



JOHN CARLO
INCORPORATED

RECEIVED

JUN 16 1999

BUREAU OF
AIR REGULATION

June 11, 1999

Mr. Ross Pollock
State of Florida
Department of Environme
2600 Blair Stone Road
Tallahassee, FL 32399

ection

Re: Florida Departm
Application for
Plant No. 1866
FDEP Construction Per...

002-A0

Protection

0-001-AC

Dear Mr. Pollock:

Enclosed please find three copies of the completed Florida Department of Environmental Protection, Application for Air Permit Short Form, as required to obtain a FDEP statewide operation permit for our relocatable concrete batch plant serial number 1866. The fee for this stage of permitting as paid with the construction permit application.

Sincerely,

JOHN CARLO, INC.

David Ammon
Project Manager

John Carlo, Inc.
Post Office Box 1297
1643 State Road 200, Suite 6
East Yulee, Florida 32041-1297
904-225-3117
FAX: 904-225-3120

Central Florida Testing Laboratories, Inc.

Testing Development and Research

12625 - 40TH STREET NORTH • CLEARWATER, FL 33762

TAMPA BAY AREA (727) 572-9797

FLORIDA 1-800-248-CFTL

FAX (727) 299-0023

June 7, 1999

Mr. David Ammon
John Carlo, Inc.
Post Office Box 1297
East Yulee, FL 32041-1297

Subject: Florida Department of Environmental Protection
Application for Operating Permit
Plant Number 1866
FDEP Construction Permit Number 7770210-001-AC

Dear Mr. Ammon:

Enclosed please find four copies of the completed Florida Department of Environmental Protection, Application for Air Permit Short Form, as required to obtain a FDEP statewide operation permit for your relocatable concrete batch plant serial number 1866, currently operating in Tampa, Florida.

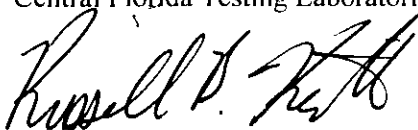
Please review the permit application. Should you find it acceptable, please sign and date page 2 of each copy of the application. Retain one copy for your files and forward the other three copies to the Florida Department of Environmental Protection to the attention of Mr. Ross Pollock, at their Tallahassee address as listed below.

Mr. Ross Pollock
State of Florida
Department of Environmental Protection
2600 Blair Stone Road
Tallahassee, FL 32399-2400

The fee for this stage of permitting was paid with the construction permit application.

Thank you once again for this opportunity to be of service. Should you have any questions regarding the application, or if you need any additional assistance in this matter, please do not hesitate to contact our office.

Sincerely,
Central Florida Testing Laboratories, Inc.



Russell B. Keith, E.I.
Director of Environmental Services

RBK/rk

enclosure: Four copies of the Application

RECEIVED

JUN 16 1999

BUREAU OF
AIR REGULATION

John Carlo, Inc.
FDEP Operation Permit Application
Plant No. 1866
June 1999



Department of Environmental Protection

DIVISION OF AIR RESOURCES MANAGEMENT

APPLICATION FOR AIR PERMIT - SHORT FORM

See Instructions for Form No. 62-210.900(2)

I. APPLICATION INFORMATION

This section of the Application for Air Permit form identifies the facility and provides general information on the scope of this application and the purpose for which this application is being submitted. This section also includes information on the owner or authorized representative of the facility and the necessary statements for the applicant and professional engineer, where required, to sign and date for formal submittal of the Application for Air Permit to the Department. If the application form is submitted to the Department using ELSA, this section of the Application for Air Permit must also be submitted in hard-copy.

Identification of Facility Addressed in This Application


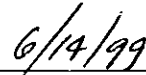
Enter the name of the corporation, business, governmental entity, or individual that has ownership or control of the facility; the facility site name, if any; and the facility's physical location. If known, also enter the facility identification number.

1. Facility Owner/Company Name: John Carlo, Inc.	
2. Site Name: John Carlo, Inc.	
3. Facility Identification Number: 7770210 [] Unknown	
4. Facility Location: [Current Location] Street Address or Other Locator: Tampa Bay Blvd. & Westshore Blvd. City: Tampa County: Hillsborough Zip Code:	
5. Relocatable Facility? [<input checked="" type="checkbox"/>] Yes [] No	6. Existing Permitted Facility? [<input checked="" type="checkbox"/>] Yes [] No

Application Processing Information (DEP Use)

1. Date of Receipt of Application:	<i>6/16/99</i>
2. Permit Number:	<i>7770210-002-A0</i>

Owner/Authorized Representative

1. Name and Title of Owner/Authorized Representative: David Ammon, Project Manager
2. Owner/Authorized Representative Mailing Address: <i>(Present Mailing Address)</i> Organization/Firm: John Carlo, Inc. Street Address: Post Office Box 1297 City: East Yulee State: Florida Zip Code: 32041-1297
3. Owner/Authorized Representative Telephone Numbers: <i>(Current Phone Numbers)</i> Telephone: (904) 225-3117 Fax: (904) 225-3120
4. Owner/Authorized Representative Statement: <i>I, the undersigned, am the owner or authorized representative* of the facility addressed in this Application for Air Permit. I hereby certify, based on information and belief formed after reasonable inquiry, that the statements made in this application are true, accurate and complete and that, to the best of my knowledge, any estimates of emissions reported in this application are based upon reasonable techniques for calculating emissions. Further, I agree to operate and maintain the air pollutant emissions units and air pollution control equipment described in this application 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 understand that a permit, if granted by the Department, cannot be transferred without authorization from the Department, and I will promptly notify the Department upon sale or legal transfer of any permitted emissions unit.</i>  _____ Signature  _____ Date

* Attach letter of authorization if not currently on file.

Scope of Application

This Application for Air Permit addresses the following emissions unit(s) at the facility. An Emissions Unit Information Section (a Section III of the form) must be included for each emissions unit listed.

Emissions Unit ID	Description of Emissions Unit	Permit Type
001	Relocatable concrete batch plant and a cement silo controlled by a C & W-RA-140 baghouse system.	AO2B

Purpose of Application

This Application for Air Permit is submitted to obtain (check one):

- Initial air operation permit for one or more existing, but previously unpermitted, emissions units.
- Initial air operation permit for one or more newly constructed or modified emissions units.

Current construction permit number: 7770210-001-AC

- Air operation permit revision to address one or more newly constructed or modified emissions units.

Current construction permit number: _____

Operation permit to be revised: _____

- Air operation permit renewal.

Operation permit to be renewed: _____

Application Processing Fee

Check one:

[] Attached - Amount: _____ [X] Not Applicable.

Construction/Modification Information

1. Description of Alterations:

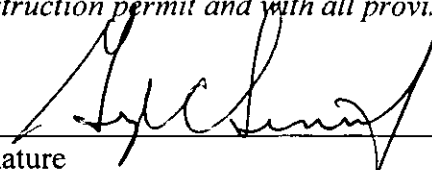
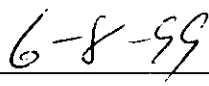
The fee for the operating permit was submitting with the construction permit application.

This application is for a state wide operating permit for this relocatable concrete batch plant currently permitted under FDEP permit number 7770210-001-AC. This plant is currently operating in Tampa, Florida.

2. Date of Commencement of Construction:

~April 1,1999

Professional Engineer Certification

1. Professional Engineer Name: Mr. George C. Sinn, Jr. P.E. Registration Number: 16911
2. Professional Engineer Mailing Address: Organization/Firm: Central Florida Testing Laboratories, Inc. Street Address: 12625 - 40th Street North City: Clearwater State: FL Zip Code: 33762
3. Professional Engineer Telephone Numbers: Telephone: (727) 572-9797 Fax: (727) 299-0023
4. Professional Engineer Statement: <i>I, the undersigned, hereby certify, except as particularly noted herein*¹, that:</i> <i>(1) To the best of my knowledge, there is reasonable assurance that the air pollutant emissions unit(s) and the air pollution control equipment described in this Application for Air Permit, when properly operated and maintained, will comply with all applicable standards for control of air pollutant emissions found in the Florida Statutes and rules of the Department of Environmental Protection; and</i> <i>(2) To the best of my knowledge, any emission estimates reported or relied on in this application are true, accurate, and complete and are either based upon reasonable techniques available for calculating emissions or, for emission estimates of hazardous air pollutants not regulated for an emissions unit addressed in this application, based solely upon the materials, information and calculations submitted with this application.</i> <i>If the purpose of this application is to obtain an initial air operation permit or operation permit revision for one or more newly constructed or modified emissions units (check here [X] if so), I further certify that, with the exception of any changes detailed as part of this application, each such emissions unit has been constructed or modified in substantial accordance with the information given in the corresponding application for air construction permit and with all provisions contained in such permit.</i>  _____ Signature  _____ Date (seal)

Attach any exception to certification statement.

¹Certification statement excludes any equipment manufacturers' guarantee or claim of control efficiency. Any equipment manufacturers' specifications submitted with this application are included as reference material only, not for certification by CFTL.

Application Contact

1. Name and Title of Application Contact: Mr. Russell B. Keith, E.I., Environmental Engineer
2. Application Contact Mailing Address: Organization/Firm: Central Florida Testing Laboratories, Inc. Street Address: 12625 – 40th Street North City: Clearwater State: FL Zip Code: 33762
3. Application Contact Telephone Numbers: Telephone: (727) 572-9797 Fax: (727) 299-0023

Application Comment

Relocatable REX Central Mix concrete batch plant with a cement silo capacity of 600 barrels and a batcher with a maximum rate of 200 cubic yards of concrete per hour. This plant also uses cement storage “pigs” for cement storage when needed.

This application is for a state wide operating permit for this relocatable concrete batch plant.

II. FACILITY INFORMATION

A. GENERAL FACILITY INFORMATION

Facility Location and Type

1. Facility UTM Coordinates: <i>Coordinates are for current location only</i> Zone: 17 East (km): 350.351 North (km): 3094.847			
2. Facility Latitude/Longitude: Latitude (DD/MM/SS): 27/58/20 Longitude (DD/MM/SS): 82/31/17			
3. Governmental Facility Code: 0	4. Facility Status Code: A	5. Facility Major Group SIC Code: 32	6. Facility SIC(s): 3273
7. Facility Comment (limit to 500 characters): This application is for a state wide operating permit for this relocatable concrete batch plant.			

Facility Contact

1. Name and Title of Facility Contact: Mr. Dennis Combs, Project Engineer			
2. Facility Contact Mailing Address: Organization/Firm: John Carlo, Inc. Street Address: Post Office Box 1297 City: East Yulee State: Florida Zip Code: 32041-1297			
3. Facility Contact Telephone Numbers: Telephone: (904) 225-3117 Fax: (904) 225-3120			

Facility Regulatory Classifications

1. Small Business Stationary Source? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unknown
2. Title V Source? <input checked="" type="checkbox"/> No
3. Synthetic Non-Title V Source by Virtue of Previous Air Construction Permit? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Construction Permit Number/Issue Date: _____
4. One or More Emission Units Subject to NSPS? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
5. Facility Regulatory Classifications Comment (limit to 200 characters)

B. FACILITY SUPPLEMENTAL INFORMATION

This subsection of the Application for Air Permit form provides supplemental information related to the facility as a whole. (Supplemental information related to individual emissions units within the facility is provided in Subsection III-B of the form.) Supplemental information must be submitted as an attachment to each copy of the form, in hard-copy or computer-readable form.

Supplemental Requirements for All Applications

1. Area Map Showing Facility Location: <input type="checkbox"/> Attached, Document ID: _____ <input type="checkbox"/> Not Applicable <input checked="" type="checkbox"/> Waiver Requested Concrete plant will be used at different locations.
2. Facility Plot Plan: <input type="checkbox"/> Attached, Document ID: _____ <input type="checkbox"/> Not Applicable <input checked="" type="checkbox"/> Waiver Requested *Typical plant layout submitted with previous application.
3. Process Flow Diagram(s): <input type="checkbox"/> Attached, Document ID: _____ <input type="checkbox"/> Not Applicable <input checked="" type="checkbox"/> Waiver Requested Typical plant flow diagram layout submitted with previous application
4. Precautions to Prevent Emissions of Unconfined Particulate Matter: <input checked="" type="checkbox"/> Attached, Document ID: _____ <input type="checkbox"/> Not Applicable <input type="checkbox"/> Waiver Requested *Yard and stockpiles will be dampened as needed to minimize fugitive emissions.

III. EMISSIONS UNIT INFORMATION

A separate Emissions Unit Information Section (including subsections A and B) must be completed for each emissions unit addressed in this Application for Air Permit. If submitting the application form in hard copy, indicate, in the space provided at the top of each page, the number of this Emissions Unit Information Section and the total number of Emissions Unit Information Sections submitted as part of this application.

A. GENERAL EMISSIONS UNIT INFORMATION

Type of Emissions Unit Addressed in This Section

Check one:

- This Emissions Unit Information Section addresses, as a single emissions unit, a single process or production unit, or activity, which produces one or more air pollutants and which has at least one definable emission point (stack or vent).
- This Emissions Unit Information Section addresses, as a single emissions unit, a collectively-regulated group of process or production units and activities which has at least one definable emission point (stack or vent) but may also produce fugitive emissions.
- This Emissions Unit Information Section addresses, as a single emissions unit, one or more process or production units and activities which produce fugitive emissions only.

Emissions Unit Description and Status

1. Description of Emissions Unit Addressed in This Section (limit to 60 characters): The emissions unit addressed in this application consists of a concrete batch plant with a C & W Manufacturing model RA 140 baghouse system.	
2. Emissions Unit Identification Number: <input type="checkbox"/> No Corresponding ID <input type="checkbox"/> Unknown 001	
3. Emissions Unit Status Code: A	4. Emissions Unit Major Group SIC Code: 3273
5. Emissions Unit Comment (limit to 500 characters): 	

Emissions Unit Control Equipment

A.

1. Description (limit to 200 characters): C&W Manufacturing, Model CW-RA 140 Baghouse System	
2. Control Device or Method Code:	101

B.

1. Description (limit to 200 characters):	
2. Control Device or Method Code:	

C.

1. Description (limit to 200 characters):	
2. Control Device or Method Code:	

Emissions Unit Details

1. Initial Startup Date:	~April 1, 1999	
2. Long-term Reserve Shutdown Date:	Not Applicable	
3. Package Unit: CW-RA 140 Baghouse System		
Manufacturer: C&W Manufacturing Company	Model Number: RA 140	
4. Generator Nameplate Rating:	MW	
	Not Applicable	
5. Incinerator Information: This Section Is Not Applicable		
Dwell Temperature:		°F
Dwell Time:		seconds
Incinerator Afterburner Temperature:		°F

Emissions Unit Operating Capacity

1. Maximum Heat Input Rate: N/A	mmBtu/hr
2. Maximum Incineration Rate: N/A	lb/hr tons/day
3. Maximum Process or Throughput Rate: 200 Cubic Yards Of Concrete Per Hour Cement Silo/Cement Bin Filling Rate of Approximately 27 tons per hour	
4. Maximum Production Rate: 200 Cubic Yards Of Concrete Per Hour	
5. Operating Capacity Comment (limit to 200 characters):	

Emissions Unit Operating Schedule

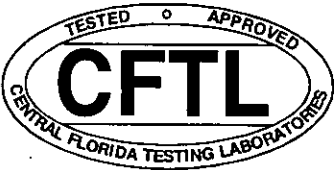
Requested Maximum Operating Schedule:	
24 hours/day	7 days/week
52 weeks/year	8760 hours/year

B. EMISSIONS UNIT SUPPLEMENTAL INFORMATION

This subsection of the Application for Air Permit form provides supplemental information related to the emissions unit addressed in this Emissions Unit Information Section. Supplemental information must be submitted as an attachment to each copy of the form, in hard-copy or computer-readable form.

Supplemental Requirements for All Applications

<p>1. Process Flow Diagram <input type="checkbox"/> Attached, Document ID: _____ <input type="checkbox"/> Not Applicable <input checked="" type="checkbox"/> Waiver Requested Typical plant flow diagram layout submitted with previous application</p>
<p>2. Fuel Analysis or Specification <input type="checkbox"/> Attached, Document ID: _____ <input checked="" type="checkbox"/> Not Applicable <input type="checkbox"/> Waiver Requested</p>
<p>3. Detailed Description of Control Equipment <input checked="" type="checkbox"/> Attached, Document ID: _____ <input type="checkbox"/> Not Applicable <input type="checkbox"/> Waiver Requested</p>
<p>4. Description of Stack Sampling Facilities <input type="checkbox"/> Attached, Document ID: _____ <input checked="" type="checkbox"/> Not Applicable <input type="checkbox"/> Waiver Requested</p>
<p>5. Compliance Test Report <input checked="" type="checkbox"/> Attached, Document ID: _____ <input type="checkbox"/> Previously submitted, Date: _____ <input type="checkbox"/> Not Applicable See attached visible emission test report.</p>
<p>6. Procedures for Startup and Shutdown <input type="checkbox"/> Attached, Document ID: _____ <input checked="" type="checkbox"/> Not Applicable</p>
<p>7. Operation and Maintenance Plan <input checked="" type="checkbox"/> Attached, Document ID: _____ <input type="checkbox"/> Not Applicable</p>
<p>8. Other Information Required by Rule or Statute <input type="checkbox"/> Attached, Document ID: _____ <input checked="" type="checkbox"/> Not Applicable</p>



CENTRAL FLORIDA TESTING LABORATORIES, INC.

VISIBLE EMISSIONS OBSERVATION FORM

METHOD USED (CIRCLE ONE) METHOD 9 203A 203B OTHER:

FORM NUMBER _____ PAGE 1 OF 1
 CONTINUED ON VEO NUMBER _____

COMPANY NAME John Carb, Inc.
 STREET ADDRESS Large Bay Blvd. and Waterway Blvd. CITY Tampa
 MAILING ADDRESS P.O. Box 1297
 CITY East Yulee STATE FL ZIP 32041-1297
 PHONE/KEY CONTACT _____ SOURCE PERMIT NUMBER 2770210-001-AC

OBSERVATION DATE May 27, 1999 START TIME 9:10 AM END TIME 9:57 AM

MIN	SEC				MIN	SEC			
	0	15	30	45		0	15	30	45
1	0	0	0	0	31	0	0	0	0
2	0	0	0	0	32	0	0	0	0
3	0	0	0	0	33	0	0	0	0
4	0	0	0	0	34	0	0	0	0
5	0	0	0	0	35	0	0	0	0
6	0	0	0	0	36	0	0	0	0
7	0	0	0	0	37	0	0	0	0
8	0	0	0	0	38	0	0	0	0
9	0	0	0	0	39	0	0	0	0
10	0	0	0	0	40	0	0	0	0
11	0	0	0	0	41	0	0	0	0
12	0	0	0	0	42	0	0	0	0
13	0	0	0	0	43	0	0	0	0
14	0	0	0	0	44	0	0	0	0
15	0	0	0	0	45	0	0	0	0
16	0	0	0	0	46	0	0	0	0
17	0	0	0	0	47	Plant Shut Down			
18	0	0	0	0	48				
19	0	0	0	0	49				
20	0	0	0	0	50				
21	0	0	0	0	51				
22	0	0	0	0	52				
23	0	0	0	0	53				
24	0	0	0	0	54				
25	0	0	0	0	55				
26	0	0	0	0	56				
27	0	0	0	0	57				
28	0	0	0	0	58				
29	0	0	0	0	59				
30	0	0	0	0	60				

PROCESS EQUIPMENT Rex Central Mix Concrete Plant OPERATING MODE Silo Filling at 27tph
 CONTROL EQUIPMENT Baghouse OPERATING MODE Continuous

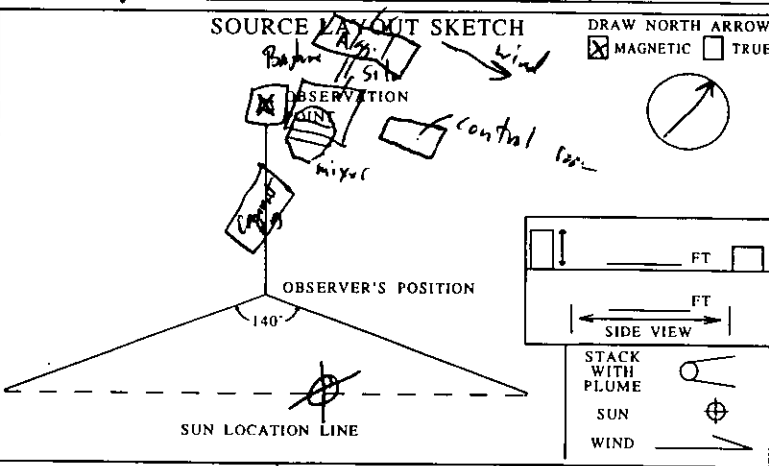
DESCRIBE EMISSION PT. Horizontal vent on top of baghouse

DISTANCE TO EMISS. PT. START ~100' END ~100' DIRECTION TO EMISS. PT. (DEGREES) START ~300° END ~300°
 HEIGHT OF EMISS. PT. START ~25' END ~25' HEIGHT TO EMISS. PT. REL. TO OBSERVER START ~20' END ~20'

VERTICAL ANGLE TO OBS. PT. START ~7° END ~7° DIRECTION TO OBS. PT. (DEGREES) START ~300° END ~300°
 APPROX. DISTANCE AND DIRECTION FROM EMISS. PT. TO OBSERV. PT. START Observed at Emission Point END same

DESCRIBE EMISSIONS START None END None
 EMISSION COLOR START NA END NA WATER DROPLET PLUME ATTACHED DETACHED NONE

DESCRIBE PLUME BACKGROUND START Skv END _____
 BACKGROUND COLOR START Blue END Blue SKY CONDITIONS START Scattered END Scattered
 WIND SPEED START ~4-10mph END ~4-10mph WIND DIRECTION START West END West
 AMBIENT TEMPERATURE START ~84°F END ~86°F WET BULB TEMP. _____ PERCENT RH _____



LAT: _____ LONG: _____ DECLINATION _____

AVERAGE OPACITY 0% HIGHEST SIX MINUTE INTERVAL 0%

ADDITIONAL INFORMATION No objectionable odors detected. Batching concrete and silo filling during test. Approximately 49 yards concrete batched during test.

OBSERVER'S NAME (PRINT) Russell B. Keith
 OBSERVER'S SIGNATURE Russell B. Keith DATE 5/27/1999
 ORGANIZATION CFTL
 CERTIFIED BY ETA - Tampa DATE 2/23/1999



C & W Mfg. & Sales Co., Inc.

7356 Hwy. 1187 • MANSFIELD, TEXAS 76063

SPECIFICATIONS FOR CW-RA-140

DUST COLLECTION SYSTEM

MODEL NUMBER - CW-RA-140

NUMBER OF BAGS - 72

BAG DIAMETER - 8"

BAG LENGTH - 114"

TOTAL FILTRATION AREA - 1,433 SQ.FT.

MIN. DESIGN - EFFICIENCY OF DUST COLLECTOR - 99.8%

AIR TO CLOTH RATIO - 4.54 ACFM/FT.²

FILTRATION VELOCITY - 4.54 FT/MIN

BLOWER H.P. - 15 H.P.

STATIC PRESSURE DROP (INCHES OF WATER) - 6"

AIR CAPACITY - 6,500 C.F.M.

OUTLET AREA - 2.34 FT.²

OUTLET VELOCITY - 46.3 FT/SEC

OUTLET MOISTURE CONTENT - IDEALLY ZERO

CLEANING MECHANISM - REVERSE AIR

FREQUENCY OF CLEANING - VARIABLE

*INLET DUST CONCENTRATION (GR/MIN) - 97,500 GR/MIN

*OUTLET EMISSIONS (GR/MIN) - 195 GR/MIN

*OUTLET DUST LOADING - .015 GR/CFM

* - THESE CALCULATIONS BASED ON INLET DUST LOADING
OF 15 GR/FT.³

**OPERATIONS & MAINTENANCE
PLAN**

John Carlo, Inc.

*C & W Manufacturing & Sales Company, Inc.
Model CW-RA-140 Dust Collection System*

GENERAL MAINTENANCE PROCEDURES

The exit of the baghouse collection unit is checked visually during silo filling and batching operations. Should any emissions be noticed, the dust collection is repaired promptly.

The baghouse collection system is thoroughly inspected on a monthly basis in accordance with the attached inspection report. Any maintenance deemed necessary during these inspections is performed directly.

All sprinklers systems are checked on a daily basis for leaks or repairs.

Recommended Spare Parts to Store On-Site

- 1.) Spare Bags
- 2.) Clamps for bags
- 3.) Seals and caulking materials
- 4.) Bag connecting rods
- 5.) Belt for Fan
- 6.) Sprinkler System Heads

MONTHLY INSPECTION REPORT

Component:

Check For:

Comments:

Bags

Worn, abraded, damaged bags, improper bag tension, loose, damaged or improper bag connections.

Fan

Proper lubrication, excessive vibration, Proper mounting (loose bolts, etc.)

Baghouse Structure

Loose bolts, cracks in welds, cracked, chipped or worn paint, corrosion. Accumulation of cement dust.

Collector Doors

Worn, loose, damaged or missing seals, properly closed and tight, accumulation of cement dust. Hinges secure and not worn.

Silo Structure

Loose bolts, cracks in welds, cracked, chipped or worn paint, corrosion. Accumulation of cement dust.

Plenum Plate

Abrasion, excessive wear, or holes, aligned properly.

Additional Comments:

Person Performing Inspection:

Date:

MAINTENANCE LOG

Description of Maintenance Performed

Date

Initials
