



# Florida Department of Environmental Protection

Bob Martinez Center  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

Charlie Crist  
Governor

Jeff Kottkamp  
Lt. Governor

Michael W. Sole  
Secretary

February 29, 2008

Mr. Dain Williams  
Central State Aggregates, LLC  
Post Office Box 100  
Crystal Springs, Florida 33524

Dear Mr. Williams:


This is to acknowledge that your notification of intent to use the authority of Rule 62-210.310 to operate your facility was received on January 28, 2008. We have assigned ARMS Number 1010076-005 to this facility.

As you know, pursuant to Florida Statutes section 403.814, authority to operate under general permits commences thirty days after receipt of the registration form unless you have been notified by this office that your facility has not shown entitlement to operate pursuant to the rule provisions.

For your information, authority to operate pursuant to Rule 62-210.310 expires after 5 years. Therefore, a new registration form must be received no later than 5 years after the date your notice was received as indicated above. If your general permit rule conditions require testing, such testing must be completed within the time frame specified in the rule.

If you have any additional questions, please contact Dickson Dibble at 850/921-9586.

Sincerely,

  
for Sandra F. Veazey, Chief  
Bureau of Air Monitoring  
and Mobile Sources

SFV/pg

cc: Mr. Christopher Bradley, Southwest District

## NONMETALLIC MINERAL PROCESSING PLANTS (CRUSHERS) 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, F.A.C. (\$100 as of the effective date of this form)

#### 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): \_\_\_\_\_  
☐ 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.)

**CENTRAL STATE AGGREGATES LLC**

**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.)

**ZEPHYRHILLS MINE**

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

Street Address: **41150 YONKERS BLVD.**

City: **ZEPHYRHILLS**

County: **PASCO**

Zip Code: **33540**

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

**N/A**

RECEIVED  
Bureau of Air Management  
& Michelle S. [illegible]  
JAN 01 2008  
1010076-005

**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: **WOODY SANDERSON GENERAL MANAGER**

**Owner/Authorized Representative Mailing Address**

Organization/Firm: **CENTRAL STATE AGGREGATES LLC**

Street Address: **P.O. BOX 100**

City: **CRYSTAL SPRINGS** County: **PASCO**

Zip Code: **33524**

**Owner/Authorized Representative Telephone Numbers**

Telephone: **813 788 0454**

Fax: **813 782 1778**

Cell phone (optional): **843 241 3253**

EMAIL: **WSANDERSON@CSAGG.COM**

**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: **DAIN WILLIAMS PLANT MANAGER**

**Facility Contact Mailing Address**

Organization/Firm: **CENTRAL STATE AGGREGATES LLC**

Street Address: **P.O. BOX 100**

City: **CRYSTAL SPRINGS** County: **PASCO**

Zip Code: **33524**

**Facility Contact Telephone Numbers**

Telephone: **813 788-0454**

Fax: **813-782-1778**

Cell phone (optional):

EMAIL: **DWILLIAMS@CSAGG.COM**

**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

1/24/08

**Type of Facility**

Check one:

☒ Stationary Facility☐ Relocatable Facility**Type(s) of Precautions Used to Prevent Unconfined Emissions**

Check all that apply for the management of roads, parking areas, stock piles and yards:

☒ Maintain Roads/Parking/Yards☒ Use Water Application☐ Use Dust Suppressant☒ Remove Particulate Matter☐ Reduce Stock Pile Height☐ Install Wind Breaks

Check the location of spray bars at the nonmetallic mineral processing plant:

☐ Feeders☐ Entrance to "Crusher"☐ Exit of "Crusher"☐ Classifier Screens☐ Conveyor Drop Points**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.

*all processing is done at high moisture levels so no dust is generated during processing. We use a water truck to maintain dust control on roads & parking lots*

**Description of Facility**

Below, or as an attachment to this form, provide a description of the nonmetallic mineral processing 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.

SEE ATTACHMENT

# Description of facility

## ATTACHMENT

### Affected Facilities Description

Affected Facility	Manufacturer	Date of Manufacture	Model Number	Identifier & Serial Number	Size (TPH, hp, kW, etc.)	Subject to 40 CFR Part 60, Subpart OOO	
						Yes	No
Primary Crusher(s)	Telsmith	1997	3042ORB	222118028	300 TPH	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Secondary Crusher(s)	Telsmith	1956	4895B	7531	245 TPH	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Tertiary Crusher	TELSMITH	2007	3036	41415	250 TPH	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Grinding Mill(s)					TPH	<input type="checkbox"/>	<input type="checkbox"/>
Bucket Elevator(s)					TPH	<input type="checkbox"/>	<input type="checkbox"/>
Screening Operation(s)	Simplicity	1998	M140B	3626-4720	120 FT <sup>2</sup>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Bagging Operation					TPH	<input type="checkbox"/>	<input type="checkbox"/>
Storage Bin(s)	N/A	1996	N/A	N/A	50 TONS	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Enclosed Truck or Railcar Loading Station					TPH	<input type="checkbox"/>	<input type="checkbox"/>
Crusher Engine					HP	<input type="checkbox"/>	<input type="checkbox"/>
Auxiliary Generator(s)					KW	<input type="checkbox"/>	<input type="checkbox"/>
Belt Conveyor(s)					IN.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
#1	N/A	N/A	N/A	N/A	48	<input checked="" type="checkbox"/>	<input type="checkbox"/>
#2	↓	↓	↓	↓	36	<input checked="" type="checkbox"/>	<input type="checkbox"/>
#3	↓	↓	↓	↓	36	<input checked="" type="checkbox"/>	<input type="checkbox"/>
#4	↓	↓	↓	↓	48	<input checked="" type="checkbox"/>	<input type="checkbox"/>
#5	↓	↓	↓	↓	36	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Comments:							

JOB \_\_\_\_\_ OF \_\_\_\_\_  
 SHEET NO. \_\_\_\_\_  
 CALCULATED BY \_\_\_\_\_ DATE \_\_\_\_\_  
 CHECKED BY \_\_\_\_\_ DATE \_\_\_\_\_  
 SCALE \_\_\_\_\_

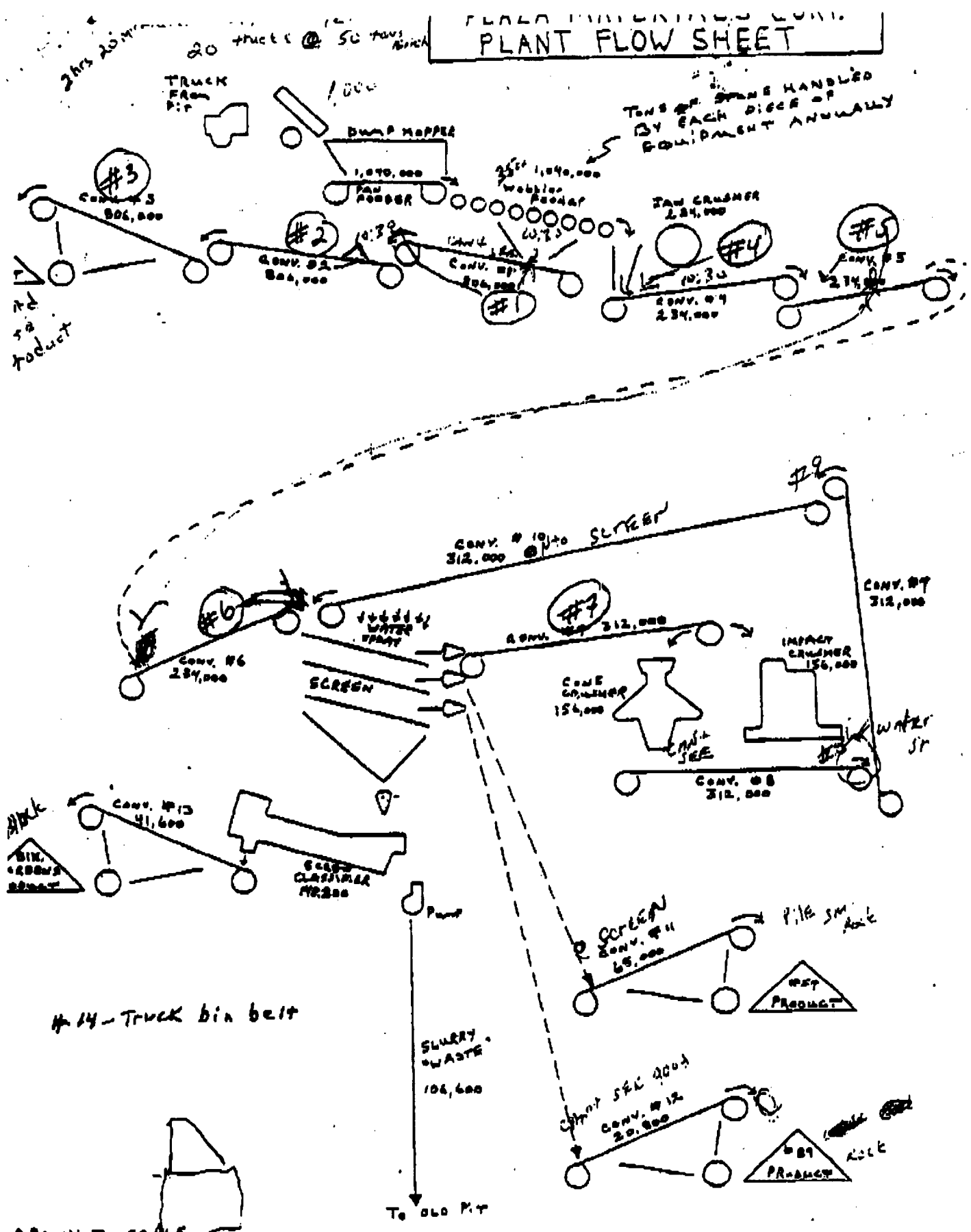
**CREATIVE ENVIRONMENTAL SOLUTIONS, INC.**

611 N. Broad Street  
 BROOKSVILLE, FLORIDA 34601  
 Phone: (352) 796-3374  
 Fax: (352) 796-2449

Belt Conveyors (continued)

	Manufacturer	Date	Model	ID/Serial	Size	Subject to 40 CFR Part 60 Calculation?
#6	N/A	N/A	N/A	N/A	30	yes
#7	↓	↓	↓	↓	24	↓
#8	↓	↓	↓	↓	24	↓
#9	↓	↓	↓	↓	24	↓
#10	↓	↓	↓	↓	24	↓
#11	↓	↓	↓	↓	24	↓
#12	↓	↓	↓	↓	24	↓
#13	↓	↓	↓	↓	24	↓
#14	↓	↓	↓	↓	30	↓

# PLANT FLOW SHEET



DRAWN TO SCALE

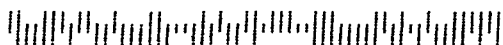


**Florida Department of Environmental Protection**  
**Cash Receiving Application (CRA)**  
**Cashlisting by Deposit #: 281419 thru 281419**  
**Printed: 1/28/2008 4:42:50 PM - Page 13**

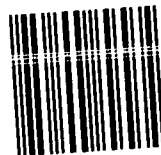
Cashlisting: **66378** Cashlist Area: **3755** Description: **DIV OF AIR RESOURCES MGMT.**  
 Deposit No: **281419** Date Deposited: **01/28/2008** Contact: **ELIZABETH WALKR**

Object	Transmittal	Dep DDN	Receipt Number	Pre-Numbered Receipt	Name	Check Number	Payment Amount	Reference Account	Payment Number	Remittance Number	Fund
002272	46695	480374	613810		CNETRAL STATE AGGREGATES, LLC	1040	\$100.00	2/6/2008-NMC 10/10076-05	859209	763581	PFTF
	46695	480375	613811		GOOD DIRT MAN OF PINE ISLAND,	5045	\$100.00		859210	763582	PFTF
	46695	480376	613812		ANDERSON COLUMBIA CO, INC.	22058	\$100.00		859211	763583	PFTF
	46695	480377	613813		ANDERSON COLUMBIA CO, INC.	22057	\$100.00		859212	763584	PFTF
	46695	480378	613814		ANDERSON COLUMBIA CO, INC.	22056	\$100.00		859213	763585	PFTF
<b>Object Code 002272 Subtotal:</b>							<b>\$500.00</b>				
002275	46695	480371	613807		CITRUS WORLD, INC.	786951	\$3,590.00	1050002	859204	763578	APCTF
	46695	480372	613808		KRAFT FOODS GLOBAL, INC.	04763699	\$4,813.50	0350004	859207	763579	APCTF
	46695	480373	613809		BRUNSWICK BOAT GROUP	231152	\$7,470.00	1270063	859208	763580	APCTF
<b>Object Code 002275 Subtotal:</b>							<b>\$15,873.50</b>				
002278	46694	480347	613783		GEORGIA-PACIFIC	0000749548	\$1,000.00	47362	859222	763554	APCTF
	46694	480348	613784		SIMPSON ENVIRONMENTAL SERVICES	016065	\$200.00	47285	859223	763555	APCTF
	46694	480349	613785		REALCO RECYCLING CO, INC.	14870	\$300.00	47345	859224	763556	APCTF
	46694	480354	613790		GULF POWER CO.	774023	\$500.00	47209	859264	763561	APCTF
	46694	480355	613791		GULF POWER CO.	774024	\$500.00	47214	859265	763562	APCTF
	46694	480356	613792		GULF POWER CO.	774025	\$500.00	47215	859267	763563	APCTF
	46694	480359	613795		CROSS REMEDIATION, INC.	14364	\$300.00	47193	859235	763566	APCTF
<b>Object Code 002278 Subtotal:</b>							<b>\$3,300.00</b>				
<b>Cashlisting 66378 Total:</b>							<b>\$19,673.50</b>				

State Aggr  
x 100  
Springs, Fl. 33524



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32315

U.S. POSTAGE  
PAID  
CRYSTAL SPRINGS, FL  
33524  
JAN 24, 08  
AMOUNT

**\$0.00**  
00077622-02



FDEP  
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TALLAHASSEE, FLORIDA 32315-3070