_\_  
**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP CODE:** \_\_\_\_\_  
**ORGANIZATIONAL RELATIONSHIP:**

**XIII. List any subsidiary of the Applicant. Describe the subsidiary's ongoing organizational relationship with the Applicant. (Add additional pages, if necessary.)**

**COMPANY NAME:** Hunt-Rogers LLC

**STREET ADDRESS:** 1223 Front St.

**CITY:** Conway

**STATE:** AR



**ZIP CODE:** 72032

**ORGANIZATIONAL RELATIONSHIP:**

Manager of LLC

**XIV. List any person who is not now in compliance or has a history of noncompliance with the environmental law or rules 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. (Add additional pages, if necessary.)**

**INDIVIDUAL NAME:** \_\_\_\_\_

**JOB TITLE:** \_\_\_\_\_

**STREET ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_

**STATE:** \_\_\_\_\_

**ZIP CODE:** \_\_\_\_\_

**INDIVIDUAL NAME:** \_\_\_\_\_

**JOB TITLE:** \_\_\_\_\_

**STREET ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_

**STATE:** \_\_\_\_\_

**ZIP CODE:** \_\_\_\_\_

**XV.** List all federal environmental agencies and any other environmental agencies outside this state that have or have had regulatory responsibility over the Applicant. (Attach additional pages, if necessary.)

Environmental Protection Agency Region VI

## **XVI. VERIFICATION AND ACKNOWLEDGMENT**

The Applicant agrees to provide any other information the DEQ Chief Administrator may require at any time to comply with the provisions of the Disclosure Law and any rules promulgated thereto. The Applicant further agrees to provide the DEQ 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.**

### **SKIP THIS SECTION IF SUBMITTING WITH CROMERR-APPROVED SIGNATURE ON EPORTAL**

I, Nathan Peterson, 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:** Nathan Peterson

**JOB TITLE:** Manager Environmental

**DATE:** 7/3/24