

# Department of Environmental Protection

ORIGINAL

## DIVISION OF AIR RESOURCES MANAGEMENT

### APPLICATION FOR AIR PERMIT - SHORT FORM

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

RECEIVED  
APR 29 1998  
BUREAU OF  
AIR REGULATION

#### 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.

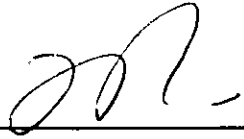
1. Facility Owner/Company Name: Anderson Columbia Company, Inc.	
2. Site Name: ACCI Marianna (Crusher #2)	
3. Facility Identification Number: 7775042 <span style="float: right;">[ ] Unknown</span>	
4. Facility Location: Street Address or Other Locator: 2316 Highway 71 City: Marianna <span style="margin-left: 100px;">County: Jackson</span> <span style="float: right;">Zip Code: 32448</span>	
5. Relocatable Facility? [ x ] Yes [ ] No	6. Existing Permitted Facility? [ x ] Yes [ ] No

#### Application Processing Information (DEP Use)

1. Date of Receipt of Application:	April 27, 1998
2. Permit Number:	7775042-002-AD RECEIVED

APR 27 1998  
Northwest Florida  
DEP

Owner/Authorized Representative

<p>1. Name and Title of Owner/Authorized Representative: Mr. T.H. McRae/President</p>
<p>2. Owner/Authorized Representative Mailing Address:           Organization/Firm: Anderson Columbia Company, Inc.          Street Address: P.O. Box 1829          City: Lake City                      State: Florida                      Zip Code: 32056-1829</p>
<p>3. Owner/Authorized Representative Telephone Numbers:          Telephone: (904) 752 - 7585                      Fax: (904) 755 - 5430</p>
<p>4. Owner/Authorized Representative Statement:</p> <p><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></p> <p style="text-align: center;">           _____          Signature       </p> <p style="text-align: right;">         _____          Date 4/20/98       </p>

\* 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	Astech crusher, conveyors, screens and feeders (fugitive particulate matter emissions).	AO2B
002	Caterpillar diesel engine drive (products of combustion).	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: 7775042-001-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: \$1,000.00

Not Applicable.

**Construction/Modification Information**

1. Description of Alterations:

2. Date of Commencement of Construction:

3/01/98

**Professional Engineer Certification**

1. Professional Engineer Name: E. Tony Williams, Jr.  Registration Number: 50580
2. Professional Engineer Mailing Address:  Organization/Firm: Anderson Columbia Company, Inc. Street Address: P.O. Box 1829 City: Lake City State: Florida Zip Code: 32056-1829
3. Professional Engineer Telephone Numbers: Telephone: (904) 752 - 7585 Fax: (904) 755 - 5430
4. Professional Engineer Statement:  <i>I, the undersigned, hereby certify, except as particularly noted herein*, 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 [ ] 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 <u>E. Tony Williams, Jr.</u> Date <u>4/20/98</u> (seal)

\* Attach any exception to certification statement.

*E. Tony Williams, Jr.*  
*4/20/98*

**Application Contact**

1. Name and Title of Application Contact: Mr. Scott R. Cleveland, P.G./Environmental Manager
2. Application Contact Mailing Address:  Organization/Firm: Anderson Columbia Company, Inc. Street Address: P.O. Box 1386 City: Lake City                      State: Florida                      Zip Code: 32056-1386
3. Application Contact Telephone Numbers: Telephone: (904) 755 - 1196                      Fax: (904) 758 - 9050

**Application Comment**



**Facility Regulatory Classifications**

1. Small Business Stationary Source? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input 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 checked="" type="checkbox"/> Attached, Document ID: <u>Fig. 1</u> <input type="checkbox"/> Not Applicable <input type="checkbox"/> Waiver Requested
2. Facility Plot Plan: <input checked="" type="checkbox"/> Attached, Document ID: <u>Fig. 2</u> <input type="checkbox"/> Not Applicable <input type="checkbox"/> Waiver Requested
3. Process Flow Diagram(s): <input checked="" type="checkbox"/> Attached, Document ID: <u>Fig. 3</u> <input type="checkbox"/> Not Applicable <input type="checkbox"/> Waiver Requested
4. Precautions to Prevent Emissions of Unconfined Particulate Matter: <input checked="" type="checkbox"/> Attached, Document ID: <u>Att. 1</u> <input type="checkbox"/> Not Applicable <input type="checkbox"/> Waiver Requested

**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): Astech crusher, conveyors, screens and feeder ( fugitive particulate matter emissions).	
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: 14
5. Emissions Unit Comment (limit to 500 characters): A spray bar will be used, as needed, to control fugitive emissions when crushing concrete.	

**Emissions Unit Control Equipment**

**A.**

1. Description (limit to 200 characters): Dust suppression by water sprays.
2. Control Device or Method Code: 061

**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: 4/01/98		
2. Long-term Reserve Shutdown Date: N/A		
3. Package Unit: Astech Hammermill Crusher Manufacturer:		Model Number:
4. Generator Nameplate Rating: N/A	MW	
5. Incinerator Information: N/A		
	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 TPH	
4. Maximum Production Rate: 200 TPH	
5. Operating Capacity Comment (limit to 200 characters):	

**Emissions Unit Operating Schedule**

Requested Maximum Operating Schedule:	
hours/day	days/week
weeks/year	2000 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**

1. Process Flow Diagram <input checked="" type="checkbox"/> Attached, Document ID: <u>Fig. 3</u> <input type="checkbox"/> Not Applicable <input type="checkbox"/> Waiver Requested
2. Fuel Analysis or Specification <input type="checkbox"/> Attached, Document ID: _____ <input checked="" type="checkbox"/> Not Applicable <input type="checkbox"/> Waiver Requested
3. Detailed Description of Control Equipment <input type="checkbox"/> Attached, Document ID: _____ <input checked="" type="checkbox"/> Not Applicable <input type="checkbox"/> Waiver Requested
4. Description of Stack Sampling Facilities <input type="checkbox"/> Attached, Document ID: _____ <input checked="" type="checkbox"/> Not Applicable <input type="checkbox"/> Waiver Requested
5. Compliance Test Report <input checked="" type="checkbox"/> Attached, Document ID: <u>Att. 2</u>  <input type="checkbox"/> Previously submitted, Date: _____  <input type="checkbox"/> Not Applicable
6. Procedures for Startup and Shutdown <input type="checkbox"/> Attached, Document ID: _____ <input checked="" type="checkbox"/> Not Applicable
7. Operation and Maintenance Plan <input type="checkbox"/> Attached, Document ID: _____ <input checked="" type="checkbox"/> Not Applicable
8. Other Information Required by Rule or Statute <input type="checkbox"/> Attached, Document ID: _____ <input checked="" type="checkbox"/> Not Applicable

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):  Caterpillar diesel engine drive (products of combustion).	
2. Emissions Unit Identification Number: <input type="checkbox"/> No Corresponding ID <input type="checkbox"/> Unknown 002	
3. Emissions Unit Status Code: A	4. Emissions Unit Major Group SIC Code: 14
5. Emissions Unit Comment (limit to 500 characters):          	

**Emissions Unit Control Equipment**

A.

1. Description (limit to 200 characters):	None
2. Control Device or Method Code:	

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: 4/01/98		
2. Long-term Reserve Shutdown Date: N/A		
3. Package Unit: Caterpillar diesel engine		Model Number:
Manufacturer:		MW
4. Generator Nameplate Rating: N/A		
5. Incinerator Information: N/A		
Dwell Temperature:		°F
Dwell Time:		seconds
Incinerator Afterburner Temperature:		°F

**Emissions Unit Operating Capacity**

1. Maximum Heat Input Rate: 3		mmBtu/hr
2. Maximum Incineration Rate: N/A	lb/hr	tons/day
3. Maximum Process or Throughput Rate: 20 GPY		
4. Maximum Production Rate: N/A		
5. Operating Capacity Comment (limit to 200 characters):		

**Emissions Unit Operating Schedule**

Requested Maximum Operating Schedule:		
	hours/day	days/week
	weeks/year	2000 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**

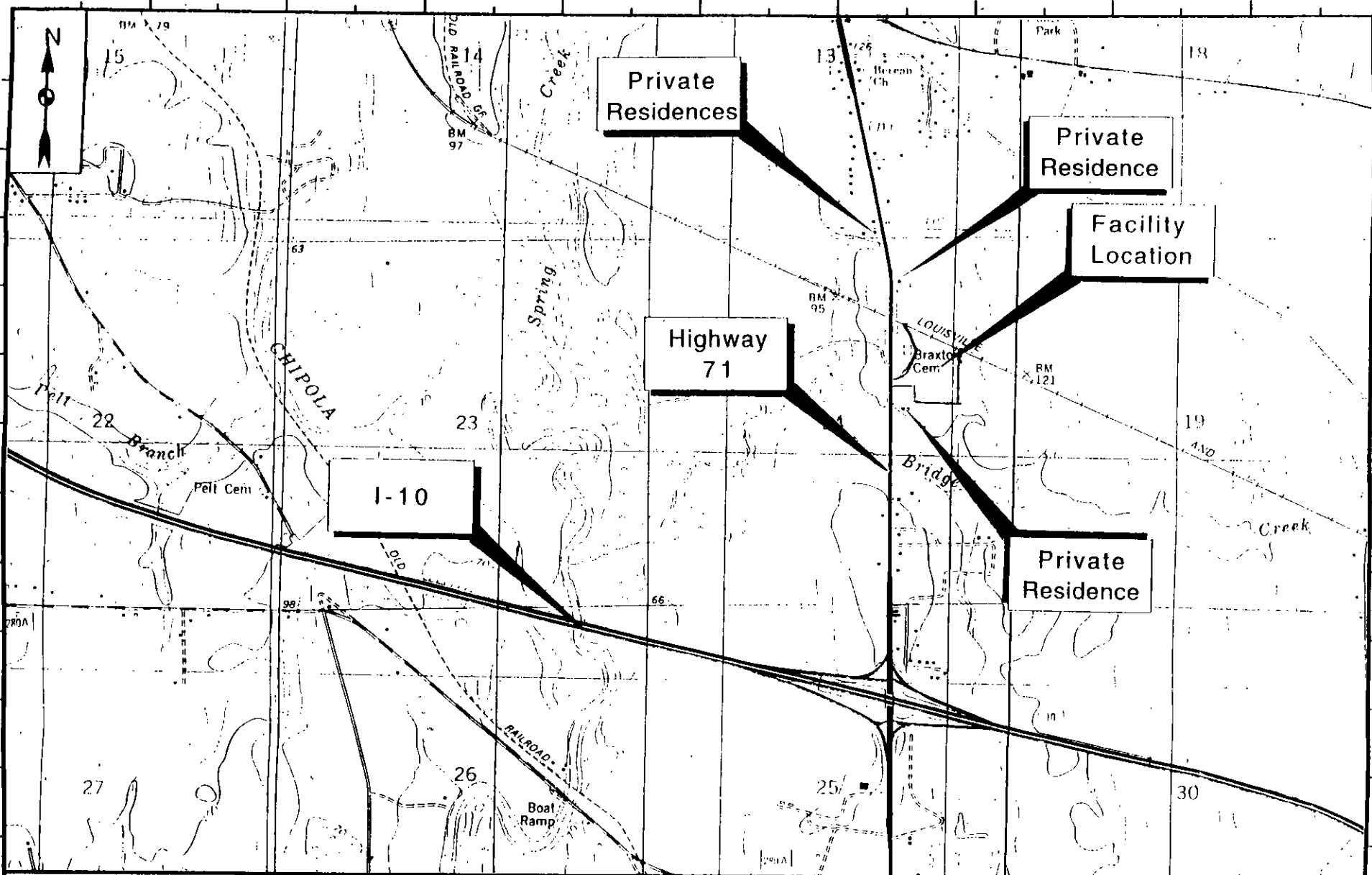
<p>1. Process Flow Diagram  <input checked="" type="checkbox"/> Attached, Document ID: <u>Fig. 3</u>    <input type="checkbox"/> Not Applicable    <input type="checkbox"/> Waiver Requested</p>
<p>2. Fuel Analysis or Specification  <input checked="" type="checkbox"/> Attached, Document ID: <u>Att. 3</u>    <input type="checkbox"/> Not Applicable    <input type="checkbox"/> Waiver Requested</p>
<p>3. Detailed Description of Control Equipment  <input type="checkbox"/> Attached, Document ID: _____    <input checked="" 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: <u>Att. 2</u>   <input type="checkbox"/> Previously submitted, Date: _____   <input type="checkbox"/> Not Applicable</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 type="checkbox"/> Attached, Document ID: _____    <input checked="" 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>





# Figures

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**LEGEND/REF. DRWG'S**

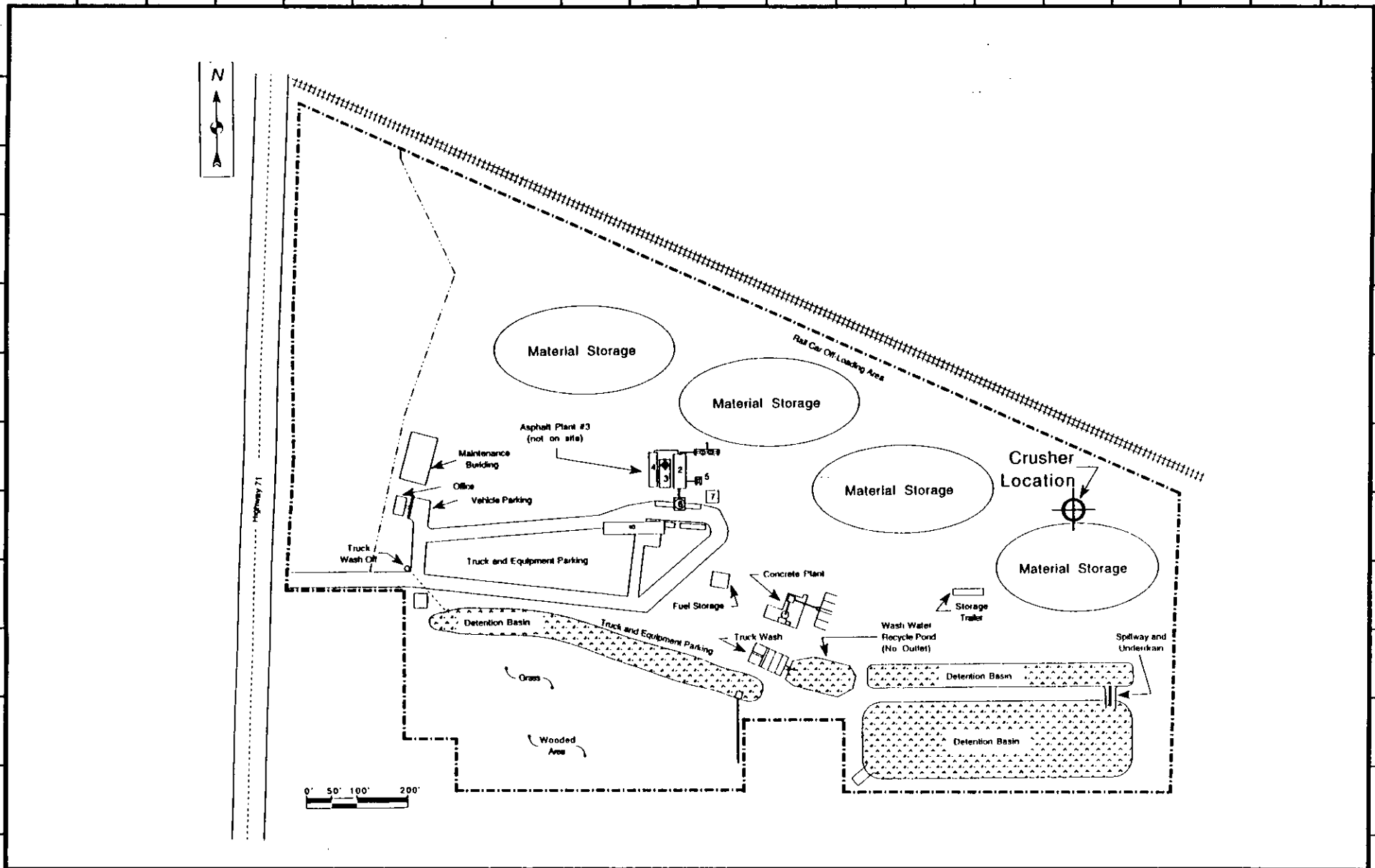
Map section taken from USGS 7.5' Series  
 Quadrangle - Oakdale, Fl.

**ANDERSON COLUMBIA ENVIRONMENTAL, INC.**  
 P. O. BOX 1386 LAKE CITY, FLORIDA 32056 (904) 755-1196

DR. SC. \_\_\_\_\_ CH'D SEC. \_\_\_\_\_ DR. APP. \_\_\_\_\_  
 ENGR. \_\_\_\_\_ ENGR'G DEPT. \_\_\_\_\_  
 DATE 4/8/98 SCALE 1: 24 000

Anderson Columbia Company, Inc  
 Crusher #2  
 2316 Highway 71, Marianna, Florida  
 Area Map

**DRAWING NO.: FIGURE 1**



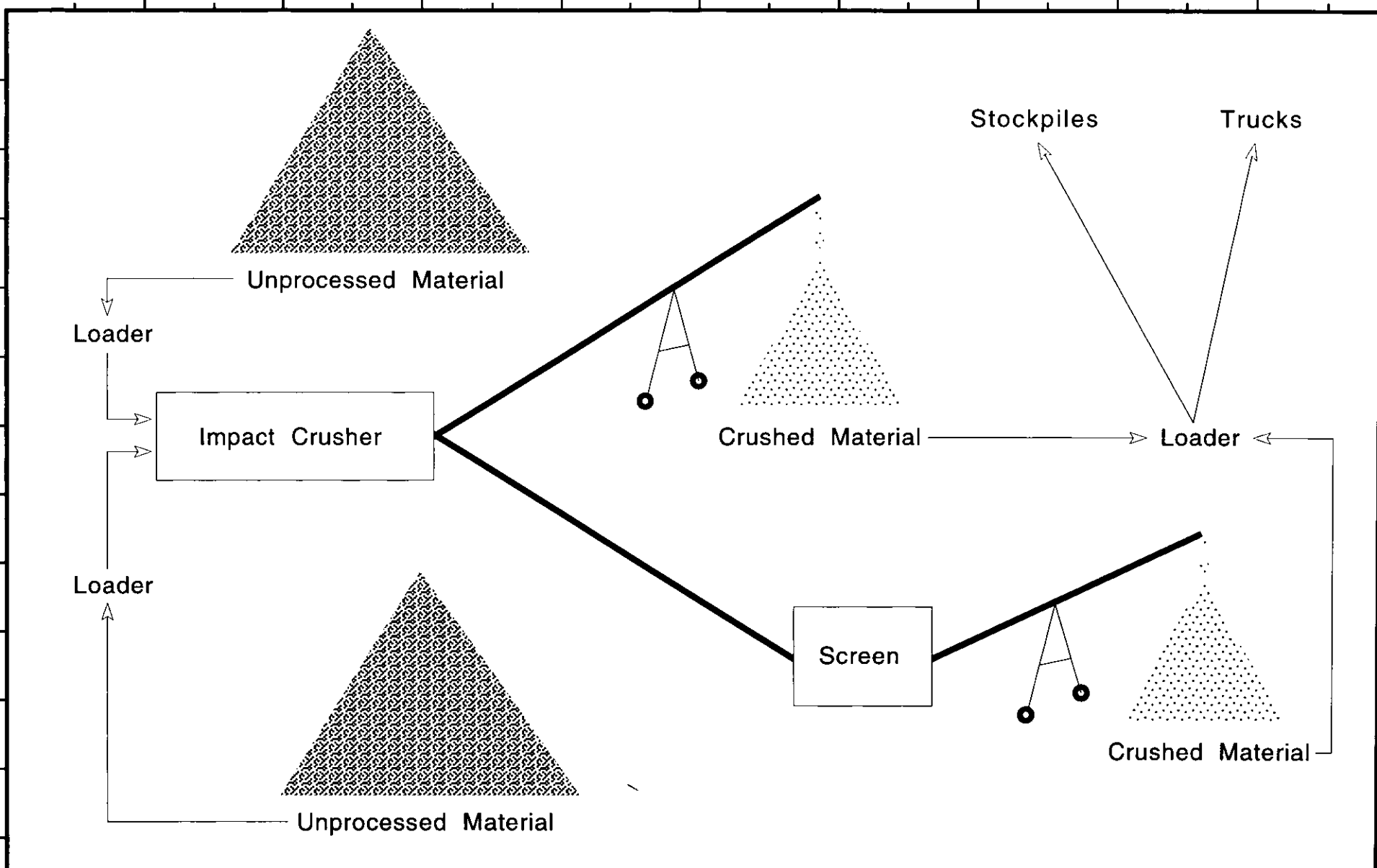
**LEGEND/REF. DRWG'S**

**ANDERSON COLUMBIA  
ENVIRONMENTAL, INC.**  
P. O. BOX 1386 LAKE CITY, FLORIDA 32056 (904) 755-1196

Anderson Columbia Company, Inc  
Crusher #2  
2316 Highway 71, Marianna, Florida  
Plot Plan

DR. SC \_\_\_\_\_ CH'D. SRC \_\_\_\_\_ DR. APP. \_\_\_\_\_  
ENGR. \_\_\_\_\_ ENGR'G DEPT. \_\_\_\_\_  
DATE 4/7/98 SCALE \_\_\_\_\_

**DRAWING NO.: FIGURE 2**



**LEGEND/REF. DRWG'S**

**ANDERSON COLUMBIA**

ENVIRONMENTAL, INC.  
 P. O. BOX 1386 LAKE CITY, FLORIDA 32056 (904) 755-1196

Anderson Columbia Company, Inc

Crusher #2

2316 Highway 71, Marianna, Florida

Process Flow Diagram

DR. SC \_\_\_\_\_ CH'D. SBC \_\_\_\_\_ DR. APP. \_\_\_\_\_

ENGR. \_\_\_\_\_ ENGR'G DEPT. \_\_\_\_\_

DATE 4/7/98 SCALE NTS \_\_\_\_\_

**DRAWING NO.: FIGURE 3**



# Attachment 1

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## Fugitive Emission Plan

## **Fugitive Emission Plan**

Fugitive emissions from the crusher will be controlled by a water spray on an as needed basis when concrete is being crushed.

Access roadway and ingress/egress emissions will be controlled by the application of water and the establishment of a speed limit.



## Attachment 2

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# Compliance Test Report

**SOURCE TEST REPORT**

**VISIBLE EMISSIONS**

**FROM**

**CONCRETE/ASPHALT CRUSHER**

**ANDERSON COLUMBIA COMPANY INC.  
LOCATED AT  
END OF PROGRESS ROAD  
SANTA ROSA INDUSTRIAL PARK  
MILTON, FLORIDA 32530**

**APRIL 9, 1998**

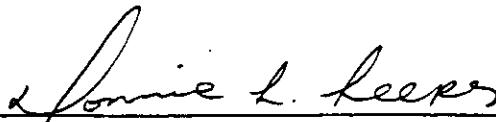
**FDEP PERMIT NUMBER  
7775029-002-AC**

**PREPARED FOR**

**ANDERSON COLUMBIA ENVIRONMENTAL  
2 GUERDON ROAD  
LAKE CITY, FLORIDA 32056**

**PREPARED BY**

**ASTECH ENVIRONMENTAL SERVICES  
13170-58 ATLANTIC BLVD. SUITE 131  
JACKSONVILLE, FLORIDA 32225  
(904) 221-7174**



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**DONNIE L. LEEPER**



SOURCE NAME  
**Anderson Columbia Co. Inc.**

ADDRESS  
**END of Progress Road / SANTA ROSA IND. PARK**

CITY **Milton** STATE **FL** ZIP **32530**

PHONE **(904) 755-1196** SOURCE ID NUMBER **7775027-002-AC**

PROCESS EQUIPMENT **Primary Crusher** OPERATING MODE **150 TPH**

CONTROL EQUIPMENT **Water Spray** OPERATING MODE **As Needed**

DESCRIBE EMISSION POINT  
START **5' X 10' Loading Bin STOP Surroundings**

HEIGHT ABOVE GROUND LEVEL  
START **12' STOP Same** HEIGHT RELATIVE TO OBSERVER  
START **7' STOP Same**

DISTANCE FROM OBSERVER  
START **30' STOP Same** DIRECTION FROM OBSERVER  
START **NW 320° STOP Same**

DESCRIBE EMISSIONS  
START **Clear** STOP **Same**

EMISSION COLOR  
START **Clear** STOP **Same** PLUME TYPE CONTINUOUS  FUGITIVE  INTERMITTENT

WATER DROPLETS PRESENT  
NO  YES  IF WATER DROPLET PLUME ATTACHED  DETACHED

POINT IN THE PLUME AT WHICH OPACITY WAS DETERMINED  
START **1 foot Above Hopper** STOP **Same**

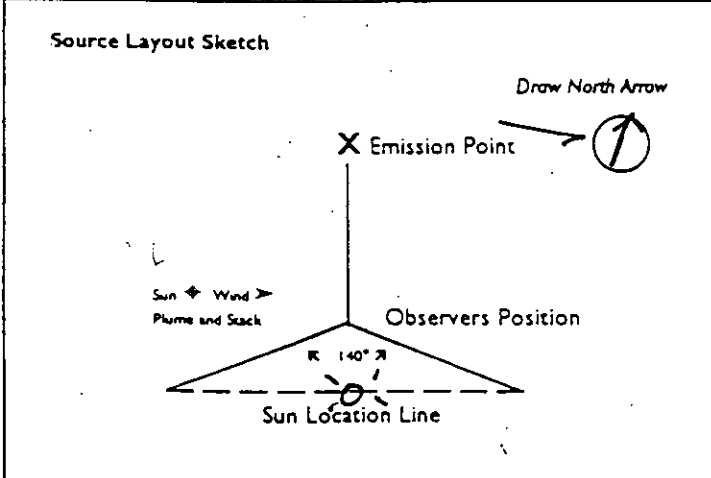
DESCRIBE BACKGROUND  
START **SKY** STOP **Same**

BACKGROUND COLOR  
START **blue** STOP **Same** SKY CONDITIONS  
START **Clear** STOP **Same**

WIND SPEED  
START **5-10 mph** STOP **Same** WIND DIRECTION  
START **West** STOP **Same**

AMBIENT TEMP  
START \_\_\_\_\_ STOP \_\_\_\_\_ WET BULB TEMP \_\_\_\_\_ RH. percent \_\_\_\_\_

OBSERVATION DATE		START TIME				STOP TIME			
4-9-98		0910				0940			
MIN.	SEC				MIN.	SEC			
	0	15	30	45		0	15	30	45
1	0	0	0	0	31				
2	0	0	0	0	32				
3	0	0	0	0	33				
4	0	0	0	*	34				
5	0	0	0	5	35				
6	0	0	0	0	36				
7	0	0	0	0	37				
8	0	0	0	0	38				
9	0	0	0	0	39				
10	0	0	0	0	40				
11	0	0	0	0	41				
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13	0	0	0	0	43				
14	0	0	0	0	44				
15	0	0	0	0	45				
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17	0	0	0	0	47				
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				



AVERAGE OPACITY FOR HIGHEST PERIOD **0.20%** NUMBER OF READINGS ABOVE **20** X WERE **0**

RANGE OF OPACITY READINGS  
MINIMUM **0** MAXIMUM **0**

OBSERVER'S NAME (PRINT) **Donnie Leeper**

OBSERVER'S SIGNATURE **Donnie Leeper** DATE **4-9-98**

I HAVE RECEIVED A COPY OF THESE OPACITY OBSERVATIONS  
SIGNATURE \_\_\_\_\_

CERTIFIED BY **E.T.A.** DATE **12-3-97**

VERIFIED BY \_\_\_\_\_ DATE \_\_\_\_\_

SOURCE NAME  
Anderson Columbia Co. Inc.

ADDRESS  
End of Progress Road / Santa Rosa Ind. Park

CITY Milton STATE FL ZIP 32530

PHONE (904) 755-1196 SOURCE ID NUMBER 7775029-002-AC

PROCESS EQUIPMENT Primary Screener OPERATING MODE 50 TPH

CONTROL EQUIPMENT Water Spray OPERATING MODE As Needed

DESCRIBE EMISSION POINT  
START 6' X 5' Screen STOP Hopper Same

HEIGHT ABOVE GROUND LEVEL START 12' STOP Same HEIGHT RELATIVE TO OBSERVER START 7' STOP Same

DISTANCE FROM OBSERVER START 75' STOP Same DIRECTION FROM OBSERVER START NW 310° STOP Same

DESCRIBE EMISSIONS  
START Clear STOP Same

EMISSION COLOR START Clear STOP Same PLUME TYPE CONTINUOUS  RUGITIVE  INTERMITTENT

WATER DROPLETS PRESENT NO  YES  IF WATER DROPLET PLUME ATTACHED  DETACHED

POINT IN THE PLUME AT WHICH OPACITY WAS DETERMINED START Same STOP between conveyor belt and top of screener

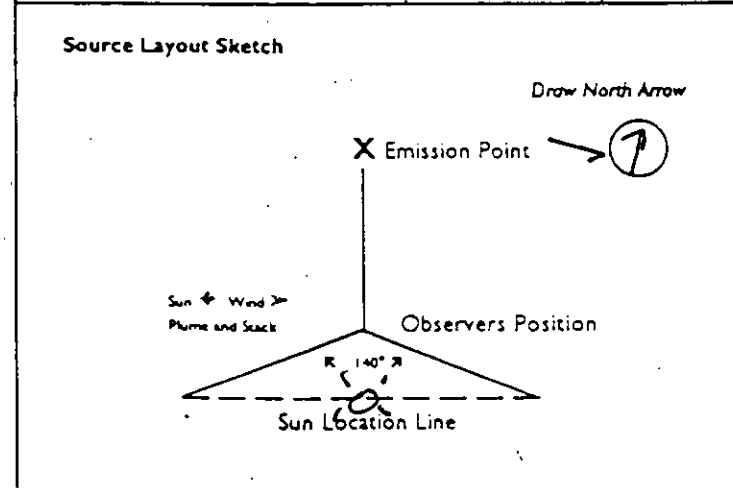
DESCRIBE BACKGROUND  
START Conveyor belt STOP Same

BACKGROUND COLOR START black STOP Same SKY CONDITIONS START Clear STOP Same

WIND SPEED START 5-10 mph STOP Same WIND DIRECTION START West STOP Same

AMBIENT TEMP START STOP WET BULB TEMP RH.percent

OBSERVATION DATE		START TIME				STOP TIME					
4-9-98		0910				0940					
MIN	SEC	0	15	30	45	MIN	SEC	0	15	30	45
1	0	0	0	0	0	31					
2	0	0	0	0	*	32					
3	0	0	0	0	0	33					
4	0	0	0	0	0	34					
5	0	0	0	0	0	35					
6	*	0	0	0	0	36					
7	0	0	0	0	0	37					
8	0	0	0	0	0	38					
9	0	0	0	0	0	39					
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11	0	0	0	0	*	41					
12	*	0	0	0	0	42					
13	0	*	0	0	0	43					
14	0	0	*	0	0	44					
15	0	0	0	0	0	45					
16	0	0	0	0	0	46					
17	0	0	0	0	0	47					
18	0	0	0	0	0	48					
19	0	0	0	0	0	49					
20	0	0	0	0	0	50					
21	*	0	0	0	0	51					
22	0	0	0	0	0	52					
23	0	0	0	0	0	53					
24	0	0	0	0	0	54					
25	0	0	0	0	0	55					
26	0	0	0	0	0	56					
27	*	*	0	0	0	57					
28	0	*	0	0	0	58					
29	0	0	*	*	0	59					
30	0	0	0	0	0	60					



COMMENTS  
\* = Front Loader in way of screener @ time of reading

I HAVE RECEIVED A COPY OF THESE OPACITY OBSERVATIONS  
SIGNATURE

TITLE DATE

AVERAGE OPACITY FOR HIGHEST PERIOD 0 % NUMBER OF READINGS ABOVE 20 % WERE 0

RANGE OF OPACITY READINGS  
MINIMUM 0 MAXIMUM 0

OBSERVER'S NAME (PRINT) Donnie Leeper

OBSERVER'S SIGNATURE Donnie Leeper DATE 4-9-98

CERTIFIED BY E.T.A. DATE 12-3-97

VERIFIED BY DATE

SOURCE NAME  
ANDERSON COLUMBIA CO. INC.

ADDRESS  
END of Progress Rd. SANTA ROSA PARK IND.

CITY  
Milton

STATE  
FL

ZIP  
32530

PHONE  
(904) 755-1196

SOURCE ID NUMBER  
7775029-002-AL

PROCESS EQUIPMENT  
Conveyor belt Exp

OPERATING MODE  
150 TPH

CONTROL EQUIPMENT  
Water Spray

OPERATING MODE  
AS needed

DESCRIBE EMISSION POINT  
START  
Conveyor belt w/ crushed ASPHALT going to pile

HEIGHT ABOVE GROUND LEVEL  
START 30' STOP Same

HEIGHT RELATIVE TO OBSERVER  
START 25' STOP Same

DISTANCE FROM OBSERVER  
START 110' STOP Same

DIRECTION FROM OBSERVER  
START NW 270° STOP Same

DESCRIBE EMISSIONS  
START Clear STOP Same

EMISSION COLOR  
START Clear STOP Same

PLUME TYPE CONTINUOUS  RUGITIVE  INTERMITTENT

WATER DROPLETS PRESENT  
NONE  YES

IF WATER DROPLET PLUME ATTACHED  DETACHED

POINT IN THE PLUME AT WHICH OPACITY WAS DETERMINED  
START between end of STOP Same

DESCRIBE BACKGROUND  
START Sky STOP Same

BACKGROUND COLOR  
START blue STOP Same

SKY CONDITIONS  
START Clear STOP Same

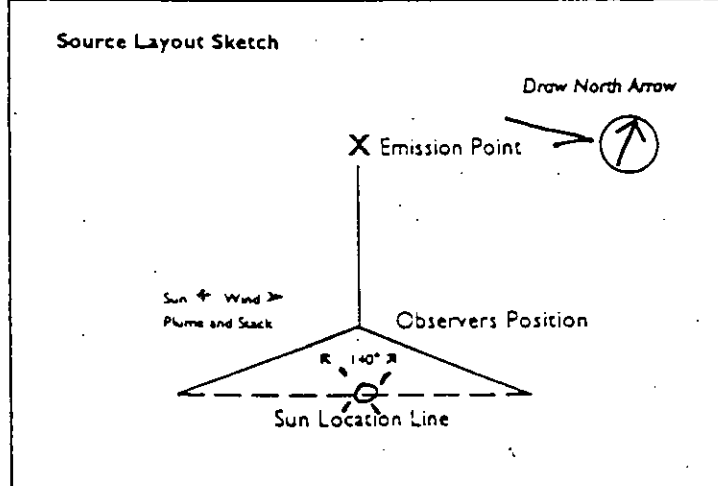
WIND SPEED  
START 5-10 mph STOP Same

WIND DIRECTION  
START West STOP Same

AMBIENT TEMP  
START STOP

WET BULB TEMP  
RH.percent

OBSERVATION DATE		START TIME				STOP TIME			
4-9-98		0910				0940			
MIN	OC				MIN	OC			
	0	15	30	45		0	15	30	45
1	0	0	0	0	31				
2	0	0	0	0	32				
3	0	0	0	0	33				
4	0	0	0	0	34				
5	0	0	0	0	35				
6	0	0	0	0	36				
7	0	0	0	0	37				
8	0	0	0	0	38				
9	0	0	0	0	39				
10	0	0	0	0	40				
11	0	0	0	0	41				
12	0	0	0	0	42				
13	0	0	0	0	43				
14	0	0	0	0	44				
15	0	0	0	0	45				
16	0	0	0	0	46				
17	0	0	0	0	47				
18	0	0	0	0	48				
19	0	0	0	0	49				
20	0	0	0	0	50				
21	5	0	5	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	10	58				
29	0	0	0	0	59				
30	0	0	0	0	60				



COMMENTS  
\* \* = Front Loader in way of conveyor @ times of reading

I HAVE RECEIVED A COPY OF THESE OPACITY OBSERVATIONS

SIGNATURE

TITLE

DATE

AVERAGE OPACITY FOR HIGHEST PERIOD  
0.42%

NUMBER OF READINGS ABOVE  
20 % WERE 0

RANGE OF OPACITY READINGS  
MINIMUM 0 MAXIMUM 0

OBSERVER'S NAME (PRINT)  
Donnie Leeper

OBSERVER'S SIGNATURE  
Donnie Leeper

DATE  
4-9-98

CERTIFIED BY  
E.T.A.

DATE  
12-3-97

VERIFIED BY

DATE

# VISIBLE EMISSIONS EVALUATOR

*This is to certify that*

*Donnie Leeper*

*met the specifications of Federal Reference Method 9 and qualified 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, North Carolina. This certificate is valid for six months from date of issue.*

*Thomas Gore*  
\_\_\_\_\_  
President

*Will Lee*  
\_\_\_\_\_  
Vice President

*David B. Savage, Jr.*  
\_\_\_\_\_  
Program Manager

262288

\_\_\_\_\_  
Certificate Number

Jacksonville, Florida

\_\_\_\_\_  
Location

December 3, 1997

\_\_\_\_\_  
Date of Issue

# VISIBLE EMISSIONS EVALUATION

*This is to certify that*

*Donnie Leeper*

*did complete a course in the methods of determining opacity of visible emissions from sources as specified by Federal Reference Method 9 conducted by Eastern Technical Associates of Raleigh, North Carolina.*

*William H. Charles*

Course Moderator

*Jacksonville, Florida*

Location

*June 4, 1996*

Date



**EASTERN  
TECHNICAL  
ASSOCIATES**

919-878-3188

DATE: JUNE 25, 1996  
TO: FIELD CERTIFIERS  
FROM: EASTERN TECHNICAL ASSOCIATES  
REGARDING: JACKSONVILLE, FLORIDA  
VISIBLE EMISSIONS TRAINING PROGRAM

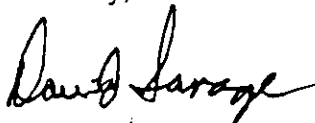
ETA is enclosing your certificates for Field Certification (Visible Emissions Evaluator) and/or Classroom Lecture attendance (Visible Emissions Evaluation). For your convenience, we have also enclosed a wallet card to indicate certification in the Field.

The following person(s) achieved a written test grade of 88% or more and therefore, if they maintain continuous field certification, are not required to attend the lecture again until thirty-six (36) months from this school. If an individual fails to recertify on any six (6) months anniversary, they would need to take the lecture at the next smoke school they attend.

<sup>Leeper</sup>  
DONNIE ~~PEPERS~~- D.P. ASTECH ENVIRONMENTAL SERVICES

We wish to congratulate you and invite you to recertify with us again. If we can be of further assistance, please do not hesitate to call.

Sincerely,



David B. Savage  
Manager  
Visible Emissions Program

Enclosure

P.O. BOX 58495  
RALEIGH, NC 27658



# Attachment 3

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## Fuel Analysis

## LABORATORY SAMPLE REPORT

UNIT ROUTINE LAB TERM 29  
 SAMPLE No. 2 DIESEL FUEL  
 DATE  
 SEQ # 63  
 LO TR114/Hp Diesel  
 BA 29F169669P07B015

	RESULTS	LOW SPEC.	HIGH SPEC.
INITIAL BP	374		
10%	433		
50%	523		
90%	616		
ENDPOINT	680		
% RESIDUE	1.0		
% LOSS	1.0		
SULFUR	0.18		
B.S.M.	N/A		
FLASH POINT	154		
GRAVITY @ 60°	32.5		
CETANE INDEX	44.5		
RESULTS	PASS		
REMARKS LINE 1	Product meets state spec on		
REMARKS LINE 2	all tests performed		
NAME OF OWNER	Southeast Terminals		
ADDRESS	P.O. Box 427		
CITY, STATE, ZIP	1909 E. Shotwell St. Bainbridge, Ga 31717		