

**Ergon Asphalt & Emulsions, Inc.**

CERTIFIED MAIL – 7011 1570 0002 7895 5442

May 23, 2014

Arkansas Department of Environmental Quality  
Water Division, Permits Branch  
5301 Northshore Drive  
North Little Rock, AR 72118

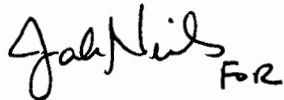
RE: Arkansas NPDES General Permit ARG001185  
Ergon Asphalt and Emulsions, Inc. – Little Rock  
NPDES Hydrostratic Testing Discharge NOI

To Whom It May Concern:

Please find attached the NOI for our pipeline hydrostatic testing discharge application for Ergon Asphalt and Emulsions, Inc. – Little Rock. This is sent in coordination with the Disclosure Statement.

Should you have any questions, please contact me at (601) 933-3521 or via email at [austin.moody@ergon.com](mailto:austin.moody@ergon.com).

Sincerely,



Austin Moody  
Environmental Engineer  
Ergon Asphalt and Emulsions, Inc.

CC: Tim Breeding - ETI-ME  
Ray Callahan - Ergon, Inc.  
File(143-E-02-14- )

## Cousins, Sarah

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**From:** Austin Moody <Austin.Moody@ergon.com>  
**Sent:** Wednesday, June 11, 2014 2:51 PM  
**To:** Cousins, Sarah  
**Subject:** RE: Ergon Asphalt & Emulsions Hydrostatic Testing

Sorry about that. Estimated volume will be around 20,000 gallons and discharge will be around 0.18 MGD.

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**From:** Cousins, Sarah [<mailto:cousins@adeq.state.ar.us>]  
**Sent:** Wednesday, June 11, 2014 11:06 AM  
**To:** Austin Moody  
**Subject:** Ergon Asphalt & Emulsions Hydrostatic Testing

Austin,

I've received the hydrostatic testing discharge permit application for Ergon Asphalt & Emulsions, Inc. Please provide me with the estimated volume (gallons) and rate (MGD) of the testing discharge. This information was not filled out on the submitted Notice of Intent.

Let me know if you have any questions.

Thanks,  
Sarah Cousins  
Permit Engineer  
ADEQ-Water Division  
501-682-0627

ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY  
NOTICE OF INTENT  
PIPELINE HYDROSTATIC TESTING DISCHARGE  
NPDES GENERAL PERMIT ARG670000

Application Type: New  Renewal  Permit # ARG67  
AFIN# 60-00676

29045 KB

I. PERMITTEE/OPERATOR INFORMATION

Permittee (Legal Name): Ergon Asphalt & Emulsions Operator Type:  
Permittee Mailing Address: P.O. Box 1639  State  Partnership  
Permittee City: Jackson  Federal  Corporation\*  
Permittee State: MS Zip: 39215  Sole Proprietorship/Private  
Permittee Telephone Number: 601.933.3521 \*State of Incorporation: \_\_\_\_\_  
Permittee Fax Number: 601.933.3369 The legal name of the Permittee must be  
Permittee E-mail Address: Austin.moody@ergon.com identical to the name listed with the  
Arkansas Secretary of State.

II. INVOICE MAILING INFORMATION

Invoice Contact Person: Austin Moody City: Jackson  
Invoice Mailing Company: Ergon Asphalt & Emulsions, Inc. State: MS Zip: 39215  
Invoice Mailing Address: P.O. Box 1639 Telephone: 601.933.3521

III. FACILITY INFORMATION

Facility Name: Ergon Asphalt & Emulsions, Inc Facility Contact Person: Austin Moody  
Facility Address: 601 Shamburger Lane Contact Title: Environmental Engineer  
Facility County: Pulaski Contact Telephone Number: 601.933.3521  
Facility City, State & Zip: Little Rock, AR 72206 Contact E-mail: Austin.moody@ergon.com  
Facility SIC Code: 2951 Facility NAICS Code: 324121 Type of Business: Asphalt/Emulsion Production  
Facility Latitude: 34 Deg 40 Min 43Sec Facility Longitude: 92 Deg 15 Min 54Sec  
Accuracy: \_\_\_\_\_ Method: \_\_\_\_\_ Datum: \_\_\_\_\_ Scale: \_\_\_\_\_ Description: \_\_\_\_\_  
Section: \_\_\_\_\_ Township: \_\_\_\_\_ Range: \_\_\_\_\_

IV. DISCHARGE INFORMATION

Is the permittee capable of meeting the applicable effluent limits and conditions of the general permit?  
 Yes  No\*

\*If the answer is NO, do not submit the NOI for permit coverage.

ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY  
 NOTICE OF INTENT  
 PIPELINE HYDROSTATIC TESTING DISCHARGE  
 NPDES GENERAL PERMIT ARG670000

<b>Outfall Number:</b>	001					
<b>Stream Segment:</b>	3C					
<b>Hydrologic Basin Code:</b>	11110207					
<b>Outfall Latitude:</b>	34	°	40	'	40.52	"
<b>Outfall Longitude:</b>	92	°	15	'	46.67	"
<b>County:</b>	Pulaski					
<b>Start Date:</b>	5/30/2014			<b>End Date:</b>		
<b>Name of Receiving Stream:</b>	Arkansas River					
<b>Are any of the Receiving Streams on the latest Clean Water Act section 303 (d) list of impaired waters or have an approved TMDL? If yes, list the Receiving Streams.</b>	No					
<b>Estimated Volume of Discharge:</b>					<b>gallons</b>	
<b>Estimated Rate of Discharge:</b>					<b>MGD</b>	
<b>Source of Test Water:</b>	City water supply					
<b>Pipeline/Vessel:</b>	<input checked="" type="checkbox"/> Used <input type="checkbox"/> Virgin <input type="checkbox"/> Other _____					
<b>Describe material from which pipeline/vessel was constructed:</b>	Steel					
<b>Type of fluid normally contained/transported through pipe/vessel:</b>	Asphalt and Asphalt Emulsions					
<b>Are Corrosion Inhibitors Used?:</b>	No					
<b>Does pipeline use compressor lubricants containing polychlorinated biphenyls (PCBs)?</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					

<b>Outfall Number:</b>						
<b>Stream Segment:</b>						
<b>Hydrologic Basin Code:</b>						
<b>Outfall Latitude:</b>		°		'		"
<b>Outfall Longitude:</b>		°		'		"
<b>County:</b>						
<b>Start Date:</b>				<b>End Date:</b>		
<b>Name of Receiving Stream:</b>						
<b>Are any of the Receiving Streams on the latest Clean Water Act section 303 (d) list of impaired waters or have an approved TMDL? If yes, list the Receiving Streams.</b>						
<b>Estimated Volume of Discharge:</b>					<b>gallons</b>	
<b>Estimated Rate of Discharge:</b>					<b>MGD</b>	
<b>Source of Test Water:</b>						
<b>Pipeline/Vessel:</b>	<input type="checkbox"/> Used <input type="checkbox"/> Virgin <input type="checkbox"/> Other _____					
<b>Describe material from which pipeline/vessel was constructed:</b>						
<b>Type of fluid normally contained/transported through pipe/vessel:</b>						
<b>Are Corrosion Inhibitors Used?:</b>						
<b>Does pipeline use compressor lubricants containing polychlorinated biphenyls (PCBs)?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No					

Additional Outfalls can be added using separate attached pages.

WATER DIVISION  
 5301 NORTHSHORE DRIVE / NORTH LITTLE ROCK, ARKANSAS 72118  
 PHONE 501-682-0623 / FAX 501-682-0880  
 www.adeg.state.ar.us

**ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY  
NOTICE OF INTENT  
PIPELINE HYDROSTATIC TESTING DISCHARGE  
NPDES GENERAL PERMIT ARG670000**

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**V. FACILITY PERMIT INFORMATION**

NPDES Individual Permit Number (If Applicable): AR00  
NPDES General Permit Number (If Applicable): ARG001185  
State Construction Permit Number(If Applicable): \_\_\_\_\_  
NPDES General Construction Stormwater Permit Number (If Applicable): ARR15

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**VI. OTHER INFORMATION:**

Additional Location Description \_\_\_\_\_  
Additional Comments: \_\_\_\_\_  
Consultant Contact Name: \_\_\_\_\_  
Consultant Email Address: \_\_\_\_\_  
Consultant Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Consultant Phone Number: \_\_\_\_\_ Consultant Fax Number: \_\_\_\_\_

**Disclosure Statements:**

Arkansas Code Annotated Section 8-1-106 requires that all applicants for the issuance or transfer of any permit, license, certification or operational authority issued by the Arkansas Department of Environmental Quality (ADEQ) file a disclosure statement with their applications. The filing of a disclosure statement is mandatory. No application can be considered complete without one. You must submit a new disclosure statement even if you have one on file with the Department. The form may be obtained from ADEQ web site at: [http://www.adeg.state.ar.us/disclosure\\_stmt.pdf](http://www.adeg.state.ar.us/disclosure_stmt.pdf).

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**VII. PERMIT REQUIREMENT VERIFICATION**

Please check the following to verify completion of permit requirements.

	Yes	No	* If No is answered for any of the questions, then a permit can not be issued!
Submittal of Complete NOI?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Submittal of Required Permit Fee?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Check Number: <u>755 910</u>
Submittal of Site Map?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Submittal of Disclosure Statement?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

WATER DIVISION  
5301 NORTHSORE DRIVE / NORTH LITTLE ROCK, ARKANSAS 72118  
PHONE 501-682-0623 / FAX 501-682-0880  
[www.adeg.state.ar.us](http://www.adeg.state.ar.us)

**ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY  
NOTICE OF INTENT  
PIPELINE HYDROSTATIC TESTING DISCHARGE  
NPDES GENERAL PERMIT ARG670000**

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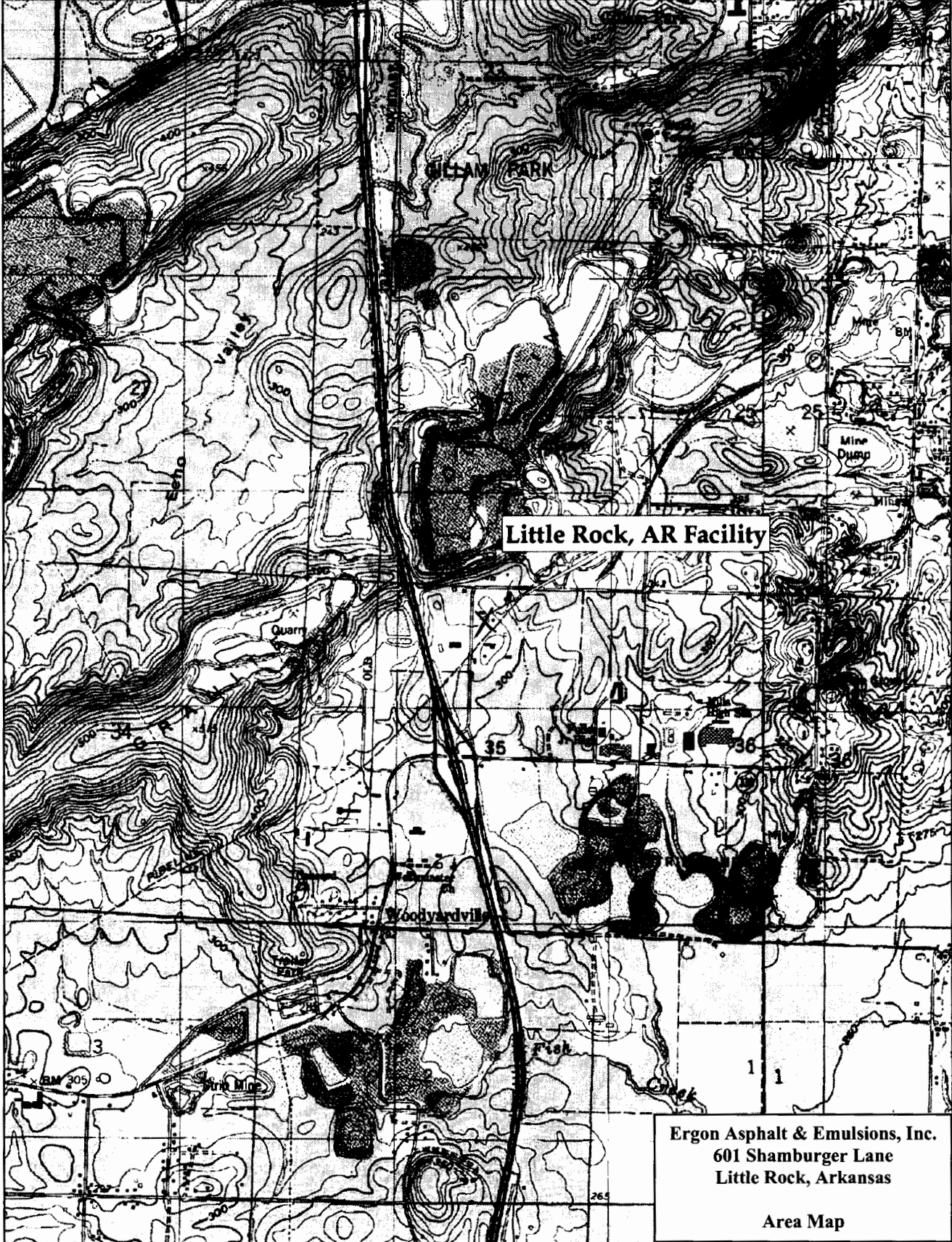
**VIII. CERTIFICATION OF OPERATOR**

- \_\_\_\_ (Initial) "I certify that, if this facility is a corporation, it is registered with the Secretary of the State of Arkansas."
- \_\_\_\_ (Initial) "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 Department will accept reports signed only by the Applicant."
- \_\_\_\_ (Initial) "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."

Responsible Official Printed Name: Paul Young Title: Vice President – Regulatory Affairs  
Responsible Official Signature:  Date: 5/20/2014  
Responsible Official Email: Paul.young@ergon.com

Cognizant Official Printed Name: Mark McGill Title: Facility Manager  
Cognizant Official Signature:  Date: 5-20-14  
Cognizant Official Email: Mark.mcgill@ergon.com Telephone: 501.490.1451

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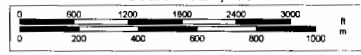
Little Rock, AR Facility

Woodwardville

Ergon Asphalt & Emulsions, Inc.  
601 Shamburger Lane  
Little Rock, Arkansas

Area Map

Scale 1 : 24,000



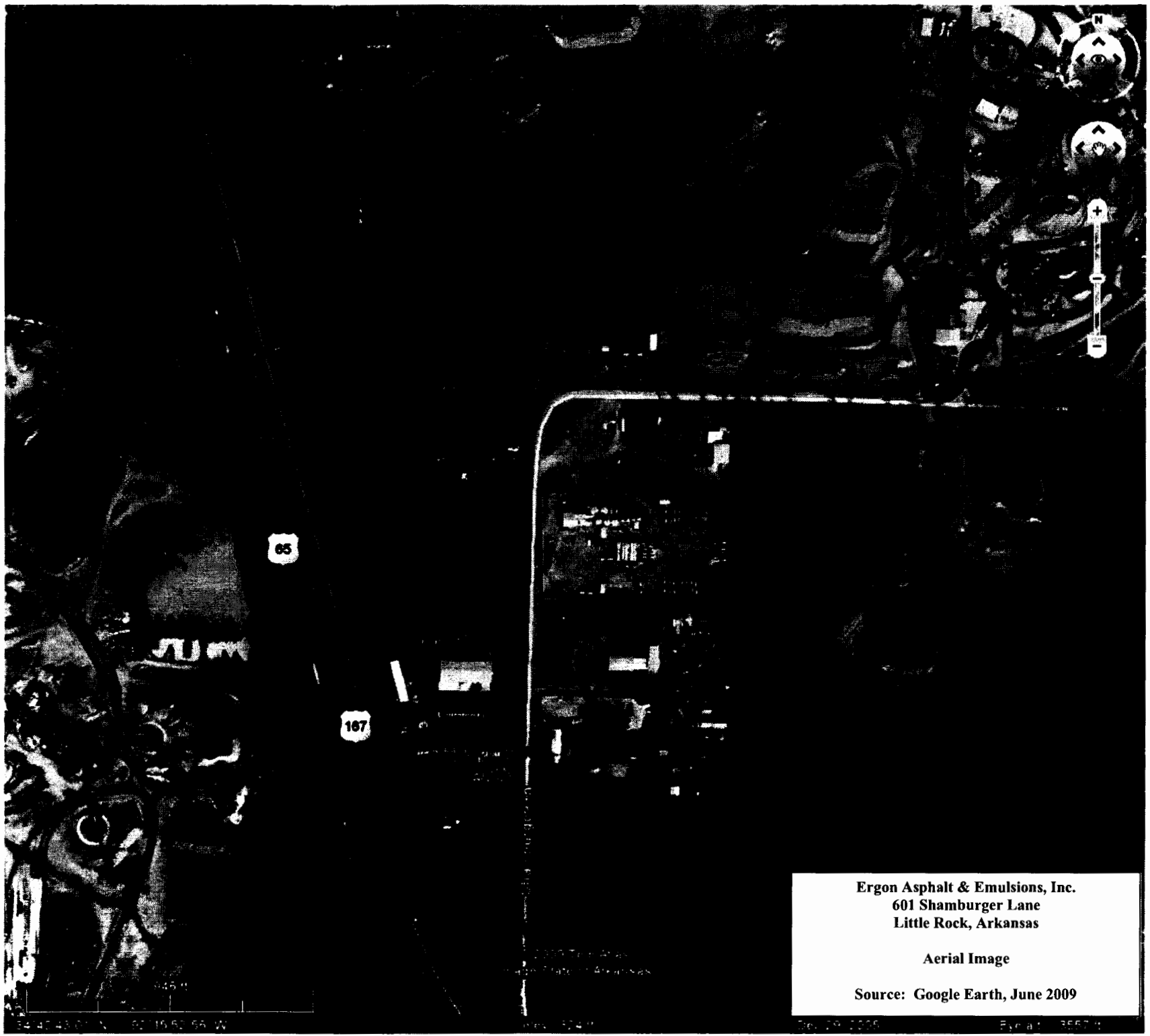
1" = 2,000.0 ft      Data Zoom 13-0

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Ergon Asphalt & Emulsions, Inc.  
601 Shamburger Lane  
Little Rock, Arkansas

Aerial Image

Source: Google Earth, June 2009

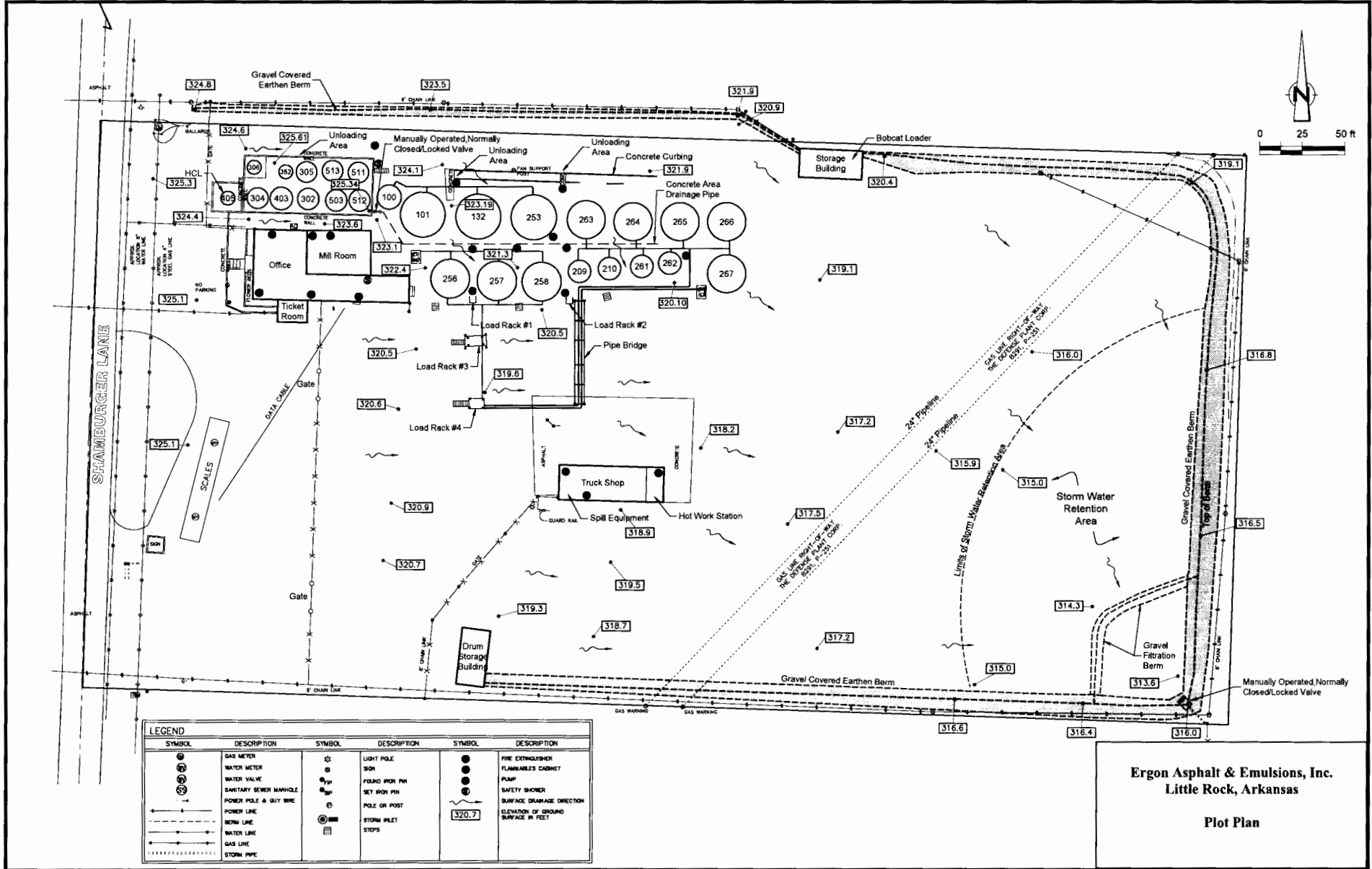
34 40 43.01 N 92 15 52.56 W

1000 Feet

Dec 29 2009

Eye alt: 3557 ft





LEGEND			
SYMBOL	DESCRIPTION	SYMBOL	DESCRIPTION
⊕	GAS METER	○	LIGHT POLE
⊕	WATER METER	○	SIgn
⊕	WATER VALVE	⊕	FOUND IRON PIN
⊕	SANITARY SEWER MANHOLE	⊕	SET IRON PIN
⊕	POWER POLE & GUY WIRE	⊕	POLE OR POST
—	POWER LINE	⊕	STORM PILET
—	BERM LINE	⊕	STEPS
—	WATER LINE	⊕	
—	GAS LINE	⊕	
—	STORM PIPE	⊕	
●	FIRE EXTINGUISHER	⊕	ELEVATION OF GROUND SURFACE IN FEET
⊕	FLAMMABLES CABINET		
⊕	PUMP		
⊕	SAFETY SHOWER		
—	SURFACE DRAINAGE DIRECTION		
⊕			

**Ergon Asphalt & Emulsions, Inc.**  
**Little Rock, Arkansas**  
  
**Plot Plan**



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Date: 6/11/2014

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Name History

Name	Name Type
ERAGON ASPHALT & EMULSIONS, INC.	Legal

Business Corporation - Domestic - Information

<b>Business ID:</b>	505743
<b>Status:</b>	Good Standing
<b>Creation Date:</b>	9/24/1982
<b>State of Incorporation:</b>	MS
<b>Principal Office Address:</b>	2829 LAKELAND DR, P O BOX 23028 JACKSON MS 39225-3028
<b>Listing Address:</b>	No Address

Registered Agent

<b>Agent Name:</b>	KATHRYN W STONE
<b>Office Address:</b>	2829 LAKELAND DRIVE (FLOWOOD), P O BOX 23028 JACKSON MS 39225-3028

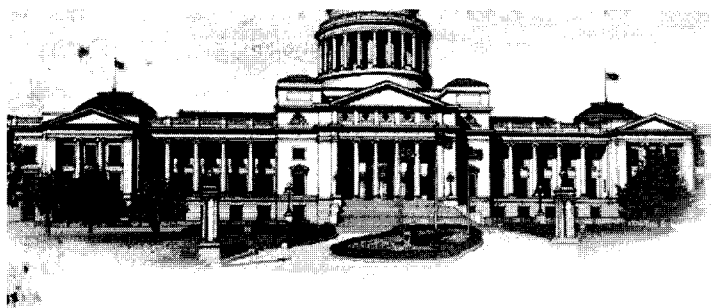
Mailing Address:

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Due to the use of DHTML and Java, this Web site is optimized for Microsoft Internet Explorer 5+ or Netscape 6+.



ARKANSAS  
SECRETARY OF STATE

*Mark Martin*

*Search Incorporations, Cooperatives, Banks and Insurance Companies*

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LLC Member information is now confidential per Act 865 of 2007

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

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For service of process contact the [Secretary of State's office](#).

Corporation Name	ERGON ASPHALT & EMULSIONS, INC.
Fictitious Names	
Filing #	100060176
Filing Type	Foreign For Profit Corporation
Filed under Act	For Bus Corp; 958 of 1987
Status	Good Standing
Principal Address	
Reg. Agent	THE CORPORATION COMPANY
Agent Address	124 WEST CAPITOL AVENUE SUITE 1900 LITTLE ROCK, AR 72201
Date Filed	03/20/1984
Officers	SEE FILE, Incorporator/Organizer WALTER J. LEE , Tax Preparer J. BAXTER BURNS , President KATHRYN W. STONE , Secretary A. PATRICK BUSBY , Vice-President KATHRYN W. STONE , Treasurer
Foreign Name	N/A
Foreign Address	202 EAST PEARL, JACKSON, MS 39201 X,
State of Origin	MS
<a href="#">Purchase a Certificate of Good Standing for this Entity</a>	<a href="#">Pay Franchise Tax for this corporation</a>



CERTIFIED MAIL – 7011 1570 0002 7895 5435

May 23, 2014

Arkansas Department of Environmental Quality  
Water Division, Permits Branch  
5301 Northshore Drive  
North Little Rock, AR 72118

RE: Arkansas NPDES General Permit ARG001185  
Ergon Asphalt and Emulsions, Inc. – Little Rock  
Permit Application Disclosure Statement

To Whom It May Concern:

Please find attached the Disclosure Statement for Ergon Asphalt and Emulsions, Inc. – Little Rock's general water permit application. This is sent in coordination with the NOI for our pipeline hydrostatic testing discharge application.

Should you have any questions, please contact me at (601) 933-3521 or via email at [austin.moody@ergon.com](mailto:austin.moody@ergon.com).

Sincerely,

A handwritten signature in black ink that reads "Austin Moody" with the word "For" written below it.

Austin Moody  
Environmental Engineer  
Ergon Asphalt and Emulsions, Inc.

CC: Tim Breeding - ETI-ME  
Ray Callahan - Ergon, Inc.  
File(143-E-02-14- )

# ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY DISCLOSURE STATEMENT

## Instructions for the Completion of this Document:

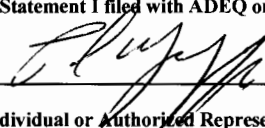
- A. Individuals, firms or other legal entities with no changes to an ADEQ Disclosure Statement, complete items 1 through 5 and 18.
- B. Individuals who never submitted an ADEQ Disclosure Statement, complete items 1 through 4, 6, 7, and 16 through 18.
- C. Firms or other legal entities who never submitted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

**Mail to:**  
**ADEQ**  
**DISCLOSURE STATEMENT**  
*[List Proper Division(s)]*  
**5301 Northshore Drive**  
**North Little Rock, AR 72118-5317**

**Hand Deliver to:**  
**ADEQ**  
**DISCLOSURE STATEMENT**  
*[List Proper Division (s)]*  
**5301 Northshore Drive**  
**North Little Rock, AR 72118-5317**

1. APPLICANT: (Full Name) <b>Ergon Asphalt &amp; Emulsions, Inc.</b>
2. MAILING ADDRESS (Number and Street, P.O.Box Or Rural Route) : <b>P.O. Box 1639</b>
3. CITY, STATE, AND ZIPCODE: <b>Jackson, MS 39215</b>

<p>4. (check all that apply.)</p> <p> <input checked="" type="checkbox"/> Individual      <input checked="" type="checkbox"/> Corporate or Other Entity  <input checked="" type="checkbox"/> Permit    <input type="checkbox"/> License    <input type="checkbox"/> Certification    <input type="checkbox"/> Operational Authority  <input checked="" type="checkbox"/> New Application    <input type="checkbox"/> Modification    <input type="checkbox"/> Renewal Application (If no changes from previous disclosure statement, complete number 5 and 18.)  <input checked="" type="checkbox"/> Air    <input checked="" type="checkbox"/> Water    <input checked="" type="checkbox"/> Hazardous Waste    <input checked="" type="checkbox"/> Regulated Storage Tank    <input type="checkbox"/> Mining    <input type="checkbox"/> Solid Waste  <input type="checkbox"/> Environmental Preservation and Technical Service         </p>
---

<p>5. <b>Declaration of No Changes:</b>            The violation history, experience and credentials, involvement in current or pending environmental lawsuits, civil and criminal, have not changed since the last Disclosure Statement I filed with ADEQ on <u>July 29, 2009</u></p> <p style="text-align: center;">             _____            Signature of Individual or Authorized Representative of Firm or Legal Entity            (Also complete #18.)         </p>
--

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

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

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

**(Attach additional pages, if necessary.)**

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

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

NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

STREET: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

STREET: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

STREET: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

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

NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

STREET: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

STREET: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

STREET: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

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

NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

STREET: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

STREET: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

STREET: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

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

NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

STREET: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

STREET: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

STREET: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

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

NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

STREET: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

STREET: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

STREET: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

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

NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

STREET: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

STREET: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

STREET: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

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

NAME: \_\_\_\_\_

STREET: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

Organizational Relationship:

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

NAME: \_\_\_\_\_

STREET: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

Organizational Relationship:



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

NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

STREET: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

STREET: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

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

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.

State of Mississippi

County of Rankin

I, Paul Young, swear and affirm that the information contained in this Disclosure Statement is true and correct to the best of my knowledge, information and belief.

APPLICANT SIGNATURE:

Paul W Young

COMPANY TITLE:

Vice President - Regulatory Affairs

DATE:

May 22, 2014

SUBSCRIBED AND SWORN TO BEFORE ME THIS 22<sup>ND</sup> DAY OF MAY 20 14

Janis H Erikson  
NOTARY PUBLIC

MY COMMISSION EXPIRES:

August 18, 2017



# General Permit Route Sheet

HUC: 11110207

Facility Name		Ergon Asphalt & Emulsions	
Permit Number		ARG 670801	AFIN NO.* 60-00676
Stream Segment:	3C	Receiving Stream:	unnamed trib. of Fish Creek
Assigned	Activity	Initials	Date Complete/Entered
Sect.	Application Logged/Assign Tracking Number/Place in red folder with appropriate route sheet and filing folders (1-day)	KB	N/A
Engineer	Completeness and Technical Review/Enter permit information into Database (3-days)	SC	6/12
AA (Max of 5 business days)	AFIN request (1-day)	ML	
	Enter AFIN and other information into PDS and NPDES database prior to requesting invoice (same day)	TPB	6/12
	Complete Invoice Request Form and submit Invoice Request (same day)	TPB	6/12
	Prepare Authorization letter and attach appropriate permit, forms (1-day)	TPB	6/12
Engineer	Review/organize folder for scanning (1-day)	SC	6/12
Engineer Supervisor	Review all the documents/permits/performs technical review for the proposed project. (1-day)	SB	6/16
Assistant Chief	Review the documents and sign the authorization letter or the permit. (1-day)	SB	6/16
AA	Enter Into PDS: Permit Status/Effective Date. Input effective date in access database. (1-day)	TPB	6/18
Sect.	Mail original to applicant. Scan complete folder and place in appropriate E-drive folders. Update Zylab. Be sure to include this permit in weekly report, due every Tuesday by 2:00 P.M.	KB	6-18

Sent email about estimated discharge volume & rate - 6/11  
Received 6/11

REMARKS: \_\_\_\_\_