GAC CONTRACTORS
GREAT NORTHWEST UTILITY SPECIALIST
GULF ASPHALT
POST OFFICE BOX 59462, PANAMA CITY, FL 32412-0462
FAX: (850) 769-3456
(850) 769-3477
(850) 785-4675

PROJECT 0050008-004-AC

May 26, 2010

Mr. Rick Bradburn
Air Program Administrator
Department of Environmental Protection
160 Governmental Center
Pensacola, FL 32501-5794

Subject: GAC Contractors Asphalt Plant- Construction Permit
Facility ID 0050008
Panama City, FL, Bay County
005-008-003-AO

Dear Mr. Bradburn:

Enclosed please find four (4) copies of our Application for Air Permit (DEP Form 62-210-900(3)) for the addition of a lime silo. Also enclosed is the processing fee of $250.00. Mr. Armando Sarasua was most helpful to us in preparing this application.

Sincerely,

Richard M. Dodd, P.E.
President

RMD/slc

RECEIVED
MAY 27 2010
NORTHWEST FLORIDA
DEP

Department of Environmental Protection

Division of Air Resources Management

APPLICATION FOR AIR PERMIT - NON-TITLE V SOURCE

See Instructions for Form No. 62-210.900(3)

I. APPLICATION INFORMATION

0050008-004-AC

Identification of Facility

1. Facility Owner/Company Name: GAC Contractors, Inc.	
2. Site Name: Gulf Asphalt	
3. Facility Identification Number: 0050008 [ ] Unknown	
4. Facility Location: Street Address or Other Locator: 4116 US Hwy 231 North City:Panama City County: FL Zip Code: 32404	
5. Relocatable Facility? [ ] Yes [X] No	6. Existing Permitted Facility? [X] Yes [ ] No

Application Contact

1. Name and Title of Application Contact: Richard M. Dodd, President
2. Application Contact Mailing Address: Organization/Firm: GAC Contractors, Inc. Street Address: PO Box 59462 City: Panama City State: FL Zip Code: 32412
3. Application Contact Telephone Numbers: Telephone: (850) 769 - 3477 Fax: (850) 769 - 3456

Application Processing Information (DEP Use)

1. Date of Receipt of Application:	
2. Permit Number:	

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DEP

Purpose of Application

Air Operation Permit Application

This Application for Air Permit is submitted to obtain: (Check one)

[ ] Initial non-Title V air operation permit for one or more existing, but previously unpermitted, emissions units.

[ ] Initial non-Title V air operation permit for one or more newly constructed or modified emissions units.

Current construction permit number:_____

[ ] Non-Title V air operation permit revision to address one or more newly constructed or modified emissions units.

Current construction permit number:_____

Operation permit number to be revised:_____

[ ] Initial non-Title V air operation permit under Rule 62-210.300(2)(b), F.A.C., for an existing facility seeking classification as a synthetic non-Title V source.

Current operation/construction permit number(s):

_____

[ ] Non-Title V air operation permit revision for a synthetic non-Title V source. Give reason for revision; e.g., to address one or more newly constructed or modified emissions units.

Operation permit number to be revised:_____

Reason for revision:_____

Air Construction Permit Application

This Application for Air Permit is submitted to obtain: (Check one)

[ ]Air construction permit to construct or modify one or more emissions units.

[ ] Air construction permit to make federally enforceable an assumed restriction on the potential emissions of one or more existing, permitted emissions units.

[X] Air construction permit for one or more existing, but unpermitted, emissions units.

Owner/Authorized Representative

1. Name and Title of Owner/Authorized Representative:
   GAC Contractors, Inc. Richard M. Dodd, President, PE

2. Owner/Authorized Representative Mailing Address:
   Organization/Firm: GAC Contractors, Inc.
   Street Address: 4116 US Hwy 231 North
   City: Panama City State: FL Zip Code: 32404

3. Owner/Authorized Representative Telephone Numbers:
   Telephone: (850) 769 - 3477 Fax: (850) 769 - 3456

4. Owner/Authorized Representative Statement:

   I, the undersigned, am the owner or authorized representative of the facility addressed in this application. I hereby certify, based on information and belief formed after reasonable inquiry, that the statements made in this application are true, accurate and complete and that, to the best of my knowledge, any estimates of emissions reported in this application are based upon reasonable techniques for calculating emissions. The air pollutant emissions units and air pollution control equipment described in this application will be operated and maintained so as to comply with all applicable standards for control of air pollutant emissions found in the statutes of the State of Florida and rules of the Department of Environmental Protection and revisions thereof. I understand that a permit, if granted by the Department, cannot be transferred without authorization from the Department, and I will promptly notify the Department upon sale or legal transfer of any permitted emissions unit.*

   Signature Date 5/26/10

* Attach letter of authorization if not currently on file.

Professional Engineer Certification

1. Professional Engineer Name: Richard M. Dodd
   Registration Number: 0000046579

2. Professional Engineer Mailing Address:
   Organization/Firm: GAC Contractors, Inc.
   Street Address: 4116 US Hwy 231 North
   City: Panama City State: FL Zip Code: 32404

3. Professional Engineer Telephone Numbers:
   Telephone: (850) 769 - 3477 Fax: (850) 769 - 3456

4. Professional Engineer Statement:

I, the undersigned, hereby certify, except as particularly noted herein, that:*

(1) To the best of my knowledge, there is reasonable assurance that the air pollutant emissions unit(s) and the air pollution control equipment described in this Application for Air Permit, when properly operated and maintained, will comply with all applicable standards for control of air pollutant emissions found in the Florida Statutes and rules of the Department of Environmental Protection; and

(2) To the best of my knowledge, any emission estimates reported or relied on in this application are true, accurate, and complete and are either based upon reasonable techniques available for calculating emissions or, for emission estimates of hazardous air pollutants not regulated for an emissions unit addressed in this application, based solely upon the materials, information and calculations submitted with this application.

If the purpose of this application is to obtain an air construction permit for one or more proposed new or modified emissions units (check here [ ], if so), I further certify that the engineering features of each such emissions unit described in this application have been designed or examined by me or individuals under my direct supervision and found to be in conformity with sound engineering principles applicable to the control of emissions of the air pollutants characterized in this application.

If the purpose of this application is to obtain an initial air operation permit or operation permit revision for one or more newly constructed or modified emissions units (check here [ ], if so), I further certify that, with the exception of any changes detailed as part of this application, each such emissions unit has been constructed or modified in substantial accordance with the information given in the corresponding application for air construction permit and with all provisions contained in such permit.

Signature 5/26/10 Date

(seal)

* Attach any exception to certification statement.

Scope of Application

Emissions Unit ID	Description of Emissions Unit	Permit Type	Processing Fee
	Lime Silo Baghouse	ACIF	$250.00

Application Processing Fee

Check one: [X] Attached - Amount: $_250.00_____ [ ] Not Applicable_

Construction/Modification Information

1. Description of Proposed Project or Alterations: Installation of a lime silo with a top-mounted baghouse.
2. Projected or Actual Date of Commencement of Construction: October 5, 2009
3. Projected Date of Completion of Construction: June 15, 2010

Application Comment

II. FACILITY INFORMATION

A. GENERAL FACILITY INFORMATION

Facility Location and Type

1. Facility UTM Coordinates: Zone: 16 East (km): 16,634.9 North (km): 3343.7			
2. Facility Latitude/Longitude: Latitude (DD/MM/SS): 30/13/30 Longitude (DD/MM/SS): 85/34/40			
3. Governmental Facility Code: O	4. Facility Status Code: A	5. Facility Major Group SIC Code: 29	6. Facility SIC(s): 2951
7. Facility Comment (limit to 500 characters):			

Facility Contact

1. Name and Title of Facility Contact: Richard M. Dodd, President
2. Facility Contact Mailing Address: Organization/Firm: GAC Contractors, Inc. Street Address: PO Box 59462 City: Panama City State: FL Zip Code: 32412
3. Facility Contact Telephone Numbers: Telephone: (850) 769 - 3477 Fax: (850) 769 - 3456

Facility Regulatory Classifications

Check all that apply:

1. [ ] Small Business Stationary Source?	[ ] Unknown
2. [X] Synthetic Non-Title V Source?	
3. [X] Synthetic Minor Source of Pollutants Other than HAPs?	
4. [ ] Synthetic Minor Source of HAPs?	
5. [ ] One or More Emissions Units Subject to NSPS?	
6. [ ] One or More Emission Units Subject to NESHAP Recordkeeping or Reporting?	
7. Facility Regulatory Classifications Comment (limit to 200 characters):	

Rule Applicability Analysis

B. FACILITY POLLUTANTS

List of Pollutants Emitted

1. Pollutant Emitted	2. Pollutant Classif.	3. Requested Emissions Cap lb/hour	tons/year	4. Basis for Emissions Cap	5. Pollutant Comment
PM	SM				Lime dust
PM10	SM				Lime dust

C. FACILITY SUPPLEMENTAL INFORMATION

Supplemental Requirements

1. Area Map Showing Facility Location: [ ] Attached, Document ID:_____ [ ] Not Applicable [ ] Waiver Requested
2. Facility Plot Plan: [X] Attached, Document ID:_Dwg A [ ] Not Applicable [ ] Waiver Requested
3. Process Flow Diagram(s): [X] Attached, Document ID:__Dwg B [ ] Not Applicable [ ] Waiver Requested
4. Precautions to Prevent Emissions of Unconfined Particulate Matter: [ ] Attached, Document ID:_____ [ ] Not Applicable [ ] Waiver Requested
5. Supplemental Information for Construction Permit Application: [ ] Attached, Document ID:_____ [ ] Not Applicable
6. Supplemental Requirements Comment:

III. EMISSIONS UNIT INFORMATION

A separate Emissions Unit Information Section (including subsections A through G as required) must be completed for each emissions unit addressed in this Application for Air Permit. If submitting the application form in hard copy, indicate, in the space provided at the top of each page, the number of this Emissions Unit Information Section and the total number of Emissions Unit Information Sections submitted as part of this application.

A. GENERAL EMISSIONS UNIT INFORMATION

Emissions Unit Description and Status

1. Type of Emissions Unit Addressed in This Section: (Check one) [X] This Emissions Unit Information Section addresses, as a single emissions unit, a single process or production unit, or activity, which produces one or more air pollutants and which has at least one definable emission point (stack or vent). [ ] This Emissions Unit Information Section addresses, as a single emissions unit, a group of process or production units and activities which has at least one definable emission point (stack or vent) but may also produce fugitive emissions. [ ] This Emissions Unit Information Section addresses, as a single emissions unit, one or more process or production units and activities which produce fugitive emissions only.		
2. Description of Emissions Unit Addressed in This Section (limit to 60 characters): Lime silo with top-mounted baghouse		
3. Emissions Unit Identification Number: ID:		[X] No ID [ ] ID Unknown
4. Emissions Unit Status Code: A	5. Initial Startup Date:	6. Emissions Unit Major Group SIC Code: 2951
7. Emissions Unit Comment: (Limit to 500 Characters)		

Emissions Unit Information Section _____ of _____

Emissions Unit Control Equipment

1. Control Equipment/Method Description (limit to 200 characters per device or method): Lime Silo top-mounted baghouse. Baghouse manufactured by Griffin Environmental Company, Inc., Syracuse NY. Model Optbelt – VB 4L -290. 54 cloth bags, 4-inch diameter, 6 feet long.
2. Control Device or Method Code(s):

Emissions Unit Details

1. Package Unit:			
Manufacturer:	NA	Model Number:	
2. Generator Nameplate Rating:	NA	MW	
3. Incinerator Information:		NA	
Dwell Temperature:			°F
Dwell Time:			seconds
Incinerator Afterburner Temperature:			°F

Emissions Unit Operating Capacity and Schedule

1. Maximum Heat Input Rate:		NA	mmBtu/hr
2. Maximum Incineration Rate:	NA	lb/hr	tons/day
3. Maximum Process or Throughput Rate:			
4. Maximum Production Rate:			
5. Requested Maximum Operating Schedule:			
	hours/day		days/week
	weeks/year		hours/year
6. Operating Capacity/Schedule Comment (limit to 200 characters): Operation depends on production schedule of asphalt mixing specifications.			

Emissions Unit Information Section _____ of _____

B. EMISSION POINT (STACK/VENT) INFORMATION

Emission Point Description and Type

1. Identification of Point on Plot Plan or Flow Diagram? YES		2. Emission Point Type Code: 1
3. Descriptions of Emission Points Comprising this Emissions Unit for VE Tracking (limit to 100 characters per point): Top of baghouse		
4. ID Numbers or Descriptions of Emission Units with this Emission Point in Common:		
5. Discharge Type Code: W	6. Stack Height: feet	7. Exit Diameter: feet
8. Exit Temperature: 77 °F	9. Actual Volumetric Flow Rate: acfm	10. Water Vapor: %
11. Maximum Dry Standard Flow Rate: dscfm		12. Nonstack Emission Point Height: 60 feet
13. Emission Point UTM Coordinates: Zone: 16 East (km): 16,634.9 North (km): 3343.7		
14. Emission Point Comment (limit to 200 characters):		

Emissions Unit Information Section _____ of _____

C. SEGMENT (PROCESS/FUEL) INFORMATION

Segment Description and Rate: Segment _____ of _____

1. Segment Description (Process/Fuel Type) (limit to 500 characters): Process: Batch transfer of lime from lime silo to asphalt mixer. Only used for certain FDOT asphalt mixture specifications.		
2. Source Classification Code (SCC):	3. SCC Units:	
4. Maximum Hourly Rate:	5. Maximum Annual Rate:	6. Estimated Annual Activity Factor:
7. Maximum % Sulfur: NA	8. Maximum % Ash: NA	9. Million Btu per SCC Unit: NA
10. Segment Comment (limit to 200 characters):		

Segment Description and Rate: Segment _____ of _____

1. Segment Description (Process/Fuel Type) (limit to 500 characters):		
2. Source Classification Code (SCC):	3. SCC Units:	
4. Maximum Hourly Rate:	5. Maximum Annual Rate:	6. Estimated Annual Activity Factor:
7. Maximum % Sulfur:	8. Maximum % Ash:	9. Million Btu per SCC Unit:
10. Segment Comment (limit to 200 characters):		

Emissions Unit Information Section _____ of _____

Pollutant Detail Information Page _____ of _____

D. EMISSIONS UNIT POLLUTANT DETAIL INFORMATION

Potential Emissions

1. Pollutant Emitted:	2. Pollutant Regulatory Code:	
3. Primary Control Device Code:	4. Secondary Control Device Code:	5. Total Percent Efficiency of Control:
6. Potential Emissions: lb/hour tons/year		7. Synthetically Limited? [ ]
8. Emission Factor: Reference:		9. Emissions Method Code:
10. Calculation of Emissions (limit to 600 characters):		
11. Pollutant Potential Emissions Comment (limit to 200 characters):		

Allowable Emissions Allowable Emissions _____ of _____

1. Basis for Allowable Emissions Code:	2. Future Effective Date of Allowable Emissions:
3. Requested Allowable Emissions and Units:	4. Equivalent Allowable Emissions: lb/hour tons/year
5. Method of Compliance (limit to 60 characters):	
6. Allowable Emissions Comment (Desc. of Operating Method) (limit to 200 characters):	

E. VISIBLE EMISSIONS INFORMATION
(Only Emissions Units Subject to a VE Limitation)

Visible Emissions Limitation: Visible Emissions Limitation _____ of _____

1. Visible Emissions Subtype:	2. Basis for Allowable Opacity: [X] Rule [ ] Other
3. Requested Allowable Opacity: Normal Conditions: 20 % Exceptional Conditions: % Maximum Period of Excess Opacity Allowed: min/hour	
4. Method of Compliance:	
5. Visible Emissions Comment (limit to 200 characters):	

F. CONTINUOUS MONITOR INFORMATION
(Only Emissions Units Subject to Continuous Monitoring)

Continuous Monitoring System: Continuous Monitor _____ of _____

1. Parameter Code:	2. Pollutant(s):
3. CMS Requirement:	[ ] Rule [ ] Other
4. Monitor Information: Manufacturer: Model Number: Serial Number:	
5. Installation Date:	6. Performance Specification Test Date:
7. Continuous Monitor Comment (limit to 200 characters):	

G. EMISSIONS UNIT SUPPLEMENTAL INFORMATION

Supplemental Requirements

1. Process Flow Diagram [X] Attached, Document ID:_Dwg B [ ] Not Applicable [ ] Waiver Requested
2. Fuel Analysis or Specification [ ] Attached, Document ID:_____ [ ] Not Applicable [ ] Waiver Requested
3. Detailed Description of Control Equipment [ ] Attached, Document ID:_____ [ ] Not Applicable [ ] Waiver Requested
4. Description of Stack Sampling Facilities [ ] Attached, Document ID:_____ [ ] Not Applicable [ ] Waiver Requested
5. Compliance Test Report [ ] Attached, Document ID:_____ [ ] Previously submitted, Date:_____ [ ] Not Applicable
6. Procedures for Startup and Shutdown [ ] Attached, Document ID:_____ [ ] Not Applicable [ ] Waiver Requested
7. Operation and Maintenance Plan [ ] Attached, Document ID:_____ [ ] Not Applicable [ ] Waiver Requested
8. Supplemental Information for Construction Permit Application [ ] Attached, Document ID:_____ [ ] Not Applicable
9. Other Information Required by Rule or Statute [ ] Attached, Document ID:_____ [ ] Not Applicable
10. Supplemental Requirements Comment:

GAC CONTRACTORS, Inc.
ASPHALT PLANT
PANAMA CITY, FL

LOCATION OF LIME SILO

5/25/2010 Dwg: A

GAC CONTRACTORS, Inc.
ASPHALT PLANT
PANAMA CITY, FL

PROCESS FLOW DIAGRAM

5/25/2010

Dwg: B