



ARKANSAS
Department of Environmental Quality

C E 2 X 4

NO EXPOSURE CERTIFICATION
For Exclusion from NPDES Stormwater Permitting

The enclosed form may be used to request a No Exposure Exclusion from Industrial Stormwater permitting requirements as outlined in Part 1.8 of ARR000000. **Only** a copy of the attached authorized Request Form will be accepted by this Department. A condition of No Exposure exists at an industrial facility when all industrial materials and activities are protected from exposure to rain, snow, snowmelt, and/or runoff (See 40 CFR 122.26(b)(14)(i) – (ix) and (xi)).

Anyone seeking a No Exposure Exclusion must perform the following:

- complete all sections of the No Exposure Certification Form.
- Sign the Certification in Section VIII.
- submit the following to the Department:

	Complete No Exposure Certification Form	Initial Permit Fee
New Applicant	Yes	Yes*
Renewal	Yes	No

* Required by APCEC Regulation No. 9. Subsequent annual fees of \$200.00 per year will be billed by the Department. Failure to remit the required permit fee may be grounds for the Director to deny coverage under this general permit, and to require the owner or operator to apply for an individual NPDES permit.

Return the completed forms to:

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

Or by or by electronic mail (Complete documents (NOI and/or SWPPP) must be submitted in Adobe Acrobat format (.pdf) to: Water-permit-application@adeq.state.ar.us. **Notice of Coverage (NOC) will not be issued until payment has been received by ADEQ.**

NOTE: DO NOT LEAVE BLANK SPACES IN THE NOTICE OF INTENT. IF ANY QUESTION DOES NOT APPLY, MARK "N/A" IN THE SPACE PROVIDED.

For additional information please contact: General Permits Engineer
Ph.: (501) 682-0623
Fax: (501) 682-0910

Instructions for the No Exposure Certification for



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Who May File a No Exposure Certification?

Federal law at 40 CFR Part 122.26 prohibits point source discharges of stormwater associated with industrial activity to waters of the U.S. without a National Pollutant Discharge Elimination System (NPDES) permit. However, NPDES permit coverage is not required for discharges of stormwater associated with industrial activities identified at 40 CFR 122.26(b)(14)(i) – (ix) and (xi) of the discharger can certify that a condition of “no exposure” exists at the industrial facility or site.

Stormwater discharges from construction activities identified in 40 CFR 122.26(b)(14)(x) and (b)(15) are not eligible for the no exposure exclusion.

Obtaining and Maintaining the No Exposure Exclusion

This form is used to certify that a condition of no exposure exists at the industrial facility or site described herein. This certification is only applicable in jurisdictions where ADEQ is the NPDES permitting authority and must be re-submitted at least once every five years.

The industrial facility operator must maintain a condition of no exposure at its facility or site in order for the no exposure exclusion to remain applicable. If conditions change resulting in the exposure of materials and activities to stormwater, the facility operator must obtain coverage under an NPDES stormwater permit immediately.

How to Determine Latitude and Longitude:

If a physical address is known go to www.terraser-ver-usa.com and proceed with the following steps:

1. Select Advanced Find
2. Select Address
3. Input address
4. Click on Aerial Photo
5. Click on the Info link at the top of the page
6. Note the Latitude and Longitude are in Decimal Coordinates.
7. Go to www.geology.enr.state.nc.us/gis/latlon.html to convert coordinates to Degrees, Minutes, and Seconds.

NOTE: If a physical address does not exist you may find the coordinates in the Legal Description of the property.

Signatory Requirements:

The information contained in this form must be certified by a **responsible official** as defined in the “signatory requirements for permit applications” (40 CFR 122.22). Responsible official is defined as follows:

Corporation, a principal officer of at least the level of vice president, treasurer

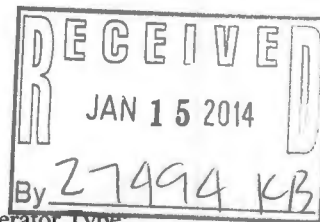
Partnership, a general partner

Sole proprietorship: the proprietor

Municipal, state, federal, or other public facility: principal executive officer, or ranking elected official

NO EXPOSURE CERTIFICATION FORM
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Application Type: New X Renewal ☐ Permit No. ARR00_0000



I. PERMITTEE/OPERATOR INFORMATION

Permittee (Legal Name)*: Eakas Arkansas
Permittee Mailing Address: P.O. Box 8
Permittee City: Wynne
Permittee State: Arkansas Zip: 72396
Permittee Telephone Number: 870-238-2603
Permittee Fax Number: 870-238-2621
Permittee E-mail Address: jwagner@eakas.com

Operator Type:

☐ STATE ☐ PARTNERSHIP
☐ FEDERAL ☒ CORPORATION**
☐ SOLE PROPRIETORSHIP
☐ PUBLIC
☐ OTHER: _____

**State of Incorporation: AR

* The legal name of the Permittee must be identical to the name listed with the Arkansas Secretary of State.

II. INVOICE MAILING INFORMATION (if different from facility mailing address)

Invoice Contact Person: _____ City: _____
Invoice Mailing Company: _____ State: _____ Zip: _____
Invoice Mailing Address: _____ Telephone: _____

III. FACILITY INFORMATION

Facility Name (if different from Permittee): _____
Facility Physical Address: 2000 S. Falls Blvd. Contact Person: Jeffrey Wagner
Facility County: Cross Contact Title: Plant Manager
Facility City: Wynne Zip: 72396 Telephone Number: 815-223-8811 X 246
From Interstate 40, take Exit 241B toward Wynne. Travel on Highway 1 North for approximately 10 miles. Arrive at 2000 S. Falls Blvd.
Directions to the Facility: _____ Fax Number: 815-223-8898
AFIN (if known): 19-00233 Email Address: jwagner@eakas.com

Is mailing address different from facility address? ☒ Yes ☐ No If yes, provide mailing address in the space provided.

Mailing Address: P.O. Box 8 City: Wynne State: AR Zip: 72396

Type of Business: Automotive Decorative
Injection Molding Facility SIC Code(s): 3089 NAICS Code (s): 332813

Facility Latitude: * N 35 degrees 11 minutes 46.8 seconds * Facility coordinates should be taken at the entrance to the facility.
Facility Longitude: * W 90 degrees 47 minutes 40.0 seconds

IV. NO EXPOSURE EXCLUSION CERTIFICATION

Submission of this No Exposure Certification constitutes notice that the entity identified in Section I does not require permit authorization for its stormwater discharges associated with industrial activity in the State as identified in 40 CFR 122.26(b)(14)(i) – (ix) and (xi) due to the existence of a condition of No Exposure. A condition of No Exposure exists at an industrial facility when all industrial materials and activities are protected by a storm resistant shelter to prevent exposure to rain, snow, snowmelt, and/or runoff. Industrial materials or activities include, but are not limited to, material handling equipment or activities, industrial machinery, raw materials, intermediate products, by-products, final products, or waste products. Material handling activities include the storage, loading and unloading, transportation, or conveyance of any raw material, intermediate product, final product, or waste product. A storm resistant shelter is not required for the following industrial materials and activities:

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1. Drums, barrels, tanks, and similar containers that are tightly sealed, provided those containers are not deteriorated and do not leak. "Sealed" means banded or otherwise secured and without operational taps or valves;
2. Adequately maintained vehicles used in material handling; and
3. Final products, other than those products that would be mobilized in stormwater discharges (e.g., rock salt).

A No Exposure Certification must be provided for each facility qualifying for the No Exposure Exclusion. In addition, the exclusion from NPDES permitting is available on a facility-wide basis only, not for individual outfalls. If any industrial activities or materials are or will be exposed to precipitation, the facility is not eligible for the "no exposure" exclusion.

By signing and submitting this No Exposure Certification form, the entity in Section I is certifying that a condition of No Exposure exists at its facility or site, and is obligated to comply with the terms and conditions of 40 CFR 122.26(g).

EXPOSURE CHECKLIST

Are any of the following materials or activities exposed to precipitation, now or in the foreseeable future? (Please check either "Yes" or "No" in the appropriate box.) **If you answer "Yes" to any of the questions (a) through (k), you are not eligible for the No Exposure Exclusion. If you answer "No" to questions (a) through (k) and "Yes" to question (l), determination of a No Exposure Exclusion will be made on a case-by-case basis.**

	Yes	No
a. Using, storing, or cleaning industrial machinery or equipment, and areas where residuals from using, storing, or cleaning industrial machinery or equipment remain and are exposed to stormwater.	<input type="checkbox"/>	X
b. Are materials or residuals on the ground or in stormwater inlets from spills/leaks.	<input type="checkbox"/>	X
c. Are materials or products from past industrial activity exposed.	<input type="checkbox"/>	X
d. Is material handling equipment exposed (except adequately maintained vehicles).	<input type="checkbox"/>	X
e. Are materials or products during loading/unloading or transporting activities exposed.	<input type="checkbox"/>	X
f. Materials or products stored outdoors (except final products intended for outside use [e.g., new cars] where exposure to stormwater does not result in the discharge of pollutants).	<input type="checkbox"/>	X
g. Materials contained in open, deteriorated, or leaking storage drums, barrels, tanks, and similar containers.	<input type="checkbox"/>	X
h. Materials or products handled/stored on roads or railways owned or maintained by the discharger.	<input type="checkbox"/>	X
i. Waste materials exposed (except waste in covered, non-leaking containers [e.g., dumpsters]).	<input type="checkbox"/>	X
j. Application or disposal of process wastewater (unless otherwise permitted).	<input type="checkbox"/>	X
k. Particulate matter or visible deposits of residuals from roof stacks and/or vents not otherwise regulated (i.e., under an air quality control permit) and evident in the stormwater outflow.	<input type="checkbox"/>	X
l. Allowed non-stormwater discharges go through any outfall(s).	<input type="checkbox"/> *	X

* List all allowed non-stormwater discharges going through Outfall: _____

V. FACILITY PERMIT INFORMATION

List any permits from the Water Division that the facility may have coverage under.

NPDES Individual Permit No.: AR00
NPDES General Construction Stormwater Permit No.: ARR15
NPDES Non-Stormwater General Permit No.: ARG
No Discharge Permit No.: _____

List any permits the facility has from another division within ADEQ: _____

VI. CERTIFICATION STATEMENT

"I certify under penalty of law that I have read and understand the eligibility requirements for claiming a condition of "No Exposure" and obtaining an exclusion from NPDES stormwater permitting; I certify under penalty of law that there are no discharges of stormwater contaminated by exposure to industrial activities or materials from the industrial facility or site identified in this document (except as allowed under 40 CFR 122.26(g)(2)); I understand that I am obligated to submit a No Exposure Certification form once **every five years** to the NPDES permitting authority and, if requested, to the operator of the local municipal separate storm sewer system (MS4) into which the facility discharges (where applicable). I understand that I must allow the NPDES permitting authority, or MS4 operator where the discharge is into the local MS4, to perform inspections to confirm the condition of No Exposure and to

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make such inspection reports publicly available upon request. I understand that I must obtain coverage under an NPDES permit prior to any point source discharge of stormwater from the facility; Additionally, 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."

Typed or Printed Name: Jeffrey Wagner

Title: Plant Manager

Signature: 

Date: 1-9-14

VII. COGNIZANT OFFICIAL

Cognizant Official Printed Name: Tom Mori

Title: President

Cognizant Official Signature: 

Telephone: (815) 223-8811

Cognizant Official E-mail: tmori@eakas.com



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Corporation Name	EAKAS ARKANSAS CORPORATION
Fictitious Names	
Filing #	800024415
Filing Type	For Profit Corporation
Filed under Act	Dom Bus Corp; 958 of 1987
Status	Good Standing
Principal Address	
Reg. Agent	TRACY WEBSTER
Agent Address	2000 S. FALLS BLVD. WYNNE, AR 72396
Date Filed	01/05/2004
Officers	W. FRANK MORLEDGE , Incorporator/Organizer JAMES M. SAXTON , Tax Preparer TOMOHISA MORI , President JAMES M. SAXTON , Secretary
Foreign Name	N/A
Foreign Address	
State of Origin	N/A

[Purchase a Certificate of Good Standing for this Entity](#)

[Pay Franchise Tax for this corporation](#)

Industrial Stormwater Permit Route Sheet

Williams
Creek
Cat 5
TDS from
Mun. pit SC

Facility Name: <u>Eakas Arkansas</u>			
Permit Number: <u>ARR001259</u>		AFIN NO.: <u>19-00233</u>	
No Exposure Exclusion: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Additional Parameters <input type="checkbox"/>	Industrial Sector: <u>Y2</u>
Stream Segment: <u>5B</u>	Nearest Receiving Water: <u>Indian Creek</u>		HUC: <u>8020205</u>
SoS Check <input checked="" type="checkbox"/>	303(d) list <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Google Earth coord to <u>puckett@adeq.state.ar.us</u> <input type="checkbox"/>	
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	1/16
AA (Max of 5 business days)	AFIN request (1-day)	N/A	
	Enter AFIN and other information into PDS and NPDES database prior to requesting invoice (same day)	JB	1/16
	Complete Invoice Request Form and submit Invoice Request (same day)	JB	1/16
	Prepare Authorization letter and attach appropriate permit, forms (1-day)	JB	1/16
Engineer	Review/organize folder for scanning (1-day)	SC	1/21
Engineer Supervisor	Review all the documents/permits/perform technical review for the proposed project. (1-day)	⓪	1/22
Assistant Chief	Review the documents and sign the authorization letter or the permit. (1-day)		
AA	Enter Into PDS: Permit Status/Effective Date. Input effective date in access database. (1-day)	JB	1/23
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	1-23

REMARKS: _____