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MAY 04 2009

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, 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.)

Metromont Corporation

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.)

Bartow Manufacturing Plant

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

Street Address: 4151 Hwy 17 S

City: Bartow

County: Polk

Zip Code: 33830

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

7/09

**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: Nathan Nabors, Corporate Engineer

**Owner/Authorized Representative Mailing Address**

Organization/Firm: Metromont Corporation

Street Address: 2802 White Horse Road

City: Greenville

County: Greenville

Zip Code: 29611

**Owner/Authorized Representative Telephone Numbers**

Telephone: 864-605-5007

Fax: 864-295-5501

Cell phone (optional): 864-444-0148

**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: Randy Romani, General Manager

**Facility Contact Mailing Address**

Organization/Firm: Metromont Corporation

Street Address: 2802 White Horse Rd.

City: Greenville

County: Greenville

Zip Code: 29611

**Facility Contact Telephone Numbers**

Telephone: 863-370-6089

Fax:

Cell phone (optional):

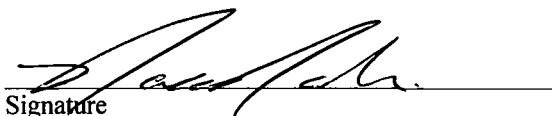
**Owner/Authorized Representative Statement**

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

4/30/09

**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. Bag houses will be provided on silo's and batching equipment. Roadway will be watered to suppress fugitive dust.

### 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.

Metromont Corporation manufacturing facility is a Precast/Prestressed facility involved in the manufacturing of Precast/Prestressed components for a variety of major structures consisting, but not limited to, parking structures, stadiums, office buildings, data centers, multi-family housing, warehouses, institutional buildings, commercial and retail structures.

In this facility, the manufacturing process consists of a concrete cement batch plant and delivery system. With this state of the art cement delivery system the use of mixer trucks is obsolete! A variety of forms will make up the Precast/Prestressed components. The plant will also include a steel fabrication facility, which consists of a multitude of cutting, bending, and welding machines; a complete carpentry shop consisting of planers, routers, cut-off saws, nailers, sanders, vacuum system and a variety of hand tools. All of these items will assist in the manufacturing forming and pouring of concrete components. The next part of the Precast/Prestressed process is the moving and handing of the large components. To move such components of this size and weight it takes large cranes. Inside the building, each bay will have two large over head cranes which have a 25 ton capacity that will assist in the stripping and pouring process. Once the pieces are moved to a staging area, then the final placement of the units will be done by a large 60 ton travel lift.

\* SEE ATTACHMENTS AS AN ADDENDUM  
TO THE REGISTRATION FORM. #'S 1-6



# ATTACHMENT #2



**WAM®** SpA.

EQUIPMENT FOR HANDLING POWDER  
AND GRANULAR MATERIALS

Via Cavour, 338

I- 41030 Ponte Motta - Cavezzo (MO)

Tel 0535/618111 - Fax 0535/618226 -

E-Mail: info@wam.it

## EMISSIONS

### **REVERSE JET FILTER**

#### **TYPE: SILOTOP®R01**

WAM® S.p.A. certify that the filter SILOTOP®R01 has been designed for use with cement powder.

The level of dust emissions will not exceed 10 milligrams per cubic metre provided that the filter elements are installed, operated & maintained in accordance with the operating and maintenance instructions (Catalogue N° 03505.02.M), that filtering elements and other components (when replaced) are of WAM® manufacture.

#### **Tests have been carried out on the basis of the following parameters:**

Test number: 3236  
Dust type: Cement  
Test Points: Dirty air inlet and clean air outlet  
Dust filter type: SILOTOP®R01  
Filtering Surface: 24.5 m<sup>2</sup>  
Filtering Media: Polyester Spunbonded 280gr/m<sup>2</sup>

OPERATION TIME (minutes)	DUST CONCENTRATION (mg/Nm <sup>3</sup> )		AIR VOLUME (Nm <sup>3</sup> /h)	TEMP. (°C)
	DIRTY AIR INLET	CLEAN AIR OUTLET		
40	15750	2.65	1190	20

99,99970

**Pivetti Fabio**  
**Filter Product Manager**  
**WAM S.p.a.**

# ATTACHMENT #3

DEPARTMENT of ENVIRONMENTAL PROTECTION  
BUREAU of NEW SOURCE REVIEW  
CONTROL DATA SHEET  
DUST COLLECTOR

MANUFACTURER AND MODEL WAM SILOTOP RD1

SPECIFY BAGHOUSE  
☒ CARTRIDGE  
OTHER (explain) \_\_\_\_\_

NUMBER OF BAGS OR CARTRIDGES 7  
SIZE OF BAGS OR CARTRIDGES ON PAGE 0501

TOTAL BAG OR CARTRIDGE AREA (ft<sup>2</sup>) 264  
MAXIMUM CAPACITY (ACFM) 1500

BAG OR CARTRIDGE FABRIC SPUN BOUND POLYESTER  
FABRIC WEIGHT (oz) 8  
WEAVE 10 MICRON  
FINISH COATED  
MAXIMUM FABRIC TEMPERATURE (°F) 175°F

EFFICIENCY (%) 99.9998  
AIR TO CLOTH RATIO 6:1

METHOD OF CLEANING REVERSE AIR ☒ PULSE JET SHAKER

OPERATING PRESSURE DROP (INCHES OF WATER) MIN. 4 MAX 8

FAN REQUIREMENTS HP \_\_\_\_\_ SCFM \_\_\_\_\_ VENTING ☒

# ATTACHMENT #4



## WAM

S.p.A.

EQUIPMENT FOR HANDLING  
AND GRANULAR

Via Cavour, 338

I-41030 Ponte Motta - Cavezzo (MO) Italy

Tel. 0535/618111 - Fax 0535/618226 - Telex 51012

E-Mail: info@wam.it

### BIA CERTIFICATE

The Company WAM  
S.p.A., Via Cavour 338,  
I-41030 Ponte Motta di  
Cavezzo (MO) ITALY,

#### DECLARES

that the material described  
as **PP** has been certified by  
BIA on 16/06/2004 fol-  
lowing test No.  
200422009/6210.

The material concerned  
has been certified for  
classes **M** according to  
standards for use in ma-  
chines and devices for the  
separation of dusts damag-  
ing to health with values  
MAK > 0,1 mg/m<sup>3</sup>, in con-  
formity with the applica-  
tion of DIN EN 60335-2-  
69.

Die Firma WAM S.p.A.  
mit Sitz in Via Cavour  
338, I-41030 Ponte Motta  
di Cavezzo (MO) ITA-  
LIEN,

#### ERKLÄRT

daß das mit dem Kürzel  
**PP** bezeichnete Mate-rial  
am 16/06/2004 durch BIA  
mit Test Nr.  
200422009/6210 zertifi-  
ziert wurde.

Das betreffende Mate-rial  
erhielt das Zertifikat für  
die Klassen **M** gemäß den  
Nor-men für Anwendun-  
gen in Maschinen und Ge-  
rä-ten zur Abscheidung  
von gesundheitsschädli-  
chen Stäuben mit Wer-ten  
von MAK > 0,1 mg/m<sup>3</sup>  
und in Konfor-mität mit  
Anwendungen laut DIN  
EN 60335-2-69.

La société WAM S.p.A.,  
siège à Via Cavour 338,  
I-41030 Ponte Motta di  
Cavezzo (MO) ITALIE,

#### DECLARE

que che le tissu dénommé  
**PP** a été certifié par BIA le  
16/06/2004 avec épreuve  
No. 200422009/6210.

Le tissu en question a été  
certifié de classe **M** selon  
les normes d'utilisation  
pour l'emploi dans des  
machines et appareils pour  
la séparation de poussières  
nuisibles à la santé avec  
des valeurs MAK > 0,1  
mg/m<sup>3</sup>, conformes au do-  
maine d'application de  
DIN EN 60335-2-69.

La ditta WAM S.p.A.  
con sede in Via Cavour  
338, Ponte Motta (41030)  
di Cavezzo (MO) ITA-  
LIA,

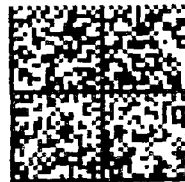
#### DICHIARA

che il tessuto denominato  
**PP** è stato certificato BIA  
in data 16/06/2004 con  
prova No.  
200422009/6210.

Il tessuto in questione è  
stato certificato di classe  
**M** secondo le norme di  
utilizzo per l'impiego in  
macchinari ed apparec-  
chiature per la separazione  
di polveri nocive alla salu-  
te con valori MAK > 0,1  
mg/m<sup>3</sup>, conformi  
all'ambito di applicazione  
di DIN EN 60335-2-69.

**Fabio Pivetti**  
Filters Product Manager  
WAM S.p.a.  
Via Cavour, 338  
41030 Ponte motta di Cavezzo (MO)  
ITALY

METROMONT CORP.  
Post Office Box 2486  
Greenville, SC 29602-2486



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04/30/2009

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FDER RECEIPTS  
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TALLAHASSEE, FL  
32315-3070