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AUG 10 2009
Bureau of Air Quality
& Mobile Sources

**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)

7775603-001

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.)

Adrian & Ruiz Enterprises 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.)

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

Street Address: *14800 NW 112th Ave*
City: *Miami*

County: *Miami-Dade*

Zip Code: *33178*

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

*8/11/09 - Per
telecon w/ Mr
FONTE ADDRESS
IS 14800*

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: *Andres Fonte, vice president*

Owner/Authorized Representative Mailing Address

Organization/Firm: *A J A Fonte Inc.*

Street Address: *12 963 W. Okeechobee Rd.*

City: *Hialeah Gardens*

County: *Miami-Dade*

Zip Code: *33018*

Owner/Authorized Representative Telephone Numbers

Telephone: *(305) 512-4739*

Fax: *(305) 512-4759*

Cell phone (optional): *(954) 400-9449*
[Handwritten scribbles]

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: *N/A*

Facility Contact Mailing Address

Organization/Firm:

N/A

Street Address:

City:

County:

Zip Code:

Facility Contact Telephone Numbers

Telephone:

N/A

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.

[Handwritten Signature]

Signature

8/4/09

Date

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.

Operations of our facility consist of crushing concrete rubble with a Pioneer Recycler Portable Impactor Model CS4233H with all the standard equipment and permanent cross-belt magnet, dust suppression system and hydraulic jacks for rear of plant, vibrating feeder. In our facility we also use a "wet method" as a dust suppressant using a 4,000 gallon water tanker with multiple spray points at the rear, front, and sides of the machine.

? Capacity = ? T/hr 100 T/hr

? Power Source = MAKE - ENGINE CUMMINGS
MODEL - 6

FUEL - DIESEL

HP - 225 hp

* SEE ATTACHED ADDENDUM (e-mail)
DATED AUGUST 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.

Spraybars equipped on the machine will contribute to the precautions taken to prevent unconfined emissions. Dust suppressants such as water and other materials will subside/eliminate most of the emissions. The roads in reasonable distance of operation will be maintained as well as parking and yards. Stock pile height will be kept at a minimum to also contribute to the subsiding/eliminating of unconfined emissions.

7775603-001

* ADDENDUM TO REGISTRATION DATED 08/06/09.

Dibble, Dickson

From: Andres Fonte [andresfonte@aafonte.com]
Sent: Wednesday, August 12, 2009 4:24 PM
To: Dibble, Dickson
Subject: RE: Andre, try using this address Dickson.Dibble@dep.state.fl.us

[PAGE 10]

Good morning Mr. Dickson

As requested, reference 14800 NW 112 AVE

Rated capacity for this machine is 100 tons per Hour.
Engine manufacture is Cummins, model QSB6.7 rated 180 HP at 2200 rpm.
This is a EPA Tier 3 certified, charged-air-cooled, electronic engine.

If you need further assistance please call me.

Thank you,

Andres Fonte

A&A Fonte, Inc
12963 W Okeechobee Rd #8
Hialeah Gardens, FL 33018
305-512-4739 Fax: 305-512-4759
Andresfonte@aafonte.com

From: Dibble, Dickson [mailto:Dickson.Dibble@dep.state.fl.us]
Sent: Wednesday, August 12, 2009 4:12 PM
To: andresfonte@aafonte.com
Subject: Andre, try using this address Dickson.Dibble@dep.state.fl.us

Dickson.Dibble@dep.state.fl.us

Dickson E. Dibble

Dickson E. Dibble, ES III

FL Dept of Environmental Protection
Div. of Air Resource Management
Bureau of Air Monitoring & Mobile Sources
Air General Permit Program
Tel. (850) 921-9586
FAX (850) 922-6979
ICG-#345

Dickson.Dibble@dep.state.fl.us



Please note: Florida has a very broad public records law. Most written communications to or from state officials regarding state business are public records available to the public and media upon request. Your e-mail communications may therefore be subject to public disclosure

A&A Fonte, Inc.
12963 W. Okeechobee Rd. # 8
Hialeah Gardens, Fl. 33018

SOUTH FLORIDA PDC
FL 330
04 AUG 2009 PM 2 T

"LET US DARE
THINK, SPEAK,
John Adams,
powerofthefirst.com



To: FDEP RECEIPTS
P. O. BOX 3070
TALLAHASSEE, FL 32315-3070

32315+3070



2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 01, 2009
Secretary of State

DOCUMENT# P93000062382

Entity Name: ADRIAN & RUIZ ENTERPRISES, INC.

Current Principal Place of Business:

7441 S W 125 COURT
 MIAMI, FL 33183

New Principal Place of Business:

Current Mailing Address:

7441 S W 125 COURT
 MIAMI, FL 33183

New Mailing Address:

FEI Number: 65-0484665

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUIZ, ANGEL
 7441 S W 125 COURT
 MIAMI, FL 33183 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

 Electronic Signature of Registered Agent

 Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD () Delete
 Name: RUIZ, ANGEL
 Address: 7441 S W 125 COURT
 City-St-Zip: MIAMI, FL 33183

Title: () Change () Addition
 Name:
 Address:
 City-St-Zip:

Title: VPD () Delete
 Name: FONTE, ANDRES
 Address: 3572 NW 50 STREET
 City-St-Zip: MIAMI, FL 33142

Title: () Change () Addition
 Name:
 Address:
 City-St-Zip:

Title: SD () Delete
 Name: MOREJON, IGNACIO M
 Address: 3572 NW 50 STREET
 City-St-Zip: MIAMI, FL 33142

Title: () Change () Addition
 Name:
 Address:
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: A RUIZ

 Electronic Signature of Signing Officer or Director

D

03/01/2009

 Date

2009 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 17, 2009
Secretary of State**

DOCUMENT# P04000014259

Entity Name: A & A FONTE, INC.

Current Principal Place of Business:

12963 W OKEECHOBEE RD
STE #8
HIALEAH, FL 33018

New Principal Place of Business:

Current Mailing Address:

12963 W OKEECHOBEE RD
STE #8
HIALEAH, FL 33018

New Mailing Address:

FEI Number: 76-0750728 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FONTE, ANDRES
12963 W OKEECHOBEE RD
STE # 8
HIALEAH GARDENS, FL 33018 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FONTE, ANDRES
Address: 12963 W OKEECHOBEE RD STE 8
City-St-Zip: HIALEAH, FL 33018

Title: VT () Delete
Name: FONTE, ANDRES C
Address: 12963 W OKEECHOBEE RD STE 8
City-St-Zip: HIALEAH, FL 33018

Title: S () Delete
Name: PARMER, RON
Address: 9231 S. CYPRESS CIRCLE
City-St-Zip: MIRAMAR, FL 33025

Title: S () Delete
Name: CHAN, JOE
Address: 12000 SW 92ND STREET
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANDRES FONTE

P

03/17/2009

Electronic Signature of Signing Officer or Director

Date