CONCRETE BATCHING PLANTS AIR GENERAL PERMIT EXAMPLE REGISTRATION WORKSHEET

racility identification Number - If known (seven digit number)
0112115 - 006
Registration Type
Check one:
INITIAL REGISTRATION - Notification of intent to:
Construct and operate a proposed new facility.
Operate an existing permitted facility not currently using an air general permit (e.g., a facility proposing to go
from an air operation permit to an air general permit). If the facility currently holds one or more air operation permits, such permit(s) must be surrendered by the owner or operator upon the effective date of this air general
permits, such permit(s) must be surrendered by the owner of operator upon the effective date of this air general permit. (See "Surrender of Existing Air Operation Permit(s)" below.)
Operates an existing facility not currently permitted or using an air general permit.
RE-REGISTRATION (for facilities currently using an air general permit) - Notification of intent to:
 Continue operating the facility after expiration of the current term of air general permit use. Continue operating the facility after a change of ownership.
Make an equipment change requiring re-registration pursuant to Rule 62-210.310(2)(e), F.A.C.
Any other change not considered an administrative correction under Rule 62-210.310(2)(d), F.A.C.
Surrender of Existing Air Operation Permit(s) - For Initial Registrations Only, if Applicable
All existing air operation permits for this facility are hereby surrendered upon the effective date of this air general permit; specifically permit number(s): N/A
General Facility Information
Facility Owner/Company Name (Name of corporation, agency, or individual owner who or which owns, leases,
operates, controls, or supervises the facility.)
Coastal an Oldcastle Company
Site Name (Name, if any, of the facility site; e.g., Plant A, Metropolis Plant, etc. If more than one facility is owned, a complete registration must be submitted for each.) Pompano Beach Facility
Facility Location (Physical location of the facility, not necessarily the mailing address.)
Street Address: 1590 North Andrews Ave.
City: Pompano Beach County: Broward Zip Code: 33069
Facility Start-Up Date (Estimated start-up date of proposed new facility.)(N/A for existing facility.)
NA CONTRACTOR OF THE PROPERTY

Facility Contact		
Name and Position Title (Plant manager or person to be contained Print Name and Title: Pat Sunderland, Plant Manager	acted regarding day-to-da	y operations at the facility.)
Facility Contact Telephone Numbers Telephone: 954 972-7400 Cell phone: E-mail:	Fax:	
Facility Contact Mailing Address Organization/Firm: Coastal an Oldcastle Company Mailing Address: 1590 North Andrews Ave. City: Pompano Beach	County: Broward	Zip Code: 33069
Correspondence Contact/Representative (to serve as addi	tional Department cont	act)
Name and Position Title Print Name and Title: John Widell, EHS Manager		
Correspondence Contact/Representative Telephone Numbers Telephone: 813 367-9780 Cell phone: 813 373-0995 E-mail: john.widell@oldcastle.com	Fax:	
Correspondence Contact/Representative Mailing Address Organization/Firm: Coastal an Oldcastle Company Mailing Address: 4630 Woodland Corporate Blvd., Suite 200 City: Tampa	County: Hillsborough	Zip Code: <u>33614</u>
Government Facility Code (check only one)		
Facility not owned or operated by a federal, state		
Facility owned or operated by the federal govern Facility owned or operated by the state.	ment.	
Facility owned or operated by the county.		
Facility owned or operated by the municipality.		
Facility owned or operated by a water manageme	ent district.	

FINANCE & ACCUMENT

Stationary Fac	cility	Relocatable Facility		
		o Prevent Unconfined En		vards:
Pave Roads Maintain Roads/Parking/Yards Remove Particulate Matter		■ Pave Parking Areas □ Use Water Application □ Reduce Stock Pile Height □ Install Wind Breaks		
Check all precaution	ons to be used for the ma	anagement of drop points t Chute Partial enclosure	to trucks:	
conveying equipment F.A.C.	nt that are limited to a vis	r each silo, weigh hopper (sible emissions of 5 percer	nt opacity pursuant to Rul	e 62-296.414(1),
PROCESS EQUIPMENT TYPE (silo, weigh hopper, batcher, etc.)	PROCESS EQUIPMENT IDENTIFICATION*	CONTROL DEVICE (baghouse, vent filter, etc.)	CONTROL DEVICE MANUFACTURER	CONTROL DEVICE MODEL NUMBER
Plant 1 west cement silo	001	Baghouse	N/A	N/A
lant 1 east silo west compartment	002	Baghouse	N/A	N/A
lant 1 east silo east compartment	003	Baghouse	N/A	N/A
Plant 1 Concrete Mixers CDC	007	Central Dust Collector	N/A	N/A
Plant 2 north cement silo	004	Baghouse	N/A	N/A
Plant 2 south cement silo	005	Baghouse	N/A	N/A
Paver Tumbler	006	Central Dust Collector	N/a	N/A
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(location, numeric de	esignation, capacity or p lity chment to this form, providetail to demonstrate the any future equipment or	es of process equipment (1 roduct) specific to each pivide a description of the coefficient of the coefficie	oncrete batching plant opense of this air general permillity. Describe type of co	erations at the nit and to provide ncrete product(s)
a basis for tracking a manufactured, all air source equipment in Facility is a pave	er block manufactu	esses, and identify any an (eg.: trucks, bulldozers, fro uring plant consisting g building, offices, p	ont-end loaders, etc.) g of cement storage	