

**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.)

Mulliniks Recycling, Inc.

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.)

CP11 Crushing Unit

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

Street Address: 5937 Soutel Drive

City: Jacksonville

County: Duval

Zip Code: 32219

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

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:

Billy Mulliniks, Jr. Owner

Owner/Authorized Representative Mailing Address

Organization/Firm: Mulliniks Recycling, Inc

Street Address: 5937 Soutel Drive

City: Jacksonville County: Duval

Zip Code: 32219

Owner/Authorized Representative Telephone Numbers

Telephone: (904) 764-3644

Fax: (904) 764-3976

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:

Dawn M. Smith Bookkeeper

Facility Contact Mailing Address

Organization/Firm: Mulliniks Recycling, Inc

Street Address: 5937 Soutel Drive

City: Jacksonville County: Duval

Zip Code: 32219

Facility Contact Telephone Numbers

Telephone: (904) 764-3644

Fax: (904) 764-3976

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

June 12, 2009

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.

Water is provided to us at all facilities in which we crush. Asphalt is our main product that we crush and the dust is minimal. Water is used as needed.

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.

2001 Eagle Um25 Impact Crusher
2001 Simplicity 5'x16' Screen
2001 Detroit 375HP Crusher Engine
2001 Lima 100kw Generator
2002 Superior 30"x95' Stacker
2001 Eagle 42"x43' Conveyor
2001 Eagle 42"x17' Conveyor
2001 Eagle 18"x8' Conveyor
2001 Eagle 24"x12' Conveyor
2001 Eagle 24"x32' Conveyor

SOURCE TEST REPORT

VISIBLE EMISSIONS TESTING

FROM

MULLINIKS RECYCLING, INC.

PLANT 11 PORTABLE CRUSHER

FDEP PERMIT NUMBER

777-5241-001-AG

June 5, 2009

PREPARED FOR

MULLINIKS RECYCLING, INC.

5937 SOUTEL DRIVE

JACKSONVILLE, FLORIDA 32219

PREPARED BY

PETE PARKER

(904) 208-1664

PETE PARKER

EPA VISIBLE EMISSION OBSERVATION FORM 1

Method Used (Circle One)
 Method 9 203A 203B Other: _____

Company Name **MULLINIKS RECYCLING, INC**
 Facility Name **SEABOARD I-95**
 Street Address **I-95 EXIST 42**
 City **BRUNSWICK** State **GA** Zip **31525**

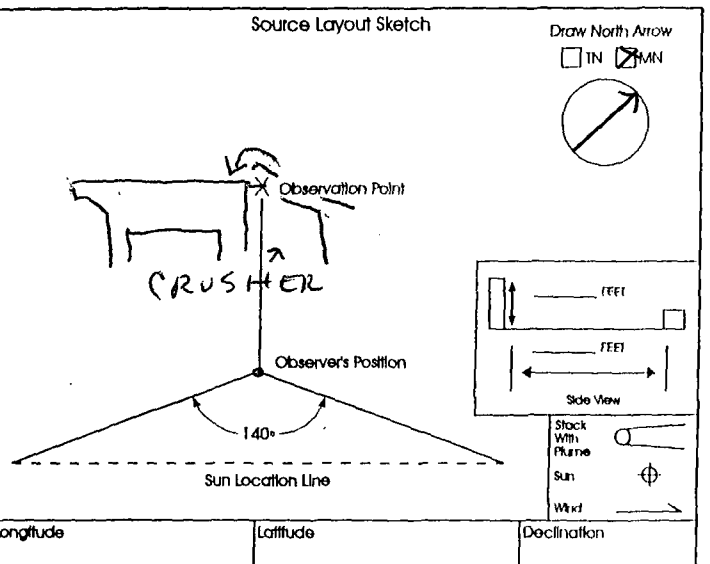
Process **CONCRETE CRUSHER** Unit # **011** Operating Mode **250 Ton Hour**
 Control Equipment **WATER** Operating Mode **AS NEEDED**

Describe Emission Point **CRUSHER**
 Height of Emiss. Pt. Start **10'** End **SAME** Height of Emiss. Pt. Rel. to Observer Start **10'** End **SAME**
 Distance to Emiss. Pt. Start **150'** End **SAME** Direction to Emiss. Pt. (Degrees) Start **318°** End **SAME**

Vertical Angle to Obs. Pt. Start **3°** End **SAME** Direction to Obs. Pt. (Degrees) Start **318°** End **SAME**
 Distance and Direction to Observation Point from Emission Point Start **150'** End **SAME**

























































































































Describe Emissions
 Start **NONE** End **NONE**
 Emission Color Start **NONE** End **SAME** Water Droplet Plume Attached ☐ Detached ☐ None ☒

Describe Plume Background
 Start **PINE TREES** End **SAME**
 Background Color Start **GREEN** End **SAME** Sky Conditions Start **SCATTERED** End **SAME**
 Wind Speed Start **1-3MPH** End **SAME** Wind Direction Start **VARIABLE** End **SAME**
 Ambient Temp. Start **83°** End **SAME** Wet Bulb Temp. **74** RH Percent **70%**



Additional Information
PERMIT# 777-5241-001-AG

Form Number **MRO111** Page **1** of **3**
 Continued on VEO Form Number _____

| Observation Date | | Time Zone | | Start Time | End Time |
|------------------|---|---|---|---|----------|
| 5 JUNE 09 | | EDST | | 1106 | 1136 |
| Soc Min | 0 | 15 | 30 | 45 | Comments |
| 1 |  |  |  |  | |
| 2 |  |  |  |  | |
| 3 |  |  |  |  | |
| 4 |  |  |  |  | |
| 5 |  |  |  |  | |
| 6 |  |  |  |  | |
| 7 |  |  |  |  | |
| 8 |  |  |  |  | |
| 9 |  |  |  |  | |
| 10 |  |  |  |  | |
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| 20 |  |  |  |  | |
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| 22 |  |  |  |  | |
| 23 |  |  |  |  | |
| 24 |  |  |  |  | |
| 25 |  |  |  |  | |
| 26 |  |  |  |  | |
| 27 |  |  |  |  | |
| 28 |  |  |  |  | |
| 29 |  |  |  |  | |
| 30 |  |  |  |  | |

Observer's Name (Print) **PETE PARKER**
 Observer's Signature **Pete Parker** Date _____
 Organization **MULLINIKS RECYCLING, INC**
 Certified By **ETA** Date **5/26/09**

EPA VISIBLE EMISSION OBSERVATION FORM 1

Method Used (Circle One) Method 9 203A 203B Other: _____

Form Number MR011 Page 2 of 3
Continued on VEO Form Number _____

Company Name MULLINIKS RECYCLING
Facility Name SEABOARD I-95
Street Address I-95 EXIT 42
City BRUNSWICK State GA Zip 31525

Process SCREENING Unit # 011 Operating Mode 250 Ton Hour
Control Equipment WATER Operating Mode AS NEEDED

Describe Emission Point SCREEN
Height of Emiss. Pt. Start 10' End SAME Height of Emiss. Pt. Rel. to Observer Start 10' End SAME
Distance to Emiss. Pt. Start 150' End SAME Direction to Emiss. Pt. (Degrees) Start 318° End SAME

Vertical Angle to Obs. Pt. Start 3° End SAME Direction to Obs. Pt. (Degrees) Start 318° End SAME
Distance and Direction to Observation Point from Emission Point Start 150' End SAME

Describe Emissions Start NONE End SAME
Emission Color Start NONE End SAME Water Droplet Plume Attached ☐ Detached ☐ None ☒

Describe Plume Background Start PINE TREES End SAME
Background Color Start GREEN End SAME Sky Conditions Start SCATTERED End SAME
Wind Speed Start 1-3MPH End SAME Wind Direction Start VARIABLE End SAME
Ambient Temp. Start 83° End SAME Wet Bulb Temp. 74 RH Percent 70%

| Observation Date | | Time Zone | | Start Time | End Time |
|------------------|---|-------------|----|-------------|-------------|
| <u>5 JUNE 09</u> | | <u>EDST</u> | | <u>1106</u> | <u>1136</u> |
| Soc Min | 0 | 15 | 30 | 45 | Comments |
| 1 | 0 | 0 | 0 | 0 | |
| 2 | 0 | 0 | 0 | 0 | |
| 3 | 0 | 0 | 0 | 0 | |
| 4 | 0 | 0 | 0 | 0 | |
| 5 | 0 | 0 | 0 | 0 | |
| 6 | 0 | 0 | 0 | 0 | |
| 7 | 0 | 0 | 0 | 0 | |
| 8 | 0 | 0 | 0 | 0 | |
| 9 | 0 | 0 | 0 | 0 | |
| 10 | 0 | 0 | 0 | 0 | |
| 11 | 0 | 0 | 0 | 0 | |
| 12 | 0 | 0 | 0 | 0 | |
| 13 | 0 | 0 | 0 | 0 | |
| 14 | 0 | 0 | 0 | 0 | |
| 15 | 0 | 0 | 0 | 0 | |
| 16 | 0 | 0 | 0 | 0 | |
| 17 | 0 | 0 | 0 | 0 | |
| 18 | 0 | 0 | 0 | 0 | |
| 19 | 0 | 0 | 0 | 0 | |
| 20 | 0 | 0 | 0 | 0 | |
| 21 | 0 | 0 | 0 | 0 | |
| 22 | 0 | 0 | 0 | 0 | |
| 23 | 0 | 0 | 0 | 0 | |
| 24 | 0 | 0 | 0 | 0 | |
| 25 | 0 | 0 | 0 | 0 | |
| 26 | 0 | 0 | 0 | 0 | |
| 27 | 0 | 0 | 0 | 0 | |
| 28 | 0 | 0 | 0 | 0 | |
| 29 | 0 | 0 | 0 | 0 | |
| 30 | 0 | 0 | 0 | 0 | |

Observer's Name (Print) PETE PARKER
Observer's Signature [Signature] Date 5 JUNE 09
Organization MULLINIKS RECYCLING
Certified By ETA Date 5/20/09

Source Layout Sketch

Draw North Arrow ☐ IN ☒ MN

Observer's Position

Observation Point

Sun Location Line

140°

FEET

FEET

Side View

Stack With Plume

Sun

Wind

Longitude _____ Latitude _____ Declination _____

Additional Information
PERMIT # 777-5341-001-A6

EPA VISIBLE EMISSION OBSERVATION FORM 1

Method Used (Circle One) Method 9 203A 203B Other: _____

Company Name MULLINIKS RECYCLING
 Facility Name SEABOARD I-95
 Street Address I-95 EXIT 42
 City RAUNSWICK State GA Zip 31525

Process STACKING Unit # 011 Operating Mode 250 Ton Hour
 Control Equipment WATER Operating Mode AS NEEDED

Describe Emission Point STACKER
 Height of Emiss. Pt. Start 10' End SAME Height of Emiss. Pt. Rel. to Observer Start 10' End SAME
 Distance to Emiss. Pt. Start 150' End SAME Direction to Emiss. Pt. (Degrees) Start 318° End SAME

Vertical Angle to Obs. Pt. Start 3° End SAME Direction to Obs. Pt. (Degrees) Start 318° End SAME
 Distance and Direction to Observation Point from Emission Point Start 150' End SAME

Describe Emissions Start NONE End SAME
 Emission Color Start NONE End SAME Water Droplet Plume Attached ☐ Detached ☐ None ☒

Describe Plume Background Start PINE TREES End SAME
 Background Color Start GREEN End SAME Sky Conditions Start SCATTERED End SAME
 Wind Speed Start 1-3 MPH End SAME Wind Direction Start VARIABLE End SAME
 Ambient Temp. Start 83° End SAME Wet Bulb Temp. 74 RH Percent 70%

Source Layout Sketch

Draw North Arrow ☐ IN ☒ MN

Observer's Position

Observation Point

Sun Location Line

140°

Stack With Plume

Sun

Wind

Longitude _____ Latitude _____ Declination _____

Additional Information PERMIT # 777-5241-001-A-6

Form Number MRO111 Page 3 of 3
 Continued on VEO Form Number _____

Observation Date 5 JUNE 09 Time Zone EDST Start Time 1106 End Time 1136

| Sec Min | 0 | 15 | 30 | 45 | Comments |
|---------|---|----|----|----|----------|
| 1 | 0 | 0 | 0 | 0 | |
| 2 | 0 | 0 | 0 | 0 | |
| 3 | 0 | 0 | 0 | 0 | |
| 4 | 0 | 0 | 0 | 0 | |
| 5 | 0 | 0 | 0 | 0 | |
| 6 | 0 | 0 | 0 | 0 | |
| 7 | 0 | 0 | 0 | 0 | |
| 8 | 0 | 0 | 0 | 0 | |
| 9 | 0 | 0 | 0 | 0 | |
| 10 | 0 | 0 | 0 | 0 | |
| 11 | 0 | 0 | 0 | 0 | |
| 12 | 0 | 0 | 0 | 0 | |
| 13 | 0 | 0 | 0 | 0 | |
| 14 | 0 | 0 | 0 | 0 | |
| 15 | 0 | 0 | 0 | 0 | |
| 16 | 0 | 0 | 0 | 0 | |
| 17 | 0 | 0 | 0 | 0 | |
| 18 | 0 | 0 | 0 | 0 | |
| 19 | 0 | 0 | 0 | 0 | |
| 20 | 0 | 0 | 0 | 0 | |
| 21 | 0 | 0 | 0 | 0 | |
| 22 | 0 | 0 | 0 | 0 | |
| 23 | 0 | 0 | 0 | 0 | |
| 24 | 0 | 0 | 0 | 0 | |
| 25 | 0 | 0 | 0 | 0 | |
| 26 | 0 | 0 | 0 | 0 | |
| 27 | 0 | 0 | 0 | 0 | |
| 28 | 0 | 0 | 0 | 0 | |
| 29 | 0 | 0 | 0 | 0 | |
| 30 | 0 | 0 | 0 | 0 | |

Observer's Name (Print) PIETRO PARKER
 Observer's Signature [Signature] Date 5 JUNE 09
 Organization MULLINIKS RECYCLING, INC.
 Certified By ETA Date 5/20/09

VISIBLE EMISSIONS EVALUATOR

This is to certify that

PETE PARKER

met the specifications of Federal Reference Method 9 and qualifies as a visible emissions evaluator. Maximum deviation on white and black smoke did not exceed 7.5% opacity and no single error exceeding 15% opacity was incurred during the certification test conducted by Eastern Technical Associates of Raleigh, NC. This certificate is valid for six months from date of issue.

375142

CERT. NUMBER

5/20/2009

DATE OF SCHOOL

JACKSONVILLE, FL

SCHOOL LOCATION

11/19/2009

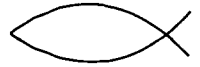
CERTIFICATION EXP. DATE

PAR732219

STUDENT ID NUMBER

Michael W. Longford

MANAGER OF TRAINING SERVICES



OFFICE (904) 764-3644
FAX (904) 764-3976

5937 SOUTEL DRIVE
JACKSONVILLE, FL 32219

June 12, 2009

FDEP
Receipts
P.O. Box 3070
Tallahassee, FL 32315-3070

To Whom It May Concern:

I am submitting a General Permit renewal for Portable Crusher 11, Permit #777-5241-001-AG.

I would like to use our permanent site address to get the application processed since the plant is currently in Georgia.

A Visible Emissions test was completed and is included.

If you should have any questions please contact me at (904) 764-3644.

Sincerely,

A handwritten signature in black ink, appearing to read "Dawn M. Smith".

Dawn M. Smith

"Conserving Our Natural Resources By Recycling"

"Serving The Asphalt and Concrete Recycling Needs Throughout The Southeastern States"

From: Origin ID: NIPA (904) 764-3644
 Dawn Smith
 MULLINKS RECYCLING, INC
 5937 SOUDEL DRIVE
 JACKSONVILLE, FL 32219



J50110501302023

SHIP TO: (904) 764-3644

BILL SENDER

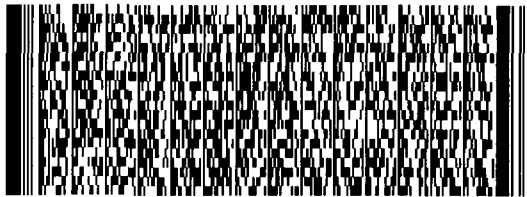
Receipts**FDEP****3800 COMMONWEALTH BLVD # MS-77****MS-77****TALLAHASSEE, FL 32399**

Ship Date: 12JUN09
 ActWgt: 1.0 LB
 CAD: 5280301/INET9011
 Account#: S *****

Delivery Address Bar Code

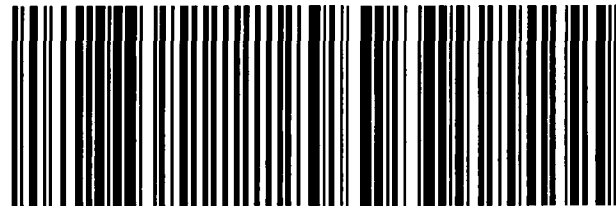


Ref #
 Invoice #
 PO #
 Dept #



TRK# 7976 7761 7755
 0201

MON - 15JUN A2
PRIORITY OVERNIGHT

32399**FL-US****TLH****XH TLHA****After printing this label:**

1. Use the 'Print' button on this page to print your label to your laser or inkjet printer.
2. Fold the printed page along the horizontal line.
3. Place label in shipping pouch and affix it to your shipment so that the barcode portion of the label can be read and scanned.

Warning: Use only the printed original label for shipping. Using a photocopy of this label for shipping purposes is fraudulent and could result in additional billing charges, along with the cancellation of your FedEx account number.

Use of this system constitutes your agreement to the service conditions in the current FedEx Service Guide, available on fedex.com. FedEx will not be responsible for any claim in excess of \$100 per package, whether the result of loss, damage, delay, non-delivery, misdelivery, or misinformation, unless you declare a higher value, pay an additional charge, document your actual loss and file a timely claim. Limitations found in the current FedEx Service Guide apply. Your right to recover from FedEx for any loss, including intrinsic value of the package, loss of sales, income interest, profit, attorney's fees, costs, and other forms of damage whether direct, incidental, consequential, or special is limited to the greater of \$100 or the authorized declared value. Recovery cannot exceed actual documented loss. Maximum for items of extraordinary value is \$500, e.g. jewelry, precious metals, negotiable instruments and other items listed in our Service Guide. Written claims must be filed within strict time limits, see current FedEx Service Guide.