

**CONCRETE BATCHING PLANT
AIR GENERAL PERMIT REGISTRATION FORM**

Part II. Notification to Permitting Office

(Detach and submit to appropriate permitting office; keep copy onsite)

Instructions: To give notice to the Department of an eligible facility's intent to use this air general permit, the owner or operator of the facility must detach and complete this part of the Air General Permit Registration Form and submit it to the appropriate Department of Environmental Protection or local air pollution control program office which has permitting authority. Please type or print clearly all information, and enclose the appropriate air general permit registration processing fee pursuant to Rule 62-4.050(4)(o), F.A.C. (\$100 as of the effective date of this form)

Bureau of Air Monitoring
& Mobile Sources

FEB 06 2008

RECEIVED

0270004-005

Registration Type

Check one:

INITIAL REGISTRATION - Notification of intent to:

- Construct and operate a proposed new facility.
 Operate an existing 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).

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., or 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 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 permit. In such case, check the first box, and indicate the operation permits being surrendered. If no air operation permits are held by the facility, check the second box.

- All existing air operation permits for this facility are hereby surrendered upon the effective date of this air general permit; specifically permit number(s):
0270004-004-AG
 No air operation permits currently exist for this facility.

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.)

Cemex Construction Materials, L.P.

Site Name (Name, if any, of the facility site; e.g., Plant A, Metropolis Plant, etc. If more than one facility is owned, a registration form must be completed for each.)

Arcadia RM Facility

Facility Location (Provide the physical location of the facility, not necessarily the mailing address.)

Street Address: 2307 S.R 70 E.

City: Arcadia

County: DeSoto

Zip Code: 34266

Facility Start-Up Date (Estimated start-up date of proposed new facility.) (N/A for existing facility)

N/A

Owner/Authorized Representative

Name and Position Title (Person who, by signing this form below, certifies that the facility is eligible to use this air general permit.)

Print Name and Title: Jason Jones, Regional Environmental Manager

Owner/Authorized Representative Mailing Address

Organization/Firm: Cemex Construction Materials, L.P.

Street Address: Post Office Box 31965

City: Tampa

County: Hillsborough

Zip Code: 33631

Owner/Authorized Representative Telephone Numbers

Telephone: (813) 269-1240

Fax: (813) 269-1030

Cell phone (optional):

Facility Contact (If different from Owner/Authorized Representative)

Name and Position Title (Plant manager or person to be contacted regarding day-to-day operations at the facility.)

Print Name and Title: Same

Facility Contact Mailing Address

Organization/Firm:

Street Address:

City:

County:

Zip Code:

Facility Contact Telephone Numbers

Telephone:

Fax:

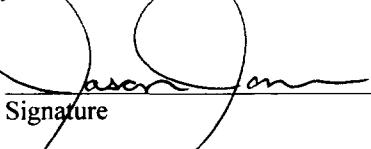
Cell phone (optional):

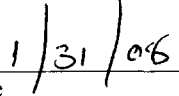
Owner/Authorized Representative Statement

This statement must be signed and dated by the person named above as owner or authorized representative

I, the undersigned, am the owner or authorized representative of the owner or operator of the facility addressed in this Air General Permit Registration Form. I hereby certify, based on information and belief formed after reasonable inquiry, that the facility addressed in this registration form is eligible for use of this air general permit and that the statements made in this registration form are true, accurate and complete. Further, I agree to operate and maintain the facility described in this registration form 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 will promptly notify the Department of any changes to the information contained in this registration form.


Signature


Date

Type of Facility

Check one:

Stationary Facility

Relocatable Facility

Type(s) of Reasonable Precautions Used to Prevent Unconfined Emissions

Check all precautions to be used for the management of roads, parking areas, stock piles and yards:

Pave Roads

Pave Parking Areas

Pave Yards

Maintain Roads/Parking/Yards

Use Water Application

Use Dust Suppressant

Remove Particulate Matter

Reduce Stock Pile Height

Install Wind Breaks

Check all precautions to be used for the management of drop points to trucks:

Spray Bar

Chute

Enclosure

Partial enclosure

Description of Reasonable Precautions

Below, or as an attachment to this form, provide details of all types of reasonable precautions to be used to prevent unconfined emissions at the facility.

Cemex Construction Materials, L.P. takes reasonable precautions to control unconfined emissions from hoppers, storage and conveying equipment, conveyor drop points, truck loading and unloading, roads, parking areas, stock piles and yards as required by Rule 62-296.320(4)(c), F.A.C. The following are the precautions taken at this facility.

Regular sweeping and/or the application of water to the yard is used to control airborne emissions.

Regular removal of particulate matter from roads, paved areas and work areas serves to reduce airborne particulate matter.

The height of stock piles are reduced and the material is continuously sprayed to mitigate wind entrainment of particulate matter from the aggregates.

Description of Facility

Below, or as an attachment to this form, provide a description of the concrete batching plant operations at the facility in sufficient detail to demonstrate the facility's eligibility for use of this air general permit and to provide a basis for tracking any future equipment or process changes at the facility. Describe all air pollutant-emitting processes and equipment at the facility, and identify any air pollution control measures or equipment used.

This facility consists of a ready-mix concrete plant. The plant uses cement, flyash, slag and aggregate materials to produce ready-mix concrete. Dust emissions are controlled by the following methods.

Emissions generated during mixer truck loading are controlled by a C&W CP900 dust collector.

Emissions generated during the filling of the cement, flyash and slag are controlled by individual C&W CP-305 baghouses.

Point ID No: 03	Truck Load Out-C&W CP-900 Dust Collector
Point ID No: 04	Flyash/Slag Silo-C&W CP-305 Baghouse
Point ID No: 05	Cement Silo-C&W CP-305 Baghouse



January 31, 2008

FLORIDA DEPARTMENT
OF ENVIRONMENTAL PROTECTION

Receipts

Post Office Box 3070

Tallahassee, FL 32315-3070

Re: Cemex Construction Materials, L.P.
Air General Registration
Arcadia RM facility
0270004-004-AG

Dear Sir/Madam,

Enclosed please find the completed Air General Permit Registration Form and appropriate processing fee for the above mentioned facility. This permit is being renewed due to pending upgrades to the facilities emissions control units.

If you have any questions please do not hesitate to contact me.

Sincerely,

A handwritten signature in black ink, appearing to read 'Jason Jones', written over a large, stylized flourish.

Jason Jones
Regional Environmental Manager
West Central Florida



EM095985210US

Addressee Copy

Label 11-F, April 2004



UNITED STATES POSTAL SERVICE®

Post Office To Addressee

ORIGIN (POSTAL SERVICE USE ONLY)

RQ ZIP Code 33103	Day of Delivery <input type="checkbox"/> Next <input type="checkbox"/> 2nd <input type="checkbox"/> 2nd Del. Day	Postage \$ 11.00
Date Accepted 02/10/04	Scheduled Date of Delivery	Return Receipt Fee \$ 2.15
Mo. Day Year 20 30 04	Scheduled Time of Delivery <input type="checkbox"/> Noon <input type="checkbox"/> 3 PM	COD Fee \$ Insurance Fee \$
Time Accepted 2030 <input type="checkbox"/> AM <input type="checkbox"/> PM	Military <input type="checkbox"/> 2nd Day <input type="checkbox"/> 3rd Day	Total Postage & Fees \$ 13.15
Flat Rate <input type="checkbox"/> or Weight lbs. 075.	Int'l Alpha Country Code	Acceptance Emp. Initials

DELIVERY (POSTAL USE ONLY)

Delivery Attempt	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature
Mo. Day 2 20		
Delivery Attempt	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature
Mo. Day 2 24		
Delivery Date	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature
Mo. Day 2 24		
<input type="checkbox"/> WAIVER OF SIGNATURE (Domestic Mail Only) Additional merchandise insurance is void if waiver of signature is requested. I wish delivery to be made without obtaining signature of addressee or addressee's agent (if delivery employee judges that article can be left in secure location) and I authorize that delivery employee's signature constitutes valid proof of delivery.		
NO DELIVERY <input type="checkbox"/> Weekend <input type="checkbox"/> Holiday		
Customer Signature		

CUSTOMER USE ONLY

FROM: (PLEASE PRINT) PHONE 213, 269 1029 CEMEX 3820 NORTHOALE BLVD STE 100B TAMPA FL 33624-1860	TO: (PLEASE PRINT) PHONE ()
--	--

FOR PICKUP OR TRACKING: Visit www.usps.com or Call 1-800-222-1811



inside and pay only

com of envelope

to remove the

RETURN RECEIPT REQUESTED

ee no matter how many in Express Mail box.



EM095985206US

Addressee Copy
Label 11-F, April 2004



UNITED STATES POSTAL SERVICE®

Post Office To Addressee

ORIGIN (POSTAL SERVICE USE ONLY)			DELIVERY (POSTAL SERVICE USE ONLY)		
PO ZIP Code	Day of Delivery <input type="checkbox"/> Next <input type="checkbox"/> 2nd <input type="checkbox"/> 2nd Del. Day	Postage \$	Delivery Attempt	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature
Date Accepted	Scheduled Date of Delivery	Return Receipt Fee \$	Mo. Day		
Mo. Day Year	Month Day	GOD Fee Insurance Fee \$ \$	Delivery Attempt	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature
Time Accepted <input type="checkbox"/> AM <input type="checkbox"/> PM	Scheduled Time of Delivery <input type="checkbox"/> Noon <input type="checkbox"/> 3 PM	Total Postage & Fees \$	Mo. Day	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature
Flat Rate <input type="checkbox"/> or Weight lbs. ozs.	Military <input type="checkbox"/> 2nd Day <input type="checkbox"/> 3rd Day	Acceptance Emp. Initials	<input type="checkbox"/> WAIVER OF SIGNATURE (Domestic Mail Only) Additional merchandise insurance is void if waiver of signature is requested. I wish delivery to be made without obtaining signature of addressee or addressee's agent (if delivery employee judges that article can be left in secure location) and I authorize that delivery employee's signature constitutes valid proof of delivery.		
CUSTOMER USE ONLY			<input type="checkbox"/> NO DELIVERY <input type="checkbox"/> Weekend <input type="checkbox"/> Holiday Customer Signature _____		

corner of envelope.

1.

re to remove the
s.

FROM: (PLEASE PRINT) PHONE () 	TO: (PLEASE PRINT) PHONE ()
--	--

fee no m
an Expre
w many
box.

its inside & / only

FOR PICKUP OR TRACKING: Visit www.usps.com or Call 1-800-222-1811