

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: Michael Mahoney, Environmental Manager

Owner/Authorized Representative Mailing Address

Organization/Firm: Prestige AB Management Co., LLC

Street Address: 7228C West PortPlace

City: West Palm Beach

County: Palm Beach

Zip Code: 33413

Owner/Authorized Representative Telephone Numbers

Telephone: (561) 478-9980

Fax: (561) 478-6512

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: Joe Hooks, Project Manager

Facility Contact Mailing Address

Organization/Firm: Prestige AB Management Co. LLC

Street Address: 4190 Selvitz Rd.

City: Fort Pierce

County: St. Lucie

Zip Code: 34981

Facility Contact Telephone Numbers

Telephone: (772) 465-0701

Fax: (772) 468-0701

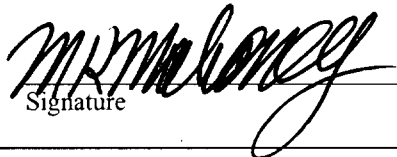
Cell phone (optional): (561) 262-3745

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. The yard and parking area are swept periodically and watered as needed to eliminate ground dust. All mixer trucks are washed to avoid dust from leaving the site.

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.

The facility will consist of an office, aggregate storage areas, 2 cement storage silos along with associated conveying equipment and concrete mixing trucks.

Emissions from the silo loading operation and the mixer truck loading will be controlled by a Torit, Model DF04-16 above ground mounted Central Dust Collector. The Unit has 16 cartridges with a cloth to air ratio of 5:1.

Note:

This registration is for an ownership change. Construction of this facility has not started at this time.

APPLICATION FOR TRANSFER OF AIR PERMIT

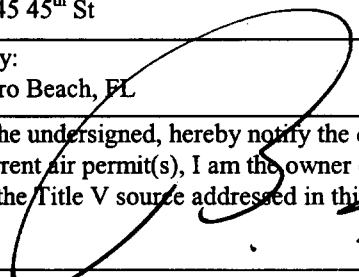

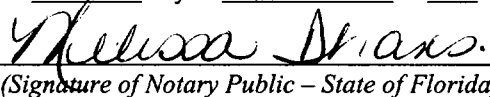
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| | |
|------------------------------------------------------------------------------------|--|
| <input type="checkbox"/> Title V Permit No.*: _____ | |
| <input checked="" type="checkbox"/> Non-Title V Permit No(s): 0610091-001-AG _____ | |

DEC 26 2007

Division of Air Monitoring & Mobile Sources

Notification of Sale or Legal Transfer

| | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------|
| Facility Owner/Company Name (As Currently Permitted): Prestige AB Ready Mix of Vero Beach | Facility ID No.: 0610091-001-AG |
| Site Name: Vero Beach Batch Plant | County: Indian River |
| Street Address or Other Locator: 5045 45 th St | |
| City: Vero Beach, FL | Zip Code: 32967 |
| I, the undersigned, hereby notify the department of the sale or legal transfer of the facility listed above. Under its current air permit(s), I am the owner or authorized representative of the non-Title V source or the responsible official of the Title V source addressed in this application, whichever is applicable. | |
|  _____ (Signature) | |
| Name: Brian Mahoney _____ | |
| Title: Managing Member _____ | Date: 12/10/07 _____ |
| STATE OF FLORIDA COUNTY OF <u>Palm Beach</u> | |
| Sworn to (or affirmed) and subscribed before me this <u>10th</u> day of <u>Dec</u> 20 <u>07</u> . | |
|  Melissa Dhans Commission #DD267851 Expires: Jan 01, 2008 Notary Public Thru Atlantic Bonding Co., Inc. |  _____ (Signature of Notary Public - State of Florida) |
| | Melissa Dhans _____ (Name of Notary Typed, Printed, or Stamped) |
| Personally Known <input checked="" type="checkbox"/> OR Produced Identification _____ | |
| Type of Identification Produced _____ | |


* Title V Sources Only: Attach a written agreement containing a specific date for transfer of permit responsibility, coverage, and liability between the current and new permittee. If there is a change in designated representative at an Acid Rain source, submit a copy of the Certificate of Representation submitted to EPA pursuant to 40 CFR 72, subpart B. A Statement of Compliance (DEP Form 62-213.900(7)) covering the portion of the calendar year up to the date of transfer of responsibility shall be submitted to the Department after the date of transfer, as required by Rule 62-213.440(3)(a)2.b., F.A.C.

Notification of New Ownership

New Facility Owner/Company Name:
Prestige AB Management Co., LLC

| | |
|------------------------------------------|----------------------|
| New Site Name: Vero Beach Batch Plant | County: St. Lucie |
|------------------------------------------|----------------------|

I, the undersigned, am or will be the new owner or authorized representative* of the non-Title V source or the new responsible official of the Title V source addressed in this application, whichever is applicable. I further state that I have examined the application and documents submitted by the current permittee, the basis on which the above listed permit(s) was/were issued by the Department, and state that they accurately and completely describe the permitted facility. I further state that I am familiar with the permit(s), agree to comply with its/their terms and conditions, and agree to assume the rights and liabilities contained therein. I hereby certify, based on information and belief formed after reasonable inquiry, that the statements made in this application are true, accurate and complete. I also agree to promptly notify the Department of any future change in ownership of, or responsibility for, the permitted facility.


(Signature)

Name: Michael Mahoney, Authorized Representative

Title: Environmental Director

Date: 12/10/07

Mailing Address: 7228C Westport Place

City: West Palm Beach, FL Zip Code: 33413

Telephone No: 561-478-9980 Fax No.: 561-478-6512

Effective Date of Sale or Legal Transfer: October 2, 2007
(If not yet known, leave blank. Once known, date must be provided to the Department to process a change of ownership administrative permit correction in accordance with Rule 62-210.360, F.A.C.)

STATE OF FLORIDA
COUNTY OF Palm Beach

Sworn to (or affirmed) and subscribed before me this 10th day of Dec. 2007.



Melissa Dhans
Commission #DD267851
Expires: Jan 01, 2008
Bonded Thru
Atlantic Bonding Co., Inc.

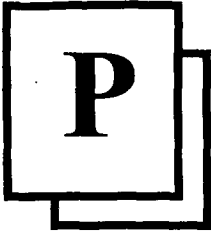

(Signature of Notary Public - State of Florida)

Melissa Dhans
(Name of Notary Typed, Printed, or Stamped)

Personally Known OR Produced Identification

Type of Identification Produced

* Attach letter of authorization if other than owner or corporate officer.



**RESTIGE AB MANAGEMENT
CO., LLC**

7228C WESTPORT PLACE
WEST PALM BEACH, FL 33413
(561) 478-9980 FAX (561) 478-6512

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DEC 26 2007

Bureau of Air Monitoring
& Mobile Sources

12/13/07

Sent UPS Overnight

**Florida Dept of Environmental Protection
Bureau of Air Monitoring and Mobile Sources
2600 Blair Stone Road
Mail Station 5510
Tallahassee, FL 32399-2400**

Re: Air Permit Registrations

Enclosed are the completed Air Permit Transfer documents along with new Air Permit Registrations that reflect the ownership change of the Prestige AB Ready Mix operations.

Also enclosed is our check # 61341 in the amount of \$1,100 to cover the \$100 registration fee for each of our 11 applications.

Should you require any additional information, please contact me at the address above.

Thanks

**Mike Mahoney,
Environmental Manager
Prestige AB Management, Co., LLC**

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REVENUE