

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

January 8, 2008

Mr. Adam Freeman A-1 Concrete Block Corporation 1617 South Division Street Orlando, Florida 32805

Dear Mr. Freeman:

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 December 6, 2007. We have assigned ARMS Number 1170405-001 to this facility.

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.

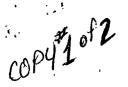
Sincerely,

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

SFV/pg

cc: Ms. Caroline Shine, Central District

A CE VED



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 a air operation permit to an air general permit). RE-REGISTRATION (for facilities currently using an air general permit) - Notification of intent to:
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 a
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.)
A-1 Concrete Block 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.)
Sanford
Facility Location (Provide the physical location of the facility, not necessarily the mailing address.)
Street Address: 350 Persimmon Avenue
City:Sanford County: Seminole Zip Code: 32771
Facility Start-Up Date (Estimated start-up date of proposed new facility.)(N/A for existing facility)
12/30/07
1230001

•					
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: Adam Freeman, Own	ner				
Owner/Authorized Representative Mailing					
Organization/Firm: A-1 Concrete Block Co	rporation				
Street Address: 1617 South Division Street					
City: Orlando	County: Orange	Zip Code: 32805			
Owner/Authorized Representative Telephone					
Telephone: 407-422-3768	Fax	:: 407-423-8133			
Cell phone (optional):					
Facility Contact (If different from Owner					
	person to be contacted	regarding day-to-day operations at the facility.)			
Print Name and Title: Same as Owner					
	······				
Facility Contact Mailing Address					
Organization/Firm:					
Street Address:					
Street Address: City:	County:	Zip Code:			
City:	County:	Zip Code:			
City: Facility Contact Telephone Numbers					
City: Facility Contact Telephone Numbers Telephone:	County:				
City: Facility Contact Telephone Numbers					
City: Facility Contact Telephone Numbers Telephone: Cell phone (optional):	Fax				
City: Facility Contact Telephone Numbers Telephone:	Fax				
City: Facility Contact Telephone Numbers Telephone: Cell phone (optional):	Fax nent	:			
City: Facility Contact Telephone Numbers Telephone: Cell phone (optional): Owner/Authorized Representative States This statement must be signed and dated by	Fax nent the person named above	ve as owner or authorized representative			
City: Facility Contact Telephone Numbers Telephone: Cell phone (optional): Owner/Authorized Representative States This statement must be signed and dated by I, the undersigned, am the owner or au	nent the person named above thorized representative	we as owner or authorized representative of the owner or operator of the facility			
City: Facility Contact Telephone Numbers Telephone: Cell phone (optional): Owner/Authorized Representative States This statement must be signed and dated by I, the undersigned, am the owner or au addressed in this Air General Permit R	nent the person named above thorized representative egistration Form. I help	ve as owner or authorized representative of the owner or operator of the facility reby certify, based on information and			
City: Facility Contact Telephone Numbers Telephone: Cell phone (optional): Owner/Authorized Representative States This statement must be signed and dated by I, the undersigned, am the owner or au addressed in this Air General Permit R belief formed after reasonable inquiry,	nent the person named above thorized representative egistration Form. I hel that the facility address	ve as owner or authorized representative of the owner or operator of the facility reby certify, based on information and sed in this registration form is eligible for			
Facility Contact Telephone Numbers Telephone: Cell phone (optional): Owner/Authorized Representative States This statement must be signed and dated by I, the undersigned, am the owner or au addressed in this Air General Permit R belief formed after reasonable inquiry, use of this air general permit and that it	Fax nent the person named above thorized representative legistration Form. I held that the facility address the statements made in	ve as owner or authorized representative of the owner or operator of the facility reby certify, based on information and sed in this registration form is eligible for this registration form are true, accurate			
Facility Contact Telephone Numbers Telephone: Cell phone (optional): Owner/Authorized Representative States This statement must be signed and dated by I, the undersigned, am the owner or au addressed in this Air General Permit R belief formed after reasonable inquiry, use of this air general permit and that a and complete. Further, I agree to oper	Fax nent the person named above thorized representative tegistration Form. I her that the facility address the statements made in that and maintain the fa	ve as owner or authorized representative of the owner or operator of the facility reby certify, based on information and sed in this registration form is eligible for this registration form are true, accurate scility described in this registration form so			
Facility Contact Telephone Numbers Telephone: Cell phone (optional): Owner/Authorized Representative States This statement must be signed and dated by I, the undersigned, am the owner or au addressed in this Air General Permit R belief formed after reasonable inquiry, use of this air general permit and that a and complete. Further, I agree to open as to comply with all applicable standa	nent the person named above thorized representative tegistration Form. I he that the facility address the statements made in tate and maintain the fa trds for control of air pe	ve as owner or authorized representative of the owner or operator of the facility reby certify, based on information and sed in this registration form is eligible for this registration form are true, accurate scility described in this registration form so ollutant emissions found in the statutes of			
Facility Contact Telephone Numbers Telephone: Cell phone (optional): Owner/Authorized Representative States This statement must be signed and dated by I, the undersigned, am the owner or au addressed in this Air General Permit R belief formed after reasonable inquiry, use of this air general permit and that a and complete. Further, I agree to oper	nent the person named above thorized representative tegistration Form. I he that the facility address the statements made in tate and maintain the fa trds for control of air pe	ve as owner or authorized representative of the owner or operator of the facility reby certify, based on information and sed in this registration form is eligible for this registration form are true, accurate scility described in this registration form so ollutant emissions found in the statutes of			
Facility Contact Telephone Numbers Telephone: Cell phone (optional): Owner/Authorized Representative States This statement must be signed and dated by I, the undersigned, am the owner or au addressed in this Air General Permit R belief formed after reasonable inquiry, use of this air general permit and that and complete. Further, I agree to oper as to comply with all applicable standa the State of Florida and rules of the De	nent the person named above thorized representative tegistration Form. I he that the facility addres the statements made in that and maintain the fa trds for control of air per	ve as owner or authorized representative of the owner or operator of the facility reby certify, based on information and sed in this registration form is eligible for this registration form are true, accurate scility described in this registration form so collutant emissions found in the statutes of ental Protection and revisions thereof.			
Facility Contact Telephone Numbers Telephone: Cell phone (optional): Owner/Authorized Representative States This statement must be signed and dated by I, the undersigned, am the owner or au addressed in this Air General Permit R belief formed after reasonable inquiry, use of this air general permit and that a and complete. Further, I agree to open as to comply with all applicable standa the State of Florida and rules of the De	nent the person named above thorized representative tegistration Form. I he that the facility addres the statements made in that and maintain the fa trds for control of air per	ve as owner or authorized representative of the owner or operator of the facility reby certify, based on information and sed in this registration form is eligible for this registration form are true, accurate scility described in this registration form so collutant emissions found in the statutes of ental Protection and revisions thereof.			
Facility Contact Telephone Numbers Telephone: Cell phone (optional): Owner/Authorized Representative States This statement must be signed and dated by I, the undersigned, am the owner or au addressed in this Air General Permit R belief formed after reasonable inquiry, use of this air general permit and that and complete. Further, I agree to oper as to comply with all applicable standa the State of Florida and rules of the De	nent the person named above thorized representative tegistration Form. I he that the facility addres the statements made in that and maintain the fa trds for control of air per	ve as owner or authorized representative of the owner or operator of the facility reby certify, based on information and sed in this registration form is eligible for this registration form are true, accurate scility described in this registration form so collutant emissions found in the statutes of ental Protection and revisions thereof.			
Facility Contact Telephone Numbers Telephone: Cell phone (optional): Owner/Authorized Representative States This statement must be signed and dated by I, the undersigned, am the owner or au addressed in this Air General Permit R belief formed after reasonable inquiry, use of this air general permit and that a and complete. Further, I agree to open as to comply with all applicable standa the State of Florida and rules of the De	nent the person named above thorized representative tegistration Form. I he that the facility addres the statements made in that and maintain the fa trds for control of air per	ve as owner or authorized representative of the owner or operator of the facility reby certify, based on information and sed in this registration form is eligible for this registration form are true, accurate scility described in this registration form so collutant emissions found in the statutes of ental Protection and revisions thereof.			
Facility Contact Telephone Numbers Telephone: Cell phone (optional): Owner/Authorized Representative States This statement must be signed and dated by I, the undersigned, am the owner or au addressed in this Air General Permit R belief formed after reasonable inquiry, use of this air general permit and that a and complete. Further, I agree to open as to comply with all applicable standa the State of Florida and rules of the De	nent the person named above thorized representative tegistration Form. I he that the facility addres the statements made in the and maintain the fa trds for control of air per	ve as owner or authorized representative of the owner or operator of the facility reby certify, based on information and sed in this registration form is eligible for this registration form are true, accurate scility described in this registration form so collutant emissions found in the statutes of ental Protection and revisions thereof.			

Type of Facility		
Check one:	[] m m . m.	
Stationary Facility	Relocatable Facility	
Type(s) of Reasonable Precautions Used		
Check all precautions to be used for the		Stock piles and yards. Pave Yards
✓ Pave Roads✓ Maintain Roads/Parking/Yards	☑ Pave Parking Areas☑ Use Water Application	Use Dust Suppressant
Remove Particulate Matter	☐ Reduce Stock Pile Height	Install Wind Breaks
Check all precautions to be used for the		S: Enclosure
Spray Bar	☐ Chute ☐ Partial enclosure	_ Enclosure
	Partial enclosure	
Description of Reasonable Precautions		
Below, or as an attachment to this form, p	rovide details of all types of reasona	ble precautions to be used to prevent
unconfined emissions at the facility.		
	C to a majora de desello aboue doon	not contribute this is a block plant
The precautions used for the management and not a batch plant. The mixing operation	or drop points to trucks above does	t the job site and not at the plant itself.
There is a mixer baghouse located at the p	plant to control emissions from loadi	ng the truck with the aggregate that
will be mixed as needed at job sites.		

DEP Form No. 62-210.920(2)(b) Effective: January 10, 2007

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. This new facility will have 3 - 450 Barrel Portable silos, 1 - 350 Barrel Portable silo and a mixer baghouse. The main process at the facility is block manufacturing and secondary, loading aggregate onto the Zimmerman volumetric concrete mixers that mix the concrete in the field to provide the exact amount of conrete required for the individual job. Each of the portable silos is equipped with a Turmac WAM FC3J 07-200 silo top dust collector with a 99.8-99.9% efficiency. Specifications for the baghouses are included in Attachment A. There is also a mixer baghouse at the plant for loading the aggregate into the trucks where the concrete will be mixed as needed at job sites. The mixer baghouse is a Turmac WAM FC2J 07-65 mixer dust collector with cartridge filters and a 99.8-99.9% removal efficiency. The specification for this baghouse are included in Attachment A.

DEP Form No. 62-210.920(2)(b) Effective: January 10, 2007

Attachment A Equipment Specifications



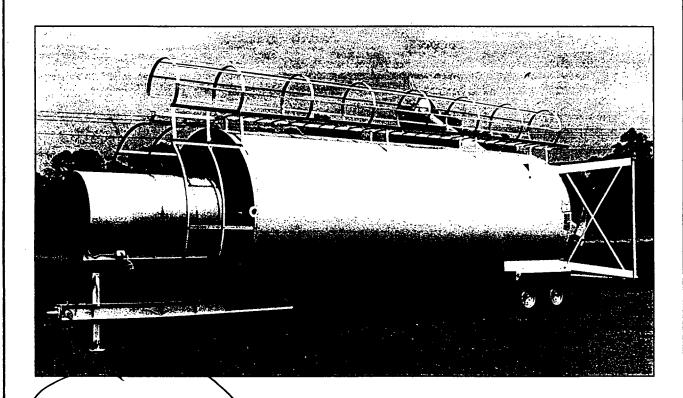
405 Lowery Ave. • Box 220 Belgrade, Minnesota 56312

Phone: (320) 254-8246 • FAX: (320) 254-3458



SCOTT EQUIPMENT CO. P. O. BOX 705 LAKELAND, FL 33802 863 / 616-9214

Belgrade Portable Cement Silo



350 Barrel Portable Silo

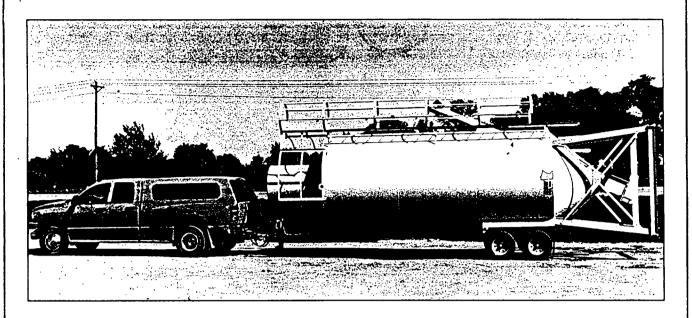
- · 8'6" Dia. x 37' Height 350 Brrl.
- · Positive Feed Drive
- 9" Dia. Screw x 17'
- 10 HP Motor And Gear Box Drive
- Heavy Duty Dual Axle Trailer and Tires
- · Electric Brakes and Light Package
- 150 Sq. Ff. Bag Area Dust House with Ar Vibrator
- · Trailer Jack
- · Wt. 10,000#

270 Barrel Portable Silo

- •8'6" Dia. x 31'-0" Height
- · Positive Feed Drive
- 7" Dia. Screw x 17'
- 5 HP Motor And Gear Box Drive
- · Heavy Duty Dual Axle Trailer and Tires
- · Electric Brakes and Light Package
- 150 Sq. Ft. Bag Area Dust House with Air Vibrator
- · Trailer Jack
- Wt. 8,500#

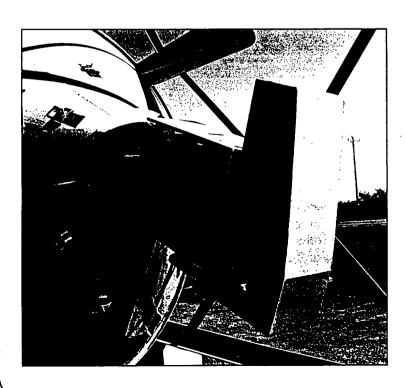
Options:

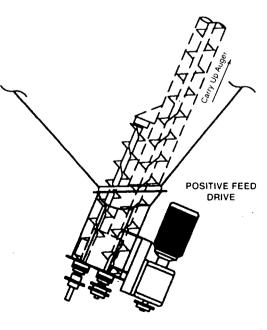
Available with 225 Sq. Ft. Dust House Bin Level Indicators Leg Extension Package 9" & 12" Screw Available for 270 & 350 BBL Silos Gas Motor Available on 7" Screw Auger Only Single Phase Motor



Legal Height - Legal Width - Towable with One-ton Truck

Positive Feed Drive System







P.O. BOX 8950 Strange Vancouver, Washington 98668

PHONE: 800-488-7622 FAX: 360-906-8786

Department of Environmental Protection Bureau of New Source Review Control Data Sheet Dust Collector

Manufacturer and Model: WAM FC3J 07-	200 (Silo Top Dust Collector) 🦂 🧳	::/25
--------------------------------------	-----------------------------------	-------

Specify: ___ Baghouse __X Cartridge

Number of bags or cartridges: 14

Size of bags or cartridges: 5.25" x 30"

Total bag or cartridge area (ft 2): 200 ft 2

Maximum capacity (ACFM): 1200 Cement

Bag or cartridge fabric: Spun bound Polyester

Fabric Weight: 80z

Weave: 10 micron

Finish: coated

Maximum fabric temperature: 160 degrees F

Efficiency: 99.8-99.9%

Air to cloth ratio: 6:1

Method of cleaning: Pulse Jet

Operating Pressure drop (inches of water): Min 4 Max 8

Particulate grain loading (grain/scf): Inlet 30 Outlet .01

Fan Requirements: Venting



P.O. BOX 8950 Stranger Vancouver, Washington 98668

PHONE: 800-488-7622 FAX: 360-906-8786

Department of Environmental Protection Bureau of New Source Review Control Data Sheet Dust Collector

Manufacturer and Model: WAM FC2J 07-65 (Mixer Dust Collector)

Specify: ___ Baghouse X Cartridge

Number of bags or cartridges: 8

Size of bags or cartridges: 5.25" x 20"

Total bag or cartridge area (ft 2): 75 ft 2

Maximum capacity (ACFM): 390 CFM Cement

Bag or cartridge fabric: Polyester – Teflon

Fabric Weight: 8oz

Weave: 10 micron

Finish: coated

Maximum fabric temperature: 160 degrees F

Efficiency: 99.8-99.9%

Air to cloth ratio: 6:1

Method of cleaning: Pulse Jet

Operating Pressure drop (inches of water): Min 4 Max 8

Particulate grain loading (grain/scf): Inlet 30 Outlet .01

Fan Requirements: 3HP, 1600 CFM



November 30, 2007

FDEP Receipts Post Office Box 3070 Tallahassee, Florida 32315-3070

RE: A-1 Concrete Block Corporation
Air General Permit Registration
New Sanford Block Plant



Dear FDEP:

Enclosed are two (2) copies of the above referenced application along with a check in the amount of \$100.00 for the application fee.

If you have any questions, please call me at (407) 298-2282 or e-mail me at sara@grovescientific.com.

Respectfully, GROVE SCIENTIFIC & ENGINEERING COMPANY

Sara Greivell

Environmental Scientist

cc: Adam Freeman - A-1 Block Corporation

A-1 Block general permit notification Sub Letter to FDEP 07 / 300501 / 113007

Attachment A Equipment Specifications

Florida Department of Environmental Protection Cash Receiving Application (CRA) Cashlisting by Deposit #: 281318 thru 281318
Printed: 12/4/2007 4:45:12 PM - Page 5

Cashlisting:

65444

Cashlist Area:

3755

Description: DIV OF AIR RESOURCES MGMT.

Deposit No:

281318

Date Deposited: 12/04/2007

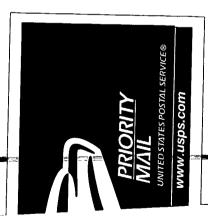
Contact: PATTY ADAMS

(h) (b) ject (002272	 Dep DDN 478972	Receipt Number 608504	Pre- Numbered <u>Receipt</u>	Name A-1 BLOCK CORPORATION	Check Number 48252		Reference Account 12/1/2007 - C.C.B 11/10405-001	Payment Number 851572	Remittance Number 757491	Fund PFTF
-				Object Code 002272 Subtotal:		\$100.00	JI / 04037 23 1			
				Cashlisting 65444 Total:		\$100.00	¢		•	

7617 S. Division Ace Orlando Fl 32805.



000 1670 0009 6542 2588



FDEP Receipts P.O. Box 3070

Tallahusse Fl 32315-2010