

8-7-2000

GENERAL OFFICE: 155 EAST 21ST STREET / P.O. BOX 4667 / JACKSONVILLE, FLORIDA 32

**FLORIDA ROCK INDUSTRIES INC** MINING, READY MIX CONCRETE, AND CONSTRUCTION

B:11,  
Place a copy in  
each file.  
J. Leffler,  
B...

August 4, 2000

RECEIVED

AUG 07 2000

Mr. C. H. Fancy, P.E.  
Chief, Bureau of Air Regulation  
Florida Department of Environmental Protection  
2600 Blair Stone Road, Mail Station 5505  
Tallahassee, Florida 32399-2400

BUREAU OF AIR REGULATION

Re: Withdrawal of Applications for Air Construction Permits  
For Relocatable Facilities and Processing Fee Refunds  
Florida Rock Industries, Inc.

Dear Mr. Fancy:

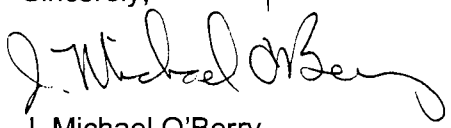
Due to our decision, in consultation with your staff, to include all relocatable processing equipment in the stationary permits issued to each of Florida Rock's rock mining operations, we hereby withdraw the following portable facility permit applications and request the refund of their respective processing fees:

- 1110072-010-AC ✓
- 1110072-011-AO ✓
- 1110072-012-AC ✓
- 1110072-013-AC ✓
- 0210018-004-AC ✓
- 7775111-001-AC ✓

We would like to thank you and your staff for your assistance in this matter. Specifically, Bruce Mitchell and Bill Leffler thoughtfully considered this somewhat complicated situation and provided sound advice to us concerning the appropriate method of handling the permitting of this equipment.

Please feel free to contact me if you have any questions regarding this matter.

Sincerely,



J. Michael O'Berry  
Manager, Environmental  
Permitting Services

/jmo'b

cc: Roland Boney  
Don Darley  
Steve Cullen – Koogler & Associates



RECEIVED

JAN 18 2000

BUREAU OF AIR REGULATION

January 12, 2000

Mr. Bill Leffler  
Florida Department of Environmental Protection  
Twin Towers Office Bldg.  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

Re: Agent Designation

Dear Mr. Leffler:

Mr. J. Michael O'Berry is hereby authorized to act as agent on behalf of Florida Rock Industries, Inc. in all matters relating to the acquisition of permits and other governmental approvals. You should direct all inquiries regarding permitting matters directly to his attention at the letterhead address and telephone number.

Sincerely,

A handwritten signature in black ink, appearing to read 'T. S. Baker II', written in a cursive style.

Thompson S. Baker II  
Vice President

/jmo'b

**Owner/Authorized Representative**

1. Name and Title of Owner/Authorized Representative: <b>J. Michael O'Berry – Manager, Environmental Permitting Services</b>
2. Owner/Authorized Representative Mailing Address: Organization/Firm: <b>Florida Rock Industries, Inc.</b> Street Address: <b>P.O. Box 4667</b> City: <b>Jacksonville</b> State: <b>FL</b> Zip Code: <b>32201</b>
3. Owner/Authorized Representative Telephone Numbers: Telephone: <b>( 904 ) 355-1781</b> Fax: <b>( 904 ) 355-0469</b>
4. Owner/Authorized Representative Statement:  <i>I, the undersigned, am the owner or authorized representative* of the facility addressed in this application. 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. The air pollutant emissions units and air pollution control equipment described in this application will be operated and maintained 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.

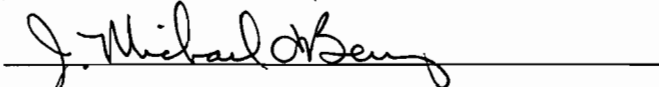
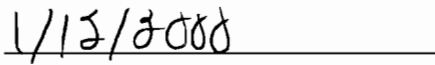
**Professional Engineer Certification**

1. Professional Engineer Name: <b>Steven C. Cullen, P.E.</b> Registration Number: <b>45188</b>
2. Professional Engineer Mailing Address: Organization/Firm: <b>Koogler &amp; Associates</b> Street Address: <b>4014 NW 13<sup>th</sup> Street</b> City: <b>Gainesville</b> State: <b>FL</b> Zip Code: <b>32609</b>
3. Professional Engineer Telephone Numbers: Telephone: <b>( 352 ) 377-5822</b> Fax: <b>( 352 ) 377-7158</b>

**RECEIVED**

**JAN 18 2000**

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1. Name and Title of Owner/Authorized Representative: <b>J. Michael O'Berry – Manager, Environmental Permitting Services</b>
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8-7-2000

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J. Michael O'Berry

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Florida Department of Environmental Protection  
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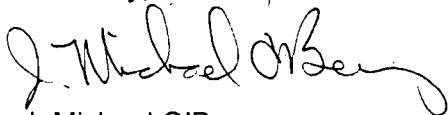
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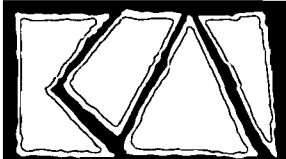
Sincerely,



J. Michael O'Berry  
Manager, Environmental  
Permitting Services

/jmo'b

- cc: Roland Boney
- Don Darley
- Steve Cullen – Koogler & Associates



**KOGLER & ASSOCIATES**  
**ENVIRONMENTAL SERVICES**

4014 NW THIRTEENTH STREET  
GAINESVILLE, FLORIDA 32609  
352/377-5822 ■ FAX/377-7158

**KA187-99-11**  
**January 25, 2000**

**RECEIVED**

**FEB 09 2000**

**BUREAU OF AIR REGULATION**

Bill Leffler  
Florida Department of Environmental Protection  
Twin Towers Office Building  
2600 Blair Stone Road  
Tallahassee, FL 32399-2400

**SUBJECT:** Florida Rock Industries, Inc.  
Application for Air Construction Permit  
Relocatable Cedar Rapids Base Rock Crushing Unit

Dear Mr. Leffler:

Enclosed please find four (4) copies of the referenced application. A check for \$1250 is enclosed as the applicable processing fee.

Please call me if you have any questions at (352) 377-5822.

Sincerely,

Koogler & Associates

Kenneth F. Conwell, Project Engineer

Encl.

cc: Mike O'Berry--Florida Rock Industries, Inc.



# Department of Environmental Protection

## Division of Air Resources Management

### APPLICATION FOR AIR PERMIT - NON-TITLE V SOURCE

See Instructions for Form No. 62-210.900(3)

#### I. APPLICATION INFORMATION

##### Identification of Facility

1. Facility Owner/Company Name: <b>Florida Rock Industries, Inc.</b>	
2. Site Name: <b>Cedar Rapids Base Rock Portable Crushing Unit</b>	
3. Facility Identification Number: [ ] Unknown	
4. Facility Location: Street Address or Other Locator: <b>14341 Alico Road</b> City: <b>Fort Myers</b> County: <b>Lee</b> Zip Code: <b>33913</b>	
5. Relocatable Facility? [ <input checked="" type="checkbox"/> ] Yes [ ] No	6. Existing Permitted Facility? [ <input checked="" type="checkbox"/> ] Yes [ ] No

##### Application Contact

1. Name and Title of Application Contact: <b>Ken Conwell, Project Engineer</b>	
2. Application Contact Mailing Address: Organization/Firm: <b>Koogler &amp; Associates</b> Street Address: <b>4014 NW 13<sup>th</sup> Street</b> City: <b>Gainesville</b> State: <b>FL</b> Zip Code: <b>32609</b>	
3. Application Contact Telephone Numbers: Telephone: <b>(352) 377-5822</b> Fax: <b>(352) 377-7158</b>	

##### Application Processing Information (DEP Use)

1. Date of Receipt of Application:	
2. Permit Number:	



**Purpose of Application**

**Air Operation Permit Application**

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

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

Current construction permit number: \_\_\_\_\_

- Non-Title V air operation permit revision to address one or more newly constructed or modified emissions units.

Current construction permit number: \_\_\_\_\_

Operation permit number to be revised: \_\_\_\_\_

- Initial non-Title V air operation permit under Rule 62-210.300(2)(b), F.A.C., for an existing facility seeking classification as a synthetic non-Title V source.

Current operation/construction permit number(s):  
\_\_\_\_\_

- Non-Title V air operation permit revision for a synthetic non-Title V source. Give reason for revision; e.g., to address one or more newly constructed or modified emissions units.

Operation permit number to be revised: \_\_\_\_\_


Reason for revision: \_\_\_\_\_

**Air Construction Permit Application**

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

- Air construction permit to construct or modify one or more emissions units.
- Air construction permit to make federally enforceable an assumed restriction on the potential emissions of one or more existing, permitted emissions units.
- Air construction permit for one or more existing, but unpermitted, emissions units.

**Owner/Authorized Representative**

1. Name and Title of Owner/Authorized Representative: <b>Mike O'Berry – Manager of Environmental Permitting Services</b>
2. Owner/Authorized Representative Mailing Address: Organization/Firm: <b>Florida Rock Industries, Inc.</b> Street Address: <b>P.O. Box 4667</b> City: <b>Jacksonville</b> State: <b>FL</b> Zip Code: <b>32201</b>
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\* Attach letter of authorization if not currently on file.

**Professional Engineer Certification**

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3. Professional Engineer Telephone Numbers: Telephone: <b>( 352 ) 377-5822</b> Fax: <b>( 352 ) 377-7158</b>

4. Professional Engineer Statement:

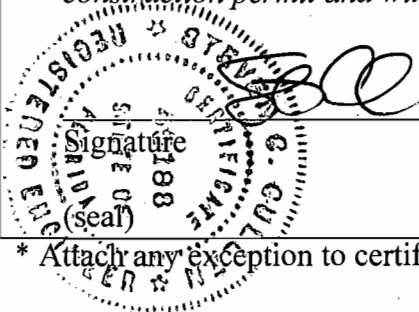
*I, the undersigned, hereby certify, except as particularly noted herein\*, that:*

*(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*

*(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.*

*If the purpose of this application is to obtain an air construction permit for one or more proposed new or modified emissions units (check here [ X ], if so), I further certify that the engineering features of each such emissions unit described in this application have been designed or examined by me or individuals under my direct supervision and found to be in conformity with sound engineering principles applicable to the control of emissions of the air pollutants characterized in this application.*

*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.*



\_\_\_\_\_  
Date 1/25/2000

\* Attach any exception to certification statement.

**Scope of Application**

<b>Emissions Unit ID</b>	<b>Description of Emissions Unit</b>	<b>Permit Type</b>	<b>Processing Fee</b>
001	Material Handling – Subject to NSPS Subpart 000	AC1E	\$250.00
002	Diesel Engines for Portable Crushing Unit	AC1D	\$1000.00

**Application Processing Fee**

Check one:  Attached - Amount: \$ 1250.00      Not Applicable

**Construction/Modification Information**

1. Description of Proposed Project or Alterations:

**Florida Rock Industries, Inc. is requesting a construction permit for a portable crushing unit to be operated in all of the counties in the state of Florida.**

2. Projected or Actual Date of Commencement of Construction: **Upon DEP Approval**

3. Projected Date of Completion of Construction: **Upon DEP Approval**

**Application Comment**

## II. FACILITY INFORMATION

### A. GENERAL FACILITY INFORMATION

**Facility Location and Type**

1. Facility UTM Coordinates: Zone: <b>17</b> East (km): <b>431.6</b> North (km): <b>2931.4</b>			
2. Facility Latitude/Longitude: Latitude (DD/MM/SS): <b>26°30'11"</b> Longitude (DD/MM/SS): <b>81°41'10"</b>			
3. Governmental Facility Code: <b>0</b>	4. Facility Status Code: <b>A</b>	5. Facility Major Group SIC Code: <b>14</b>	6. Facility SIC(s): <b>1422</b>
7. Facility Comment (limit to 500 characters):  <p><b>The facility location given above is the present location of the unit. Any new site location will be provided to FDEP prior to relocation. This portable unit will operate in different locations within the state of Florida based on project requirements.</b></p>			

**Facility Contact**

1. Name and Title of Facility Contact: <b>Curt Zimmerman – Plant Manager</b>			
2. Facility Contact Mailing Address: Organization/Firm: <b>Florida Rock Industries, Inc.</b> Street Address: <b>14341 Alico Road</b> City: <b>Fort Myers</b> State: <b>FL</b> Zip Code: <b>33913</b>			
3. Facility Contact Telephone Numbers: Telephone: <b>( 941 ) 267-1803</b> Fax: <b>( 941 ) 267-2887</b>			

**Facility Regulatory Classifications**

**Check all that apply:**

1. <input type="checkbox"/> Small Business Stationary Source?	<input checked="" type="checkbox"/> Unknown
2. <input type="checkbox"/> Synthetic Non-Title V Source?	
3. <input type="checkbox"/> Synthetic Minor Source of Pollutants Other than HAPs?	
4. <input type="checkbox"/> Synthetic Minor Source of HAPs?	
5. <input checked="" type="checkbox"/> One or More Emissions Units Subject to NSPS?	
6. <input type="checkbox"/> One or More Emission Units Subject to NESHAP Recordkeeping or Reporting?	
7. Facility Regulatory Classifications Comment (limit to 200 characters):	

**Rule Applicability Analysis**

**The facility is subject to certain provisions of these rules:**

**Rule 62-4, FAC**  
**Rule 62-204, FAC**  
**Rule 62-210, FAC**  
**Rule 62-296, FAC**  
**Rule 62-297, FAC**  
**40 CFR 60, Subpart A**  
**40 CFR 60, Subpart OOO**

## B. FACILITY POLLUTANTS

### List of Pollutants Emitted

1. Pollutant Emitted	2. Pollutant Classif.	3. Requested Emissions Cap		4. Basis for Emissions Cap	5. Pollutant Comment
		lb/hour	tons/year		
PM	B				



**C. FACILITY SUPPLEMENTAL INFORMATION**

**Supplemental Requirements**

1. Area Map Showing Facility Location: <input type="checkbox"/> Attached, Document ID: _____ <input type="checkbox"/> Not Applicable <input checked="" type="checkbox"/> Waiver Requested <b>Department has on file</b>
2. Facility Plot Plan: <input type="checkbox"/> Attached, Document ID: _____ <input type="checkbox"/> Not Applicable <input checked="" type="checkbox"/> Waiver Requested <b>Department has on file</b>
3. Process Flow Diagram(s): <input checked="" type="checkbox"/> Attached, Document ID: <b>FAC1</b> <input type="checkbox"/> Not Applicable <input type="checkbox"/> Waiver Requested
4. Precautions to Prevent Emissions of Unconfined Particulate Matter: <input type="checkbox"/> Attached, Document ID: _____ <input type="checkbox"/> Not Applicable <input checked="" type="checkbox"/> Waiver Requested <b>Department has on file</b>
5. Supplemental Information for Construction Permit Application: <input type="checkbox"/> Attached, Document ID: _____ <input checked="" type="checkbox"/> Not Applicable
6. Supplemental Requirements Comment: N/A

**Emissions Unit Information Section 1 of 2**

**III. EMISSIONS UNIT INFORMATION**

A separate Emissions Unit Information Section (including subsections A through G as required) 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**

**Emissions Unit Description and Status**

1. Type of Emissions Unit Addressed in This Section: (Check one)		
<input type="checkbox"/> 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).		
<input type="checkbox"/> This Emissions Unit Information Section addresses, as a single emissions unit, a 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.		
<input checked="" type="checkbox"/> 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.		
2. Description of Emissions Unit Addressed in This Section (limit to 60 characters): <b>Cedar Rapids Base Rock Portable Crushing Unit - Subject to NSPS Subpart OOO</b>		
3. Emissions Unit Identification Number: ID:		<input checked="" type="checkbox"/> No ID <input type="checkbox"/> ID Unknown
4. Emissions Unit Status Code: <b>A</b>	5. Initial Startup Date: <b>N/A</b>	6. Emissions Unit Major Group SIC Code: <b>14</b>
7. Emissions Unit Comment: (Limit to 500 Characters)  <b>A Cedar Rapids Base Rock Portable Crushing Unit is operated by Florida Rock.</b>		

**Emissions Unit Information Section 1 of 2**

**Emissions Unit Control Equipment**

1. Control Equipment/Method Description (limit to 200 characters per device or method): N/A
2. Control Device or Method Code(s):

**Emissions Unit Details**

1. Package Unit: N/A Manufacturer: Model Number:
2. Generator Nameplate Rating: N/A MW
3. Incinerator Information: N/A Dwell Temperature: °F Dwell Time: seconds Incinerator Afterburner Temperature: °F

**Emissions Unit Operating Capacity and Schedule**

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: 600 tons/hr	
4. Maximum Production Rate: N/A	
5. Requested Maximum Operating Schedule:	
hours/day	days/week
weeks/year	8760 hours/year
6. Operating Capacity/Schedule Comment (limit to 200 characters):	
<b>The portable crushing unit is subject to NSPS, and has a processing rate of 600 TPH.</b>	
<b>600 tons/hr x 8760 hr/yr = 5,256,000 TPY</b>	

Emissions Unit Information Section 1 of 2

**B. EMISSION POINT (STACK/VENT) INFORMATION**

**Emission Point Description and Type**

1. Identification of Point on Plot Plan or Flow Diagram? <b>Cedar Rapids Base Rock Portable Crushing Unit</b>		2. Emission Point Type Code: <b>3</b>	
3. Descriptions of Emission Points Comprising this Emissions Unit for VE Tracking (limit to 100 characters per point):			
<b>Affected Facility</b>	<b>Description</b>	<b>Size</b>	
<b>Crusher 4340</b>	<b>Crusher</b>	<b>600 TPH</b>	
<b>Feeder Belt</b>	<b>Belt Conveyor</b>	<b>48"</b>	
<b>Delivery Belt</b>	<b>Belt Conveyor</b>	<b>42"</b>	
<b>Radial Stacker</b>	<b>Belt Conveyor</b>	<b>36"</b>	
4. ID Numbers or Descriptions of Emission Units with this Emission Point in Common: N/A			
5. Discharge Type Code: <b>F</b>	6. Stack Height: <b>N/A</b> feet	7. Exit Diameter: <b>N/A</b> feet	
8. Exit Temperature: <b>Ambient, 77°F</b>	9. Actual Volumetric Flow Rate: <b>N/A</b> acfm	10. Water Vapor: <b>N/A</b> %	
11. Maximum Dry Standard Flow Rate: <b>N/A</b> dscfm		12. Nonstack Emission Point Height: <b>0</b> feet	
13. Emission Point UTM Coordinates:			
Zone:	East (km):	North (km):	
14. Emission Point Comment (limit to 200 characters):			

**Emissions Unit Information Section 1 of 2**

**C. SEGMENT (PROCESS/FUEL) INFORMATION**

**Segment Description and Rate: Segment 1 of 1**

1. Segment Description (Process/Fuel Type) (limit to 500 characters): <b>Mineral Products: Stone Quarrying/Processing: General</b>		
2. Source Classification Code (SCC): <b>3-05-020-99</b>		3. SCC Units: <b>Tons Processed</b>
4. Maximum Hourly Rate: <b>600 Tons Processed</b>	5. Maximum Annual Rate: <b>5,256,000 Tons Processed</b>	6. Estimated Annual Activity Factor:
7. Maximum % Sulfur: <b>N/A</b>	8. Maximum % Ash: <b>N/A</b>	9. Million Btu per SCC Unit: <b>N/A</b>
10. Segment Comment (limit to 200 characters): <b>The Cedar Rapids Base Rock Portable Crushing Unit is subject to NSPS, and has a processing rate of 600 TPH.</b>  <b>600 TPH x 8760 hr/yr = 5,256,000 tons/year</b>		

**Segment Description and Rate: Segment \_\_\_\_ of \_\_\_\_**

1. Segment Description (Process/Fuel Type ) (limit to 500 characters):		
2. Source Classification Code (SCC):		3. SCC Units:
4. Maximum Hourly Rate:	5. Maximum Annual Rate:	6. Estimated Annual Activity Factor:
7. Maximum % Sulfur:	8. Maximum % Ash:	9. Million Btu per SCC Unit:
10. Segment Comment (limit to 200 characters):		

**D. EMISSIONS UNIT POLLUTANT DETAIL INFORMATION**

**Potential Emissions**

1. Pollutant Emitted: <b>PM</b>		2. Pollutant Regulatory Code: <b>NS</b>	
3. Primary Control Device Code:	4. Secondary Control Device Code:	5. Total Percent Efficiency of Control:	
6. Potential Emissions: <b>0.6 lb/hour      2.6 tons/year</b>		7. Synthetically Limited? [ ]	
8. Emission Factor: <b>0.001 lb/ton</b> Reference: <b>AP-42 Version 5 Table 11.19.2-2</b>		9. Emissions Method Code: <b>3</b>	
10. Calculation of Emissions (limit to 600 characters):  <b>Hourly: 600 ton/hr x 0.001 lb/ton = 0.6 lb/hr</b>  <b>Annual: 0.6 lb/ton x 8760 hr/yr x 1 ton/2000 lb = 2.6 tons/yr</b>			
11. Pollutant Potential Emissions Comment (limit to 200 characters): <b>Conveyor transfer point (controlled) = 3 x 2.1 x 0.000048 lb/ton = 0.0003 lb/ton</b> <b>Crusher = 0.0007 lb/ton</b> <b>Emission Factor = 0.0003 lb/ton + 0.0007 lb/ton = 0.001 lb/ton</b>			

**Allowable Emissions** Allowable Emissions \_\_\_\_\_ of \_\_\_\_\_

1. Basis for Allowable Emissions Code: <b>N/A</b>	2. Future Effective Date of Allowable Emissions:
3. Requested Allowable Emissions and Units:	4. Equivalent Allowable Emissions:  <div style="display: flex; justify-content: space-around;"> <span>lb/hour</span> <span>tons/year</span> </div>
5. Method of Compliance (limit to 60 characters):	
6. Allowable Emissions Comment (Desc. of Operating Method) (limit to 200 characters):	

**Emissions Unit Information Section 1 of 2**

**Pollutant Detail Information Page 2 of 2**

**D. EMISSIONS UNIT POLLUTANT DETAIL INFORMATION**

**Potential Emissions**

1. Pollutant Emitted: <b>PM10</b>		2. Pollutant Regulatory Code: <b>NS</b>	
3. Primary Control Device Code:	4. Secondary Control Device Code:	5. Total Percent Efficiency of Control:	
6. Potential Emissions: <b>0.48 lb/hour          2.1 tons/year</b>		7. Synthetically Limited? [   ]	
8. Emission Factor: <b>0.0008 lb/ton</b> Reference: <b>AP-42 Version 5 Table 11.19.2-2</b>		9. Emissions Method Code: <b>3</b>	
10. Calculation of Emissions (limit to 600 characters): <b>Hourly: 600 ton/hr x 0.0008 lb/ton = 0.48 lb/hr</b> <b>Annual: 0.48 lb/ton x 8760 hr/yr x 1 ton/2000 lb = 2.1 tons/yr</b>			
11. Pollutant Potential Emissions Comment (limit to 200 characters): <b>Conveyor transfer point (controlled) = 3 x 0.000048 lb/ton = 0.00014 lb/ton</b> <b>Crusher = 0.0007 lb/ton</b> <b>Emission Factor = 0.00014 lb/ton + 0.0007 lb/ton = 0.0008 lb/ton</b>			

**Allowable Emissions** Allowable Emissions \_\_\_\_\_ of \_\_\_\_\_

1. Basis for Allowable Emissions Code: <b>N/A</b>	2. Future Effective Date of Allowable Emissions:
3. Requested Allowable Emissions and Units:	4. Equivalent Allowable Emissions: <b>lb/hour                  tons/year</b>
5. Method of Compliance (limit to 60 characters):	
6. Allowable Emissions Comment (Desc. of Operating Method) (limit to 200 characters):	

**Emissions Unit Information Section 1 of 2**

**E. VISIBLE EMISSIONS INFORMATION  
(Only Emissions Units Subject to a VE Limitation)**

**Visible Emissions Limitation:** Visible Emissions Limitation 1 of 2

1. Visible Emissions Subtype: <b>VE10</b>	2. Basis for Allowable Opacity: <input checked="" type="checkbox"/> Rule <input type="checkbox"/> Other
3. Requested Allowable Opacity: Normal Conditions: <b>10%</b> Exceptional Conditions: <b>N/A</b> % Maximum Period of Excess Opacity Allowed: <b>N/A</b> min/hour	
4. Method of Compliance: <b>Method 9</b>	
5. Visible Emissions Comment (limit to 200 characters): <b>40 CFR 60.672 (b)</b>  <b>Feeder Belt</b> <b>Delivery Belt</b> <b>Radial Stacker</b>	

**E. VISIBLE EMISSIONS INFORMATION  
(Only Emissions Units Subject to a VE Limitation)**

**Visible Emissions Limitation:** Visible Emissions Limitation 2 of 2

1. Visible Emissions Subtype: <b>VE15</b>	2. Basis for Allowable Opacity: <input checked="" type="checkbox"/> Rule <input type="checkbox"/> Other
3. Requested Allowable Opacity: Normal Conditions: <b>15%</b> Exceptional Conditions: <b>N/A</b> % Maximum Period of Excess Opacity Allowed: <b>N/A</b> min/hour	
4. Method of Compliance: <b>Method 9</b>	
5. Visible Emissions Comment (limit to 200 characters): <b>40 CFR 60.672 (c)</b> <b>Crusher 4340</b>	





**Emissions Unit Information Section 1 of 2**

**G. EMISSIONS UNIT SUPPLEMENTAL INFORMATION**

**Supplemental Requirements**

1. Process Flow Diagram <input checked="" type="checkbox"/> Attached, Document ID: <b>FAC1</b> <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 type="checkbox"/> Attached, Document ID: _____ <input type="checkbox"/> Previously submitted, Date: _____ <input checked="" type="checkbox"/> Not Applicable
6. Procedures for Startup and Shutdown <input type="checkbox"/> Attached, Document ID: _____ <input checked="" type="checkbox"/> Not Applicable <input type="checkbox"/> Waiver Requested
7. Operation and Maintenance Plan <input type="checkbox"/> Attached, Document ID: _____ <input checked="" type="checkbox"/> Not Applicable <input type="checkbox"/> Waiver Requested
8. Supplemental Information for Construction Permit Application <input type="checkbox"/> Attached, Document ID: _____ <input checked="" type="checkbox"/> Not Applicable
9. Other Information Required by Rule or Statute <input type="checkbox"/> Attached, Document ID: _____ <input checked="" type="checkbox"/> Not Applicable
10. Supplemental Requirements Comment:

**III. EMISSIONS UNIT INFORMATION**

A separate Emissions Unit Information Section (including subsections A through G as required) 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**

**Emissions Unit Description and Status**

1. Type of Emissions Unit Addressed in This Section: (Check one) <input checked="" type="checkbox"/> 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). <input type="checkbox"/> This Emissions Unit Information Section addresses, as a single emissions unit, a 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. <input type="checkbox"/> 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.		
2. Description of Emissions Unit Addressed in This Section (limit to 60 characters): <b>Diesel Engine for Cedar Rapids Base Rock Portable Crushing Unit</b>		
3. Emissions Unit Identification Number: ID:		<input checked="" type="checkbox"/> No ID <input type="checkbox"/> ID Unknown
4. Emissions Unit Status Code: <b>A</b>	6. Initial Startup Date: N/A	6. Emissions Unit Major Group SIC Code: <b>14</b>
7. Emissions Unit Comment: (Limit to 500 Characters)  <b>The Cedar Rapids Base Rock Portable Crushing Unit has a diesel power unit (Detroit 1271).</b>		



**Emissions Unit Information Section 2 of 2**

**B. EMISSION POINT (STACK/VENT) INFORMATION**

**Emission Point Description and Type**

1. Identification of Point on Plot Plan or Flow Diagram? <b>Diesel Engine</b>		2. Emission Point Type Code: <b>3</b>	
3. Descriptions of Emission Points Comprising this Emissions Unit for VE Tracking (limit to 100 characters per point):  <b>Diesel Engine (Detroit 1271)</b>			
4. ID Numbers or Descriptions of Emission Units with this Emission Point in Common: <b>N/A</b>			
5. Discharge Type Code: <b>V</b>	6. Stack Height: <b>10 feet</b>	7. Exit Diameter:  feet	
8. Exit Temperature: <b>~350°F</b>	9. Actual Volumetric Flow Rate: <b>N/A</b>  acfm	10. Water Vapor: <b>N/A</b>  %	
11. Maximum Dry Standard Flow Rate: <b>N/A</b> dscfm		12. Nonstack Emission Point Height: <b>N/A</b> feet	
13. Emission Point UTM Coordinates: Zone: East (km): North (km):			
14. Emission Point Comment (limit to 200 characters):			

**Emissions Unit Information Section 2 of 2**

**C. SEGMENT (PROCESS/FUEL) INFORMATION**

**Segment Description and Rate: Segment 1 of 1**

1. Segment Description (Process/Fuel Type) (limit to 500 characters): <b>Internal Combustion Engines: Industrial: Diesel: Reciprocating</b>		
2. Source Classification Code (SCC): <b>2-02-001-02</b>		3. SCC Units: <b>Thousand Gallons Burned</b>
4. Maximum Hourly Rate: <b>0.0071 Thousand Gallons Burned</b>	5. Maximum Annual Rate: <b>62.2 Thousand Gallons Burned</b>	6. Estimated Annual Activity Factor:
7. Maximum % Sulfur: <b>0.5</b>	8. Maximum % Ash: <b>N/A</b>	9. Million Btu per SCC Unit: <b>140</b>
10. Segment Comment (limit to 200 characters): <b>Hourly: 7.1 gal/hr x 0.001 Thousand Gallons/gal = 0.0071 Thousand Gallons Burned/hr</b>  <b>Annual: 0.0071 Thousand Gallons/hr x 8760 hr/yr = 62.2 Thousand Gallons Burned</b>		

**Segment Description and Rate: Segment \_\_\_\_\_ of \_\_\_\_\_**

1. Segment Description (Process/Fuel Type ) (limit to 500 characters):		
2. Source Classification Code (SCC):		3. SCC Units:
4. Maximum Hourly Rate:	5. Maximum Annual Rate:	6. Estimated Annual Activity Factor:
7. Maximum % Sulfur:	8. Maximum % Ash:	9. Million Btu per SCC Unit:
10. Segment Comment (limit to 200 characters):		

**D. EMISSIONS UNIT POLLUTANT DETAIL INFORMATION**

**Potential Emissions**

1. Pollutant Emitted: <b>PM/PM10</b>		2. Pollutant Regulatory Code: <b>NS</b>	
3. Primary Control Device Code:	4. Secondary Control Device Code:	5. Total Percent Efficiency of Control:	
6. Potential Emissions: <b>0.31 lb/hour      1.36 tons/year</b>		7. Synthetically Limited? [   ]	
8. Emission Factor: <b>0.31 lb/mmBtu</b> Reference: <b>AP-42 Version 5 Table 3.3-2</b>		9. Emissions Method Code: <b>3</b>	
10. Calculation of Emissions (limit to 600 characters):  <b>Hourly: 0.31 lb/mmBtu x 0.99 mmBtu/hr = 0.31 lb/hr</b>  <b>Annual: 0.31 lb/hr x 8760 hr/yr x 1 ton/2000 lb = 1.36 tons/yr</b>			
11. Pollutant Potential Emissions Comment (limit to 200 characters):			

**Allowable Emissions** Allowable Emissions \_\_\_\_\_ of \_\_\_\_\_

1. Basis for Allowable Emissions Code: <b>N/A</b>	2. Future Effective Date of Allowable Emissions:	
3. Requested Allowable Emissions and Units:	4. Equivalent Allowable Emissions:  lb/hour                      tons/year	
5. Method of Compliance (limit to 60 characters):		
6. Allowable Emissions Comment (Desc. of Operating Method) (limit to 200 characters):		

**D. EMISSIONS UNIT POLLUTANT DETAIL INFORMATION**

**Potential Emissions**

1. Pollutant Emitted: <b>NOx</b>		2. Pollutant Regulatory Code: <b>NS</b>	
3. Primary Control Device Code:	4. Secondary Control Device Code:	5. Total Percent Efficiency of Control:	
6. Potential Emissions: <b>4.4 lb/hour      19.3 tons/year</b>		7. Synthetically Limited? [   ]	
8. Emission Factor: <b>4.41 lb/mmBtu</b> Reference: <b>AP-42 Version 5 Table 3.3-2</b>		9. Emissions Method Code: <b>3</b>	
10. Calculation of Emissions (limit to 600 characters):  <b>Hourly: 4.41 lb/mmBtu x 0.99 mmBtu/hr = 4.4 lb/hr</b>  <b>Annual: 4.4 lb/hr x 8760 hr/yr x 1 ton/2000 lb = 19.3 tons/yr</b>			
7. Pollutant Potential Emissions Comment (limit to 200 characters):			

**Allowable Emissions** Allowable Emissions \_\_\_\_\_ of \_\_\_\_\_

1. Basis for Allowable Emissions Code: <b>N/A</b>	2. Future Effective Date of Allowable Emissions:
3. Requested Allowable Emissions and Units:	4. Equivalent Allowable Emissions:  <div style="display: flex; justify-content: space-around;"> <span>lb/hour</span> <span>tons/year</span> </div>
5. Method of Compliance (limit to 60 characters):	
6. Allowable Emissions Comment (Desc. of Operating Method) (limit to 200 characters):	



**D. EMISSIONS UNIT POLLUTANT DETAIL INFORMATION**

**Potential Emissions**

1. Pollutant Emitted: <b>CO</b>		2. Pollutant Regulatory Code: <b>NS</b>	
3. Primary Control Device Code:	4. Secondary Control Device Code:	5. Total Percent Efficiency of Control:	
6. Potential Emissions: <b>0.9 lb/hour      3.9 tons/year</b>		7. Synthetically Limited? [ ]	
8. Emission Factor: <b>0.95 lb/mmBtu</b> Reference: <b>AP-42 Version 5 Table 3.3-2</b>		9. Emissions Method Code: <b>3</b>	
10. Calculation of Emissions (limit to 600 characters):  <b>Hourly: 0.95 lb/mmBtu x 0.99 mmBtu/hr = 0.9 lb/hr</b>  <b>Annual: 0.9 lb/hr x 8760 hr/yr x 1 ton/2000 lb = 3.9 tons/yr</b>			
11. Pollutant Potential Emissions Comment (limit to 200 characters):			

**Allowable Emissions** Allowable Emissions \_\_\_\_\_ of \_\_\_\_\_

1. Basis for Allowable Emissions Code: <b>N/A</b>	2. Future Effective Date of Allowable Emissions:
3. Requested Allowable Emissions and Units:	4. Equivalent Allowable Emissions:  <div style="display: flex; justify-content: space-around;"> <span>lb/hour</span> <span>tons/year</span> </div>
5. Method of Compliance (limit to 60 characters):	
6. Allowable Emissions Comment (Desc. of Operating Method) (limit to 200 characters):	

**D. EMISSIONS UNIT POLLUTANT DETAIL INFORMATION**

**Potential Emissions**

1. Pollutant Emitted: <b>SOx</b>		2. Pollutant Regulatory Code: <b>NS</b>	
3. Primary Control Device Code:	4. Secondary Control Device Code:	5. Total Percent Efficiency of Control:	
6. Potential Emissions: <b>0.3 lb/hour      1.3 tons/year</b>		7. Synthetically Limited? [ ]	
8. Emission Factor: <b>0.29 lb/mmBtu</b> Reference: <b>AP-42 Version 5 Table 3.3-2</b>		9. Emissions Method Code: <b>3</b>	
10. Calculation of Emissions (limit to 600 characters):  <b>Hourly: 0.29 lb/mmBtu x 0.99 mmBtu/hr = 0.3 lb/hr</b> <b>Annual: 0.3 lb/hr x 8760 hr/yr x 1 ton/2000 lb = 1.3 tons/yr</b>			
11. Pollutant Potential Emissions Comment (limit to 200 characters):			

**Allowable Emissions** Allowable Emissions \_\_\_\_\_ of \_\_\_\_\_

1. Basis for Allowable Emissions Code: <b>N/A</b>	2. Future Effective Date of Allowable Emissions:
3. Requested Allowable Emissions and Units:	4. Equivalent Allowable Emissions: <b>lb/hour                      tons/year</b>
5. Method of Compliance (limit to 60 characters):	
6. Allowable Emissions Comment (Desc. of Operating Method) (limit to 200 characters):	

**E. VISIBLE EMISSIONS INFORMATION**  
**(Only Emissions Units Subject to a VE Limitation)**

**Visible Emissions Limitation:** Visible Emissions Limitation 1 of 1

1. Visible Emissions Subtype: <b>VE20</b>	2. Basis for Allowable Opacity: <input checked="" type="checkbox"/> Rule <input type="checkbox"/> Other
3. Requested Allowable Opacity: Normal Conditions: <b>20%</b> Exceptional Conditions:                      % Maximum Period of Excess Opacity Allowed:                      min/hour	
4. Method of Compliance: <b>No Demonstration of Compliance is required</b>	
3. Visible Emissions Comment (limit to 200 characters): <b>General VE Standard</b>	

**F. CONTINUOUS MONITOR INFORMATION**  
**(Only Emissions Units Subject to Continuous Monitoring)**

**Continuous Monitoring System:** Continuous Monitor \_\_\_\_\_ of \_\_\_\_\_

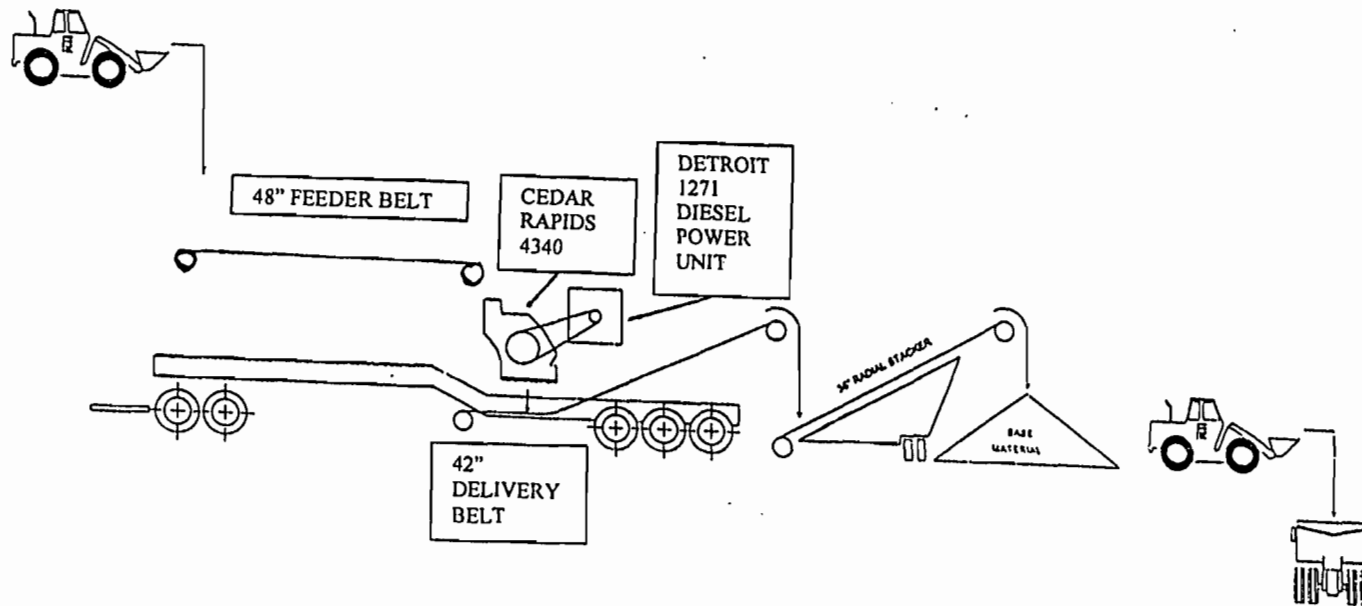
1. Parameter Code: <b>N/A</b>	2. Pollutant(s):
3. CMS Requirement: Other	<input type="checkbox"/> Rule <input type="checkbox"/>
4. Monitor Information: Manufacturer: Model Number: Serial Number:	
5. Installation Date:	6. Performance Specification Test Date:
7. Continuous Monitor Comment (limit to 200 characters):	

**Emissions Unit Information Section 2 of 2**

**G. EMISSIONS UNIT SUPPLEMENTAL INFORMATION**

**Supplemental Requirements**

1. Process Flow Diagram <input type="checkbox"/> Attached, Document ID: _____ <input checked="" type="checkbox"/> Not Applicable <input type="checkbox"/> Waiver Requested
2. Fuel Analysis or Specification <input type="checkbox"/> Attached, Document ID: _____ <input type="checkbox"/> Not Applicable <input checked="" 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 type="checkbox"/> Attached, Document ID: _____ <input type="checkbox"/> Previously submitted, Date: _____ <input checked="" type="checkbox"/> Not Applicable
6. Procedures for Startup and Shutdown <input type="checkbox"/> Attached, Document ID: _____ <input checked="" type="checkbox"/> Not Applicable <input type="checkbox"/> Waiver Requested
7. Operation and Maintenance Plan <input type="checkbox"/> Attached, Document ID: _____ <input checked="" type="checkbox"/> Not Applicable <input type="checkbox"/> Waiver Requested
8. Supplemental Information for Construction Permit Application <input type="checkbox"/> Attached, Document ID: _____ <input checked="" type="checkbox"/> Not Applicable
9. Other Information Required by Rule or Statute <input type="checkbox"/> Attached, Document ID: _____ <input checked="" type="checkbox"/> Not Applicable
10. Supplemental Requirements Comment:



# CRUSHING

FLORIDA ROCK IND., INC.  
DATE: January 20, 2000  
DRAWN BY: SCC/KFC  
KOOGLER & ASSOCIATES

GENERAL OFFICE: 155 EAST 21ST STREET / P.O. BOX 4667 / JACKSONVILLE, FLORIDA 32201 / (904) 355-1781

**FLORIDA ROCK INDUSTRIES INC** MINING, READY MIX CONCRETE, AND CONSTRUCTION PRODUCTS



August 4, 2000

RECEIVED

AUG 07 2000

Mr. C. H. Fancy, P.E.  
Chief, Bureau of Air Regulation  
Florida Department of Environmental Protection  
2600 Blair Stone Road, Mail Station 5505  
Tallahassee, Florida 32399-2400

BUREAU OF AIR REGULATION

Re: Withdrawal of Applications for Air Construction Permits  
For Relocatable Facilities and Processing Fee Refunds  
Florida Rock Industries, Inc.

*Run For  
\* All these*

Dear Mr. Fancy:

Due to our decision, in consultation with your staff, to include all relocatable processing equipment in the stationary permits issued to each of Florida Rock's rock mining operations, we hereby withdraw the following portable facility permit applications and request the refund of their respective processing fees:

- 1110072-010-AC ✓
- 1110072-011-AC ✓
- 1110072-012-AC ✓
- 1110072-013-AC ✓
- 0210018-004-AC ✓
- 7775111-001-AC ✓

We would like to thank you and your staff for your assistance in this matter. Specifically, Bruce Mitchell and Bill Leffler thoughtfully considered this somewhat complicated situation and provided sound advice to us concerning the appropriate method of handling the permitting of this equipment.

Please feel free to contact me if you have any questions regarding this matter.

Sincerely,

J. Michael O'Berry  
Manager, Environmental  
Permitting Services

/jmo'b

cc: Roland Boney  
Don Darley  
Steve Cullen – Koogler & Associates



Jeb Bush  
Governor

# Department of Environmental Protection

Twin Towers Office Building  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

David B. Struhs  
Secretary

September 5, 2000

Mr. J. Michael O'Berry  
Manager, Environmental Permitting Services  
Florida Rock Industries, Incorporated  
155 East 21<sup>st</sup> Street  
Post Office Box 4667  
Jacksonville, Florida 32201

Dear Mr. O'Berry:

Enclosed are "request for refund" forms for the six relocatable facility air permit applications you withdrew on August 1, 2000. Please date and sign each form on the Applicant's Signature line and return the forms to me. If you have any questions, please call me at (850)921-9505.

Sincerely,

Patty Adams  
Bureau of Air Regulation

/pa

Enclosures

APPLICATION FOR REFUND FORM  
THE STATE OF FLORIDA  
DEPARTMENT OF ENVIRONMENTAL PROTECTION

STATE OF FLORIDA, COUNTY OF \_\_\_\_\_

Pursuant to the provisions of Section 215.26, or Section \_\_\_\_\_\*, Florida Statutes,  
I hereby apply for a refund and request that a State Warrant be drawn in favor of:

NAME: FLORIDA ROCK INDUSTRIES, INC.  
ADDRESS: P.O. BOX 4667 JACKSONVILLE, FL 32201-  
FEID OR SS NUMBER:  
AMOUNT: \$1,250.00 DEPOSIT DATE: 18-FEB-2000 DEPOSIT: 200488  
DOCUMENT NUMBER: SYS RECEIPT#: 309488  
REV OBJECT CODE: 2222 AIR CONSTRUCT

which represents moneys I paid into the State Treasury subject to refund, and to  
substantiate such claim the following facts are submitted:

REASON FOR CLAIM: WITHDREW APPLICATION

-----  
CERTIFIED TRUE AND CORRECT this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Applicant's Signature

\*Must be completed if authority is other than Section 215.26, Florida Statutes.

\*\*\*\*\*

(FOR AGENCY USE ONLY)

(1) Agency recommends denial of above claim based on the following facts, including  
statutory authority for collection:

OR

(2) Agency recommends approval of above claim and submits the following information  
to substantiate such claim. \$1,250.00 was originally deposited into the State Treasury,  
Receipt \_\_\_\_\_, dated \_\_\_\_\_.

NAME OF ACCOUNT:

SAMAS ACCOUNT CODE  
3720252600137\_\_\_\_\_0000000020000

Statutory Authority for Collection \_\_\_\_\_

It is requested that payment be made from:

NAME OF ACCOUNT:

SAMAS ACCOUNT CODE  
3720252600137\_\_\_\_\_0000022000000

\*\*\*\*\*

CERTIFIED TRUE AND CORRECT this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Signature and Title of Authorized Person

\*\*\*\*\*

SECTION 215.26 STATES, IN PART: "APPLICATION FOR REFUNDS AS PROVIDED BY THIS SECTION  
SHALL BE FILED WITH THE COMPTROLLER, EXCEPT AS OTHERWISE PROVIDED HEREIN, WITHIN 3  
YEARS AFTER THE RIGHT TO SUCH REFUND SHALL HAVE ACCRUED ELSE SUCH RIGHT SHALL BE BARRED."  
Three years is interpreted as meaning three years from the date of payment into State  
Treasury.



APPLICATION FOR REFUND FORM  
THE STATE OF FLORIDA  
DEPARTMENT OF ENVIRONMENTAL PROTECTION

STATE OF FLORIDA, COUNTY OF \_\_\_\_\_

Pursuant to the provisions of Section 215.26, or Section \_\_\_\_\_\*, Florida Statutes, I hereby apply for a refund and request that a State Warrant be drawn in favor of:

NAME: FLORIDA ROCK INDUSTRIES, INC.  
ADDRESS: P.O. BOX 4667 JACKSONVILLE, FL 32201-  
FEID OR SS NUMBER:  
AMOUNT: \$1,250.00 DEPOSIT DATE: 18-FEB-2000 DEPOSIT: 200488  
DOCUMENT NUMBER: SYS RECEIPT#: 309482  
REV OBJECT CODE: 2222 AIR CONSTRUCT

which represents moneys I paid into the State Treasury subject to refund, and to substantiate such claim the following facts are submitted:

REASON FOR CLAIM: WITHDREW APPLICATION

-----  
CERTIFIED TRUE AND CORRECT this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Applicant's Signature

\*Must be completed if authority is other than Section 215.26, Florida Statutes.

\*\*\*\*\*

(FOR AGENCY USE ONLY)

(1) Agency recommends denial of above claim based on the following facts, including statutory authority for collection:

OR

(2) Agency recommends approval of above claim and submits the following information to substantiate such claim. \$1,250.00 was originally deposited into the State Treasury, Receipt \_\_\_\_\_, dated \_\_\_\_\_.

NAME OF ACCOUNT:

SAMAS ACCOUNT CODE  
3720252600137\_\_\_\_\_0000000020000

Statutory Authority for Collection \_\_\_\_\_

It is requested that payment be made from:

NAME OF ACCOUNT:

SAMAS ACCOUNT CODE  
3720252600137\_\_\_\_\_00000022000000

\*\*\*\*\*

CERTIFIED TRUE AND CORRECT this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Signature and Title of Authorized Person

\*\*\*\*\*

SECTION 215.26 STATES, IN PART: "APPLICATION FOR REFUNDS AS PROVIDED BY THIS SECTION SHALL BE FILED WITH THE COMPTROLLER, EXCEPT AS OTHERWISE PROVIDED HEREIN, WITHIN 3 YEARS AFTER THE RIGHT TO SUCH REFUND SHALL HAVE ACCRUED ELSE SUCH RIGHT SHALL BE BARRED." Three years is interpreted as meaning three years from the date of payment into State Treasury.

APPLICATION FOR REFUND FORM  
THE STATE OF FLORIDA  
DEPARTMENT OF ENVIRONMENTAL PROTECTION

STATE OF FLORIDA, COUNTY OF \_\_\_\_\_

Pursuant to the provisions of Section 215.26, or Section \_\_\_\_\_\*, Florida Statutes,  
I hereby apply for a refund and request that a State Warrant be drawn in favor of:

NAME: FLORIDA ROCK INDUSTRIES, INC.  
ADDRESS: P.O. BOX 4667 JACKSONVILLE, FL 32201-  
FEID OR SS NUMBER:  
AMOUNT: \$2,250.00 DEPOSIT DATE: 18-FEB-2000 DEPOSIT: 200488  
DOCUMENT NUMBER: SYS RECEIPT#: 309481  
REV OBJECT CODE: 2222 AIR CONSTRUCT

which represents moneys I paid into the State Treasury subject to refund, and to  
substantiate such claim the following facts are submitted:

REASON FOR CLAIM: WITHDREW APPLICATION

-----  
CERTIFIED TRUE AND CORRECT this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Applicant's Signature

\*Must be completed if authority is other than Section 215.26, Florida Statutes.

\*\*\*\*\*

(FOR AGENCY USE ONLY)

(1) Agency recommends denial of above claim based on the following facts, including  
statutory authority for collection:

OR

(2) Agency recommends approval of above claim and submits the following information  
to substantiate such claim. \$2,250.00 was originally deposited into the State Treasury,  
Receipt \_\_\_\_\_, dated \_\_\_\_\_.

NAME OF ACCOUNT:

SAMAS ACCOUNT CODE  
3720252600137 \_\_\_\_\_ 00000000020000

Statutory Authority for Collection \_\_\_\_\_

It is requested that payment be made from:

NAME OF ACCOUNT:

SAMAS ACCOUNT CODE  
3720252600137 \_\_\_\_\_ 00000022000000

\*\*\*\*\*

CERTIFIED TRUE AND CORRECT this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Signature and Title of Authorized Person

\*\*\*\*\*

SECTION 215.26 STATES, IN PART: "APPLICATION FOR REFUNDS AS PROVIDED BY THIS SECTION  
SHALL BE FILED WITH THE COMPTROLLER, EXCEPT AS OTHERWISE PROVIDED HEREIN, WITHIN 3  
YEARS AFTER THE RIGHT TO SUCH REFUND SHALL HAVE ACCRUED ELSE SUCH RIGHT SHALL BE BARRED."  
Three years is interpreted as meaning three years from the date of payment into State  
Treasury.

APPLICATION FOR REFUND FORM  
THE STATE OF FLORIDA  
DEPARTMENT OF ENVIRONMENTAL PROTECTION

STATE OF FLORIDA, COUNTY OF \_\_\_\_\_

Pursuant to the provisions of Section 215.26, or Section \_\_\_\_\_\*, Florida Statutes,  
I hereby apply for a refund and request that a State Warrant be drawn in favor of:

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ADDRESS: P.O. BOX 4667 JACKSONVILLE, FL 32201-  
FEID OR SS NUMBER:  
AMOUNT: \$2,250.00 DEPOSIT DATE: 18-FEB-2000 DEPOSIT: 200488  
DOCUMENT NUMBER: SYS RECEIPT#: 309484  
REV OBJECT CODE: 2222 AIR CONSTRUCT

which represents moneys I paid into the State Treasury subject to refund, and to substantiate such claim the following facts are submitted:

REASON FOR CLAIM: WITHDREW APPLICATION

-----  
CERTIFIED TRUE AND CORRECT this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Applicant's Signature

\*Must be completed if authority is other than Section 215.26, Florida Statutes.

\*\*\*\*\*

(FOR AGENCY USE ONLY)

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OR

(2) Agency recommends approval of above claim and submits the following information to substantiate such claim: \$2,250.00 was originally deposited into the State Treasury, Receipt \_\_\_\_\_, dated \_\_\_\_\_.

NAME OF ACCOUNT:

SAMAS ACCOUNT CODE  
3720252600137\_\_\_\_\_0000000020000

Statutory Authority for Collection \_\_\_\_\_

It is requested that payment be made from:

NAME OF ACCOUNT:

SAMAS ACCOUNT CODE  
3720252600137\_\_\_\_\_0000022000000

\*\*\*\*\*

CERTIFIED TRUE AND CORRECT this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Signature and Title of Authorized Person

\*\*\*\*\*

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APPLICATION FOR REFUND FORM  
THE STATE OF FLORIDA  
DEPARTMENT OF ENVIRONMENTAL PROTECTION

STATE OF FLORIDA, COUNTY OF \_\_\_\_\_

Pursuant to the provisions of Section 215.26, or Section \_\_\_\_\_\*, Florida Statutes,  
I hereby apply for a refund and request that a State Warrant be drawn in favor of:

NAME: FLORIDA ROCK INDUSTRIES, INC.  
ADDRESS: P.O. BOX 4667 JACKSONVILLE, FL 32201-  
FEID OR SS NUMBER:  
AMOUNT: \$1,250.00 DEPOSIT DATE: 18-FEB-2000 DEPOSIT: 200488  
DOCUMENT NUMBER: SYS RECEIPT#: 309483  
REV OBJECT CODE: 2222 AIR CONSTRUCT

which represents moneys I paid into the State Treasury subject to refund, and to  
substantiate such claim the following facts are submitted:

REASON FOR CLAIM: WITHDREW APPLICATION

-----  
CERTIFIED TRUE AND CORRECT this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Applicant's Signature

\*Must be completed if authority is other than Section 215.26, Florida Statutes.

\*\*\*\*\*

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statutory authority for collection:

OR

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to substantiate such claim. \$1,250.00 was originally deposited into the State Treasury,  
Receipt \_\_\_\_\_, dated \_\_\_\_\_.

NAME OF ACCOUNT:

SAMAS ACCOUNT CODE  
3720252600137\_\_\_\_\_0000000020000

Statutory Authority for Collection \_\_\_\_\_

It is requested that payment be made from:

NAME OF ACCOUNT:

SAMAS ACCOUNT CODE  
3720252600137\_\_\_\_\_00000022000000

\*\*\*\*\*

CERTIFIED TRUE AND CORRECT this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Signature and Title of Authorized Person

\*\*\*\*\*

SECTION 215.26 STATES, IN PART: "APPLICATION FOR REFUNDS AS PROVIDED BY THIS SECTION  
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Three years is interpreted as meaning three years from the date of payment into State  
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APPLICATION FOR REFUND FORM  
THE STATE OF FLORIDA  
DEPARTMENT OF ENVIRONMENTAL PROTECTION

STATE OF FLORIDA, COUNTY OF \_\_\_\_\_

Pursuant to the provisions of Section 215.26, or Section \_\_\_\_\_\*, Florida Statutes,  
I hereby apply for a refund and request that a State Warrant be drawn in favor of:

NAME: FLORIDA ROCK INDUSTRIES, INC.  
ADDRESS: P. O. BOX 4667 JACKSONVILLE, FL 32201-  
FEID OR SS NUMBER:  
AMOUNT: \$1,250.00 DEPOSIT DATE: 26-JAN-2000 DEPOSIT: 200424  
DOCUMENT NUMBER: SYS RECEIPT#: 307818  
REV OBJECT CODE: 2222 AIR CONSTRUCT

which represents moneys I paid into the State Treasury subject to refund, and to  
substantiate such claim the following facts are submitted:

REASON FOR CLAIM: WITHDREW APPLICATION

-----  
CERTIFIED TRUE AND CORRECT this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Applicant's Signature

\*Must be completed if authority is other than Section 215.26, Florida Statutes.

\*\*\*\*\*

(FOR AGENCY USE ONLY)

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OR

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Receipt \_\_\_\_\_, dated \_\_\_\_\_.

NAME OF ACCOUNT:

SAMAS ACCOUNT CODE  
3720252600137\_\_\_\_\_0000000020000

Statutory Authority for Collection \_\_\_\_\_

It is requested that payment be made from:

NAME OF ACCOUNT:

SAMAS ACCOUNT CODE  
3720252600137\_\_\_\_\_00000022000000

\*\*\*\*\*

CERTIFIED TRUE AND CORRECT this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Signature and Title of Authorized Person

\*\*\*\*\*

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YEARS AFTER THE RIGHT TO SUCH REFUND SHALL HAVE ACCRUED ELSE SUCH RIGHT SHALL BE BARRED."  
Three years is interpreted as meaning three years from the date of payment into State  
Treasury.

File



# Department of Environmental Protection

Jeb Bush  
Governor

Twin Towers Office Building  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

David B. Struhs  
Secretary

August 1, 2000

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

Mr. J. Michael O'Berry  
Manager, Environmental Permitting Services  
Florida Rock Industries, Incorporated  
155 East 21<sup>st</sup> Street  
Post Office Box 4667  
Jacksonville, Florida 32201

RE: Withdrawal of Applications for Air Construction Permits  
for Relocatable Facilities and Processing Fee Refunds

Dear Mr. O'Berry:

Based on recent permitting actions, it appears that several air construction permit applications for relocatable facilities will no longer need to be processed by the Tallahassee office. The following are the affected projects:

- 1110072-010-AC
- 1110072-011-AC
- 1110072-012-AC
- 1110072-013-AC
- 0210018-004-AC (Sunniland Mine)
- 7775111-001-AC

If our assessment is correct, we will require that the projects be formally withdrawn by a request letter (an example letter has been enclosed for your use). Upon receipt of the request letter for withdrawal, we will forward to you the "request for refund" forms which will require a signature. These "request for refund" forms will have to be returned to us to process.

If there are any questions, please give me a call at (850) 921-9506.

Sincerely,

R. Bruce Mitchell  
Environmental Administrator  
Title V Section  
Bureau of Air Regulation

RBM/sk

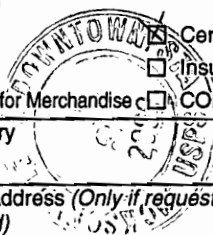
Enclosure

cc: Clair Fancy, BAR  
Bill Leffler, BAR

"More Protection, Less Process"

Printed on recycled paper.

Is your RETURN ADDRESS completed on the reverse side?

<b>SENDER:</b> ■ Complete items 1 and/or 2 for additional services. ■ Complete items 3, 4a, and 4b. ■ Print your name and address on the reverse of this form so that we can return this card to you. ■ Attach this form to the front of the mailpiece, or on the back if space does not permit. ■ Write "Return Receipt Requested" on the mailpiece below the article number. ■ The Return Receipt will show to whom the article was delivered and the date delivered.		I also wish to receive the following services (for an extra fee): 1. <input type="checkbox"/> Addressee's Address 2. <input type="checkbox"/> Restricted Delivery Consult postmaster for fee.	
3. Article Addressed to: <b>Mr. J. Michael O'Berry</b> <b>Manager, Environmental Permitting Services</b> <b>Florida Rock Industries, Inc.</b> <b>P.O. Box 4667</b> <b>Jacksonville, FL 32201</b>		4a. Article Number <b>P 174 053 168</b>	
		4b. Service Type <input type="checkbox"/> Registered <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise <input checked="" type="checkbox"/> Certified <input checked="" type="checkbox"/> Insured <input type="checkbox"/> COD	
		7. Date of Delivery 	
5. Received By: (Print Name) <i>Jim Taylor</i>		8. Addressee's Address (Only if requested and fee is paid)	
6. Signature: (Addressee or Agent) <input checked="" type="checkbox"/> <i>J. O'Berry</i>			

Thank you for using Return Receipt Service.

PS Form 3811, December 1994

Domestic Return Receipt

P 174 053 168

US Postal Service  
**Receipt for Certified Mail**  
 No Insurance Coverage Provided.  
 Do not use for International Mail (See reverse)  
**Mr. J. Michael O'Berry**  
**Manager, Environmental Permitting Services**  
**Florida Rock Industries, Inc.**  
**P.O. Box 4667**  
**Jacksonville, FL 32201**

PS Form 3800, April 1995	Certified Fee	
	Special Delivery Fee	
	Restricted Delivery Fee	
	Return Receipt Showing to Whom & Date Delivered	
	Return Receipt Showing to Whom, Date, & Addressee's Address	
	TOTAL Postage & Fees	\$
	Postmark or Date	<b>08-01-00</b> <i>SOB</i>

# SAMPLE LETTER

Current Date

Mr. C. H. Fancy, P.E.  
Chief  
Bureau of Air Regulation  
2600 Blair Stone Road, Mail Station 5505  
Tallahassee, Florida 32399-2400

RE: Withdrawal of Applications for Air Construction Permits  
For Relocatable Facilities and Processing Fee Refunds  
Florida Rock Industries, Incorporated

Dear Mr. Fancy:

I request that the following applications be withdrawn and their application processing fees be refunded:

1110072-010-AC  
1110072-011-AC  
1110072-012-AC  
1110072-013-AC  
0210018-004-AC (Suniland Mine)  
7775111-001-AC

If there are any questions, please give me a call at (904) 355-1781.

Sincerely,

J. Michael O'Berry  
Manager, Environmental Permitting Services  
Florida Rock Industries, Incorporated

JMO/sk

cc: Bruce Mitchell, FDEP-Title V Section



Details | Emis unit | perMit | Compl assr | Pollutant | reLated party |  
 ARMS Facility

ARMINV01

POINT Office SD Sth: FT MYERS Cty LEE AIRS ID 7775111

Owner/Comp FLORIDA ROCK INDUSTRIES, INC. Site RELOCATABLE CEDAR RAPIDS  
 Directions relocatable  
 Street 14341 Alica Road Zip 33913-  
 City FORT MYERS  
 UTM Zone 17 East 431.60 North 2931.40 Latitude 26:30:11 Longitude 81:41:10

Status U UNPERMITTED Maj Group SIC 14 MINING AND QUARRYING OF NONM  
 Reloc Y Shtdwn Dt Strt Dt Final Shtdwn Dt  
 Gov Fac 0 NOT OWNED OR OPERATED BY A FED HAZ Waste Generator ID: FLD  
 AOR Req Y Ozone SIP Facility N Type  
 Compliance Tracking One Time Title V Credit N  
 Title V NON TITLE V non-HAP Class MINOR HAP Class

# of Emis Units C A I Generator Rating MW

Comment relocatable - based out of Fort Myers

Enter the Type of this FACILITY. (POINT or AREA)

Count: \*76

^ v

<Replace>

Details | Emis unit | perMit | Compl assr | Pollutant | reLated party |  
ARMS Facility

ARMINV01

POINT Office SEDA SE: DADE Cty DADE AIRS ID 7775040

Owner/Comp FLORIDA ROCK INDUSTRIES, INC. Site RELOCATABLE FACILITY  
Directions  
Street 12201 N.W. 25TH STREET Zip 33182-  
City MIAMI  
UTM Zone 17 East 561.10 North 2853.20 Latitude 25:47:50 Longitude 80:23:04

Status A ACTIVE Maj Group SIC 14 MINING AND QUARRYING OF NONM  
Reloc Y Shtdwn Dt Strt Dt Final Shtdwn Dt  
Gov Fac 0 NOT OWNED OR OPERATED BY A FED HAZ Waste Generator ID: FLD  
AOR Req Y Ozone SIP Facility N Type 25 OTHER MINERAL PROCESSING  
Compliance Tracking B ACTUAL AND POTENTIAL EMISSIO One Time Title V Credit N  
Title V NON TITLE V non-HAP Class MINOR HAP Class

# of Emis Units C 0 A 1 I 0 Generator Rating MW

Comment

Enter the Type of this FACILITY. (POINT or AREA)

Count: \*76

^ v

<Replace>

Details | Emis unit | perMit | Compl assr | Pollutant | reLated party |  
 ARMS Facility

ARMINV01

POINT Office NED NE: JACKSONVILLE Cty ALACHUA AIRS ID 7770260

Owner/Comp FLORIDA ROCK INDUSTRIES INC Site FLORIDA ROCK INDUSTRIES I  
 Directions Located 3.5 miles northeast of Newberry on C.R. 235  
 Street 4000 NW CR 235  
 City NEWBERRY Zip 32669-  
 UTM Zone 17 East 347.20 North 3285.30 Latitude 29:41:24 Longitude 82:35:42

Status I INACTIVE Maj Group SIC 32 STONE, CLAY, GLASS AND CONCR  
 Reloc Y Shtdwn Dt Strt Dt Final Shtdwn Dt  
 Gov Fac 0 NOT OWNED OR OPERATED BY A FED HAZ Waste Generator ID: FLD  
 AOR Req N Ozone SIP Facility N Type  
 Compliance Tracking One Time Title V Credit N  
 Title V NON TITLE V non-HAP Class MINOR HAP Class

# of Emis Units C 1 A 0 I 0 Generator Rating MW

Comment Newberry Ready-Mix Concrete Batch Plant

Enter the Type of this FACILITY. (POINT or AREA)  
 Count: \*76 ^ v

<Replace>

Details | Emis unit | perMit | Compl assr | Pollutant | reLated party |  
 ARMS Facility

ARMINV01

POINT Office NED NE: JACKSONVILLE Cty ALACHUA AIRS ID 7770260

Owner/Comp FLORIDA ROCK INDUSTRIES INC Site FLORIDA ROCK INDUSTRIES I  
 Directions Located 3.5 miles northeast of Newberry on C.R. 235  
 Street 4000 NW CR 235  
 City NEWBERRY Zip 32669-  
 UTM Zone 17 East 347.20 North 3285.30 Latitude 29:41:24 Longitude 82:35:42

Status I INACTIVE Maj Group SIC 32 STONE, CLAY, GLASS AND CONCR  
 Reloc Y Shtdwn Dt Strt Dt Final Shtdwn Dt  
 Gov Fac 0 NOT OWNED OR OPERATED BY A FED HAZ Waste Generator ID: FLD  
 AOR Req N Ozone SIP Facility N Type  
 Compliance Tracking One Time Title V Credit N  
 Title V NON TITLE V non-HAP Class MINOR HAP Class

# of Emis Units C 1 A 0 I 0 Generator Rating MW

Comment Newberry Ready-Mix Concrete Batch Plant

Enter the Type of this FACILITY. (POINT or AREA)

Count: 7 ^ v

<Replace>

POINT Office SEDA SE: DADE	Cty DADE	AIRS ID 7775040
Owner/Comp FLORIDA ROCK INDUSTRIES, INC.	Site RELOCATABLE FACILITY	
Directions Street 12201 N.W. 25TH STREET City MIAMI	Zip 33182-	
UTM Zone 17 East 561.10 North 2853.20 Latitude 25:47:50 Longitude 80:23:04		
Status A ACTIVE	Maj Group SIC 14 MINING AND QUARRYING OF NONM	
Reloc Y Shtdwn Dt	Strt Dt	Final Shtdwn Dt
Gov Fac 0 NOT OWNED OR OPERATED BY A FED HAZ Waste Generator ID: FLD		
AOR Req Y Ozone SIP Facility N Type 25 OTHER MINERAL PROCESSING		
Compliance Tracking B ACTUAL AND POTENTIAL EMISSIO One Time Title V Credit N		
Title V NON TITLE V	non-HAP Class MINOR	HAP Class
# of Emis Units	C 0 A 1 I 0	Generator Rating MW
Comment		

Enter the Type of this FACILITY. (POINT or AREA)  
 Count: 15      ^ v

<Replace>

Details | Emis unit | perMit | Compl assr | Pollutant | related party |  
 ARMS Facility

ARMINV01

POINT Office SD Sth: FT MYERS Cty LEE AIRS ID 7775111

Owner/Comp FLORIDA ROCK INDUSTRIES, INC. Site RELOCATABLE CEDAR RAPIDS  
 Directions relocatable  
 Street 14341 Alica Road Zip 33913-  
 City FORT MYERS UTM Zone 17 East 431.60 North 2931.40 Latitude 26:30:11 Longitude 81:41:10

Status U UNPERMITTED Maj Group SIC 14 MINING AND QUARRYING OF NONM  
 Reloc Y Shtdwn Dt Strt Dt Final Shtdwn Dt  
 Gov Fac 0 NOT OWNED OR OPERATED BY A FED HAZ Waste Generator ID: FLD  
 AOR Req Y Ozone SIP Facility N Type  
 Compliance Tracking One Time Title V Credit N  
 Title V NON TITLE V non-HAP Class MINOR HAP Class

# of Emis Units C A I Generator Rating MW

Comment relocatable - based out of Fort Myers

Enter the Type of this FACILITY. (POINT or AREA)

Count: 37 ^ v

<Replace>

RECEIVED



MAY 16 2000

May 15, 2000

**BUREAU OF AIR REGULATION**

Mr. Bill Leffler  
Florida Department of Environmental Protection  
Division of Air Resources Management  
2600 Blair Stone Road  
Mail Station 5500  
Tallahassee, Florida 32399-2400

Re: Air Permits for Portable Crushers and Screens

Dear Bill:

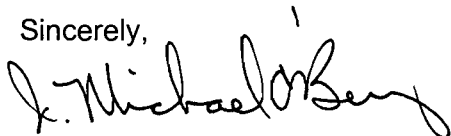
As we recently discussed, we are concerned about your requirement to provide serial numbers for the diesel units that power Florida Rock's various portable crushers, screens, and related equipment. We understand your assertion that the throughput capacity of a portable crusher or screen could potentially be increased by installing a larger more powerful engine. However, there are more factors involved in determining the throughput capacity of a unit than merely engine size. The real issue is whether a permitted crusher or screen is operating outside the parameters authorized in the permit.

This requirement would, in effect, regulate individual components that we do not believe were envisioned to be regulated under the Federal or State rules. In addition, it imposes a significant additional burden upon the permittee. For example, if the drive unit of a portable crusher or screen fails and needs replacement, this would necessitate notification of your Department. Since notifications must be made prior to the alteration of regulated equipment, this places the permittee in the position of either having to change the failed unit and submit an after-the-fact notification or potentially delay replacement of the component until the appropriate notice can be forwarded to your office.

Based upon the foregoing, we request that you reevaluate your stated policy on this matter.

Thank you for your thoughtful consideration of this request.

Sincerely,



J. Michael O'Berry, Manager,  
Environmental Permitting Services

/jmo'b

cc: Roland Boney  
Bob Martin  
Fred Buckner  
Don Darley  
Jimmey Crossan

RECEIVED

MAR 23 2000

March 20, 2000



**KOOGLER & ASSOCIATES**  
**ENVIRONMENTAL SERVICES**  
4014 NW THIRTEENTH STREET  
GAINESVILLE, FLORIDA 32609  
352/377-5822 ■ FAX/377-7158

Mr. Lennon Anderson    **BUREAU OF AIR REGULATION**  
Air Permitting Engineer  
FDEP Southeast District  
Post Office Box 15425  
West Palm Beach, Florida 33416-5425

**SUBJECT:** Florida Rock Industries, Inc. -- Fort Pierce Mine  
DEP File No. 1110072-009-AC  
Response to Request for Additional Information Dated February 10, 2000  
and Amended Application for Air Construction Permit

Dear Mr. Anderson:

This letter responds fully to the referenced request for additional information by establishing synthetic facility-wide limitations on process rates. Rule 62-210.200(228) defines "Potential to Emit" as the maximum capacity of an emissions unit or facility to emit a pollutant under its physical and operational design. Any enforceable physical or operational limitation on the capacity of the emissions unit or facility to emit a pollutant, including any air pollution control equipment and any restrictions on hours of operation or on the type or amount of material combusted, stored, or processed shall be treated as part of its design provided that, for any regulated air pollutant, such physical or operational limitation is federally enforceable. [emphasis added]. This permitting request for construction permits provides the necessary federal enforceability.

The project requests:

- I. A construction permit for the MGL screening unit, as requested in September 1999. (see DEP File No. 1110072-009-AC)
- II. A construction permit to reinstate the Cedar Rapids portable crushing unit. (see DEP File No. 1110072-004-AC).
- III. A construction permit to make federally enforceable an assumed restriction on the potential emissions of the facility by limiting annual fuel use and annual throughput.
- IV. A construction permit to authorize the operation of any combination of portable material handling equipment on the list attached to this application. Such operation will not exceed any of the requested operational limitations. This permitting approach was suggested by Bruce Mitchell (FDEP DARM) on March 2, 2000.



The facility-wide operational limitations are:

8760 hours/year of operation  
250,000 gallons per year of diesel fuel in non-exempt processing equipment  
10,000,000 tons/year of raw material processed

These limits apply to any combination of equipment on the attached list.

Please find enclosed four (4) copies of the referenced permit application and a check for \$5000 (\$5500 minus \$500 submitted in September 1999) as the applicable processing fee.

The Permittee respectfully requests that this permitting be expedited.

If you have any questions or require further information, please contact me.

Sincerely,



Steven C. Cullen, PE  
Koogler & Associates

copies to: Mike O'Berry -- FRI  
Bruce Mitchell – FDEP DARM



KCOGLER & ASSOCIATES  
ENVIRONMENTAL SERVICES

4014 NW THIRTEENTH STREET  
GAINESVILLE, FLORIDA 32609  
352/377-5822 • FAX/377-7158

PROJECT 107-99-11

FAX TRANSMITTAL FORM

TO: Bill Coffin  
DEP

FAX NO. \_\_\_\_\_

FROM: Steve Cullen

DATE: 3/13/00 SENT BY: SC

The text being transmitted consists of 2 page(s) PLUS this one. If you do not receive all of the pages or if there are difficulties with this transmission, please call (352) 377-5822.

REMARKS: Permitting time clock waiver as discussed for Florida Rock portable equipment.

Hard copy to follow by US Mail

This message is intended for use only by the individual to whom it has been addressed and may contain confidential or privileged information. If you are not the intended recipient, please note that the use, copying or distribution of this information is not permitted. If you have received this FAX in error, please destroy the original and notify the sender immediately at (352) 377-5822 so that we may prevent any recurrence. Thank you.



March 13, 2000

Mr. William Leffler, P.E.  
Permit Engineer  
FDEP DARM  
2600 Blair Stone Road, MS 5505  
Tallahassee, Florida 32399-2400

Subject: Florida Rock Industries, Inc.  
Waiver of Permit Processing Time Clocks  
(6) Applications for Relocatable Permits

Dear Mr. Leffler:

Per our meeting at your office on March 2, 2000, this letter waives applicable permit processing time clocks for the referenced applications for Florida Rock. The applications are specifically described as follows:

- Cedar Rapids Portable Crushing Unit – Ft. Pierce
- Cedar Rapids Portable Crushing Unit – Sunniland
- Hewitt Robbins Portable Crushing Unit – Ft. Pierce
- MGL Portable Screening Unit – Ft. Pierce
- Cedar Rapids Portable Crushing Unit – Ft. Myers
- Powerscreen Portable Screening Unit – Ft. Pierce

The waiver will allow Florida Rock to pursue permitting of the relocatable units at the DEP District level within the existing stationary source permits for their mines. This waiver is requested, rather than withdrawing the applications, to preserve Florida Rock's ability to permit the relocatable units through the Tallahassee office.

**WAIVER OF 90 DAY TIME LIMIT**  
**UNDER SECTIONS 120.60 AND 403.0876, FLORIDA STATUTES**

Applicant's Name: **Florida Rock Industries, Inc.**

The undersigned has read sections 120.60 and 403.0876, Florida Statutes, and fully understands the applicant's rights under those sections.

With regard to the above referenced permit applications, the applicant hereby with full knowledge and understanding of its rights under Sections 120.60 and 403.0876,

March 13, 2000 Letter to Bill Leffler (FDEP), Waiver for Relocatables  
Page 2 of 2

Florida Statutes, waives the right under Sections 120.60 and 403.0876, Florida Statutes, to have the application approved or denied by the State of Florida Department of Environmental Protection within the time periods prescribed in Sections 120.60 and 403.0876, Florida Statutes.

Said waiver is made freely and voluntarily by the applicant, is in its self-interest, and without any pressure or coercion by anyone employed by the State of Florida Department of Environmental Protection.

This waiver shall expire on the 31<sup>st</sup> day of December, 2000.

The undersigned is authorized to make this waiver on behalf of the applicant.

In specific, this letter waives the 30-day completeness reviews of the information provided to the Department. This waiver shall in no way limit the Department's ability to request information at any time. This waiver shall expire December 31, 2000, at which time all processing time clocks will resume.

For all permit applications, Section 403.0876(1), Florida Statutes, provides that within 30 days after receipt of an application for a permit under this chapter, the department shall review the application and shall request submittal of all additional information the department is permitted by law to require, and within 30 days after receipt of such additional information, the department shall review it and may request only that information needed to clarify such additional information or to answer new questions raised by or directly related to such additional information. This letter waives the 30-day completeness reviews of Section 403.0876(1), Florida Statutes.

I trust that this letter is responsive to your request. If you have any questions or comments, please do not hesitate to contact me.

Sincerely,



Steven C. Cullen, PE  
Koogler & Associates

Consultant to Florida Rock Industries, Inc.

copy to: Michael O'Berry - Florida Rock



RECEIVED

FEB 14 2000



February 11, 2000

BUREAU OF AIR REGULATION

Mr. William Leffler, P.E.  
Florida Department of Environmental Protection  
Twin Towers Office Building  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

Re: Statement of Non-Applicability of NSPS Subpart OOO

Dear Mr. Leffler:

This statement shall apply to the following pieces of equipment designated by Florida Rock Industries, Inc. as **not** subject to NSPS Subpart OOO in the Company's fixed or portable nonmetallic mineral processing plants: each crusher, grinding mill, screening operation, bucket elevator, belt conveyor, bagging operation, storage bin, enclosed truck or railcar loading station.

Any such equipment designated as **not** subject to NSPS Subpart OOO was constructed prior to August 31, 1983 and has not been reconstructed per 40 CFR 60.15 as defined by 40 CFR 60.673. Such equipment has also not been modified per 40 CFR 60.14. Please note that Subpart OOO provides the following:

**40 CFR 60.673 Reconstruction.**

(a) The cost of replacement of ore-contact surfaces on processing equipment shall not be considered in calculating either the "fixed capital cost of the new components" or the "fixed capital cost that would be required to construct a comparable new facility" under §60.15. Ore-contact surfaces are crushing surfaces; screen meshes, bars, and plates; conveyor belts; and elevator buckets.

(b) Under §60.15, the "fixed capital cost of the new components" includes the fixed capital cost of all depreciable components (except components specified in paragraph (a) of this section) which are or will be replaced pursuant to all continuous programs of component replacement commenced within any 2-year period following August 31, 1983.

Mr. William Leffler, P.E.

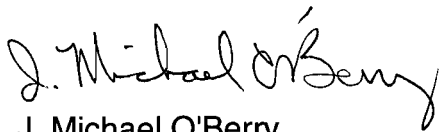
February 11, 2000

Page 2

Since this subpart specifically excludes the replacement cost of ore-contact surfaces, and limits the capital expenditures of remaining components to only those replaced in continuous component replacement programs within any two-year period, it is our understanding that routine maintenance of equipment rarely triggers this requirement.

I, the undersigned, am the authorized representative for Florida Rock Industries, Inc. on matters pertaining to environmental and permitting issues. I hereby certify that the foregoing statement is made freely and without coercion and is based upon information and belief formed after reasonable inquiry, and that it is true, accurate, and complete to the best of my knowledge.

Sincerely,



J. Michael O'Berry  
Manager, Environmental  
Permitting Services

/jmo'b

cc: Don Darley  
Steve Cullen, P.E. – Koogler and Associates



Jeb Bush  
Governor

# Department of Environmental Protection

Twin Towers Office Building  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

David B. Struhs  
Secretary

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

February 8, 2000

Mr. Ken Conwell, Project Engineer  
Koogler and Associates Environmental Services  
4014 NW Thirteenth Street  
Gainesville, Florida 32609

Re: Request for Additional Information

Florida Rock Industries, Inc – Applications for statewide permit for a relocatable crusher.

Dear Mr. Conwell:

On January 18, 2000, the Department received your application and fee for an air construction permit for a relocatable concrete and asphalt crusher, owned by Florida Rock Industries, Inc. The application is incomplete. In order to continue processing your application, the Department will need the additional information requested below. Should your response to any of the below items require new calculations, please submit the new calculations, assumptions, reference material and appropriate revised pages of the application form.

1. Please provide copies of existing construction and operating permits for this facility. The application suggests this information is in the possession of the Department but fails to provide any old permit numbers or facility identification. Department records do not match with the equipment described in the application and information recorded for Permit 1110072-005-AO, which was issued on September 28, 1996, and which appears to be a modification of permit 1110072-003-AO, which had expired.
2. Please provide facts supporting the assertion that this Cedar Rapids Portable Crushing unit is not subject to 40 CFR 60, Subpart OOO, as specified on pages 11, 12 and 14 of the application.
3. Please provide a copy of the area map and plot plan referenced on page 10 of the application. Department records do not appear to include this information. The map was not attached to the application.
4. Please provide a list of each power unit, whether internal combustion engines, or electric motors associated with this relocatable crusher, including the manufacturer, model number, serial number and date of installation.
5. With respect to each item described in the response to query 4. above, please describe any repairs or renovations since this facility was last permitted, the nature and cost thereof, and further differentiating between ore or mineral contact surface and general mechanical, electrical, power-train and structural repairs
6. Can this transportable crusher unit be operated from commercial electric power without the use of the diesel generator set described as emission unit 002 in the application?
7. Please provide an estimate of the capital cost of a replacement transportable unit similar to that for which the permit application is directed.

8. For each crusher, or grinding mill, please provide: (i) The rated capacity in tons per hour of the existing facility being replaced; (ii) the rated capacity in tons per hour of the replacement equipment; (iii) the date of manufacture of such crusher or grinder. Has this assembly ever been of a size or capacity different than specified on page 13 of the application?
9. For a screening operation please provide: (i) The total surface area of the top screen of the existing screening operation being replaced; (ii) the total surface area of the top screen of the replacement screening operation; (iii) the date of manufacture of such screens or classifiers. Have any of these assemblies ever been of a size or capacity different than specified on page 13 of the application?
10. For each belt conveyor: (i) The width and speed of the existing belt being replaced; (ii) the width and speed of the replacement conveyor belt. Have any of these conveyors ever been of a size or capacity different than specified on page 13 of the application?
11. Please indicate dates and results of any written reports all performance tests conducted to demonstrate compliance with the standards set forth in Section 62-297.310 (7)(a)4.a. Florida Administrative Code (FAC) or 40 CFR 60.672, including reports of opacity observations made using Method 9 to demonstrate compliance with 40 CFR 60.672(b), (c), and (f), and reports of observations using Method 22 to demonstrate compliance with 40 CFR 60.672(e).
12. Please specify the nature of any materials to be crushed or processed by this unit, whether quarry run lime-rock, concrete recycling, asphalt pavement recycling, specific other materials, or combinations thereof.
13. Please provide calculations indicating any VOC and Carbon Monoxide emissions from this facility, which would presumably be emitted by the internal combustion engines.
14. Please describe the precautions to prevent emissions of unconfined particulate material. If this is to be a water spray, indicate application rates in gallons per ton and location of spray nozzles. Also please describe precautions to be applied to storage piles, and haul road or yard areas.
15. Please verify that internal combustion engines will operate on commercial No. 2 virgin diesel fuel; Please provide the maximum sulfur content by weight of the fuel oil to be burned; the estimated daily fuel consumption; and describe amount and facilities for fuel oil storage.

The Department will resume processing your application after receipt of the requested information. Rule 62-4.050(3), F.A.C., requires that all applications for a Department permit must be certified by a professional engineer registered in the State of Florida. This requirement also applies to responses to Department requests for additional information of an engineering nature. Material changes to the application should also be accompanied by a new certification statement by the authorized representative or responsible official. Permit applicants are advised that Rule 62-4.055(1), F.A.C. now requires applicants to respond to requests for information within 90 days. If there are any questions, please call me at 850/921-9522.

Sincerely,

William Leffler, P.E.

WL

cc: Michael O'Berry, Authorized Representative, Florida Rock Industries, Inc.



One Thousand Two Hundred Fifty Dollars And 00 Cents \*\*\*\*\*

VOID AFTER 90 DAYS

PAY TO THE ORDER OF

Florida Department of Environmental Pro  
 Twin Towers Office Bldg  
 2600 Blair Stone Road  
 Tallahassee, FL 32399-2400

DATE  
04-FEB-00

CHECK AMOUNT  
\*\*\*\*\*1,250.00

*[Handwritten Signature]*  
 AUTHORIZED SIGNATURE  
SIGNATURE HAS A COLORED BACKGROUND • BORDER CONTAINS MICROPRINTING

NationsBank Customer Connection, NationsBank, N.A.



SUPPLIER NAME: Florida Department of Environmental Pro

SUPPLIER NUMBER: 2538

COMPANY: 1011

INVOICE NUMBER	INVOICE DATE	DESCRIPTION	DISCOUNT	AMOUNT
RELOCATECRUSH	28-JAN-00	CK-DONNA BAKER	0.00	1,250.00

**RECEIVED**  
 FEB 09 2000  
 BUREAU OF AIR REGULATION

THE ATTACHED CHECK IS IN PAYMENT FOR ITEMS DESCRIBED ABOVE

TOTAL \$0.00 \$1,250.00



**FLORIDA ROCK INDUSTRIES, INC.**  
 POST OFFICE BOX 4667 JACKSONVILLE, FLORIDA 32201

64-1278  
611

**CHECK NO.**  
1060005095

Two Thousand Two Hundred Fifty Dollars And 00 Cents \*\*\*\*\*

**VOID AFTER 90 DAYS**

**PAY TO THE ORDER OF**



Florida Department of Environmental Pro  
 Twin Towers Office Bldg  
 2600 Blair Stone Road  
 Tallahassee, FL 32399-2400

**DATE**  
04-FEB-00

**CHECK AMOUNT**  
\*\*\*\*\*2,250.00

*[Handwritten Signature]*  
 AUTHORIZED SIGNATURE  
 SIGNATURE HAS A COLORED BACKGROUND - BORDER CONTAINS MICROPRINTING

NationsBank Customer Connection, NationsBank, N.A.



**FLORIDA ROCK INDUSTRIES, INC.**  
 POST OFFICE BOX 4667 JACKSONVILLE, FLORIDA 32201

DATE 04-FEB-00 PAGE 1  
 CHECK NUMBER: 1060005095

SUPPLIER NAME: Florida Department of Environmental Pro SUPPLIER NUMBER: 2538 COMPANY: 1011

INVOICE NUMBER	INVOICE DATE	DESCRIPTION	DISCOUNT	AMOUNT
RELOCATEUNIT	28-JAN-00	CK-DONNA BAKER	0.00	2,250.00

**RECEIVED**  
 FEB 09 2000  
 BUREAU OF AIR REGULATION

THE ATTACHED CHECK IS IN PAYMENT FOR ITEMS DESCRIBED ABOVE

**TOTAL \$0.00 \$2,250.00**



**FLORIDA ROCK INDUSTRIES, INC.**  
 POST OFFICE BOX 4667 JACKSONVILLE, FLORIDA 32201

64-1278  
611

**CHECK NO.**  
1060005093

One Thousand Two Hundred Fifty Dollars And 00 Cents\*\*\*\*\*

**VOID AFTER 90 DAYS**

**PAY TO THE ORDER OF**

Florida Department of Environmental Pro  
 Twin Towers Office Bldg  
 2600 Blair Stone Road  
 Tallahassee, FL 32399-2400

**DATE**  
04-FEB-00

**CHECK AMOUNT**  
\*\*\*\*\*1,250.00

*[Handwritten Signature]*  
 AUTHORIZED SIGNATURE  
 SIGNATURE HAS A COLORED BACKGROUND • BORDER CONTAINS MICROPRINTING

NationsBank Customer Connection, NationsBank, N.A.



**FLORIDA ROCK INDUSTRIES, INC.**  
 POST OFFICE BOX 4667 JACKSONVILLE, FLORIDA 32201

DATE 04-FEB-00 PAGE 1  
 CHECK NUMBER: 1060005093

SUPPLIER NAME: Florida Department of Environmental Pro SUPPLIER NUMBER: 2538 COMPANY: 1011

INVOICE NUMBER	INVOICE DATE	DESCRIPTION	DISCOUNT	AMOUNT
PERMITAIR	28-JAN-00	CK-DONNA BAKER	0.00	1,250.00

**RECEIVED**

FEB 09 2000

BUREAU OF AIR REGULATION

THE ATTACHED CHECK IS IN PAYMENT FOR ITEMS DESCRIBED ABOVE

**TOTAL \$0.00 \$1,250.00**



# FLORIDA ROCK INDUSTRIES, INC.

POST OFFICE BOX 4667 JACKSONVILLE, FLORIDA 32201

64-1278  
611

CHECK NO.  
1060005092

One Thousand Two Hundred Fifty Dollars And 00 Cents \*\*\*\*\*

VOID AFTER 90 DAYS

### PAY TO THE ORDER OF

Florida Department of Environmental Pro  
Twin Towers Office Bldg  
2600 Blair Stone Road  
Tallahassee, FL 32399-2400

DATE  
04-FEB-00

CHECK AMOUNT  
\*\*\*\*\*1,250.00

*[Handwritten Signature]*  
AUTHORIZED SIGNATURE  
SIGNATURE HAS A COLORED BACKGROUND • BORDER CONTAINS MICROPRINTING

NationsBank Customer Connection, NationsBank, N.A.



# FLORIDA ROCK INDUSTRIES, INC.

POST OFFICE BOX 4667 JACKSONVILLE, FLORIDA 32201

DATE 04-FEB-00 PAGE 1  
CHECK NUMBER: 1060005092

SUPPLIER NAME: Florida Department of Environmental Pro

SUPPLIER NUMBER: 2538

COMPANY: 1011

INVOICE NUMBER	INVOICE DATE	DESCRIPTION	DISCOUNT	AMOUNT
AIRPERMITCONST	28-JAN-00	CK-DONNA BAKER	0.00	1,250.00

RECEIVED  
FEB 09 2000  
BUREAU OF AIR REGULATION

THE ATTACHED CHECK IS IN PAYMENT FOR ITEMS DESCRIBED ABOVE

TOTAL \$0.00 \$1,250.00



**FLORIDA ROCK INDUSTRIES, INC.**

POST OFFICE BOX 4667 JACKSONVILLE, FLORIDA 32201

64-1278  
611

CHECK NO.  
1060005091

Two Thousand Two Hundred Fifty Dollars And 00 Cents \*\*\*\*\*

VOID AFTER 90 DAYS

PAY TO THE ORDER OF



Florida Department of Environmental Pro  
Twin Towers Office Bldg  
2600 Blair Stone Road  
Tallahassee, FL 32399-2400

DATE  
04-FEB-00

CHECK AMOUNT  
\*\*\*\*\*2,250.00

*[Handwritten Signature]*  
AUTHORIZED SIGNATURE  
SIGNATURE HAS A COLORED BACKGROUND - BORDER CONTAINS MICROPRINTING

NationsBank Customer Connection, NationsBank, N.A.



**FLORIDA ROCK INDUSTRIES, INC.**

POST OFFICE BOX 4667 JACKSONVILLE, FLORIDA 32201

DATE 04-FEB-00 PAGE 1

CHECK NUMBER: 1060005091

SUPPLIER NAME: Florida Department of Environmental Pro

SUPPLIER NUMBER: 2538

COMPANY: 1011

INVOICE NUMBER	INVOICE DATE	DESCRIPTION	DISCOUNT	AMOUNT
AIRCONSPERMIT	28-JAN-00	CK-DONNA BAKER	0.00	2,250.00

RECEIVED  
FEB 09 2000  
BUREAU OF AIR REGULATION

THE ATTACHED CHECK IS IN PAYMENT FOR ITEMS DESCRIBED ABOVE

TOTAL \$0.00 \$2,250.00



# FLORIDA ROCK INDUSTRIES, INC.

POST OFFICE BOX 4667 JACKSONVILLE, FLORIDA 32201

64-1278  
611

CHECK NO.  
1060004780

One Thousand Two Hundred Fifty Dollars And 00 Cents\*\*\*\*\*

VOID AFTER 90 DAYS

PAY TO THE ORDER OF



DATE  
14-JAN-00

CHECK AMOUNT  
\*\*\*\*\*1,250.00

Florida Department of Environmental Pro  
South District  
2295 Victoria Ave Suite 364  
Ft Myers, FL 33901-3881

*[Handwritten Signature]*  
AUTHORIZED SIGNATURE

NationsBank Customer Connection, NationsBank, N.A.

SIGNATURE HAS A COLORED BACKGROUND • BORDER CONTAINS MICROPRINTING



# FLORIDA ROCK INDUSTRIES, INC.

POST OFFICE BOX 4667 JACKSONVILLE, FLORIDA 32201

DATE 14-JAN-00 PAGE 1

CHECK NUMBER: 1060004780

SUPPLIER NAME: Florida Department of Environmental Pro

SUPPLIER NUMBER: 2538

COMPANY: 1011

INVOICE NUMBER	INVOICE DATE	DESCRIPTION	DISCOUNT	AMOUNT
AIRPERMITJAN	12-JAN-00	CK-DONNA BAKER	0.00	1,250.00

THE ATTACHED CHECK IS IN PAYMENT FOR ITEMS DESCRIBED ABOVE

TOTAL \$0.00 \$1,250.00

# INTEROFFICE MEMORANDUM

**Sensitivity:** COMPANY CONFIDENTIAL

**Date:** 28-Jan-2000 02:22pm  
**From:** William Leffler TAL  
LEFFLER\_W  
**Dept:** Air Resources Management  
**Tel No:** 850/488-1344 222-3146 (home)

**To:** Thomas Tittle WPB ( TITTLE\_T @ A1 @ WPB1 )

**Subject:** St lucie Quarry Unit 6 Refurbish and statewide permitting of Cedar Rapids Crusher.

Tom:

Would you all forward any information that you have on this unit. I know it is an old transportable machine that has been on "standby" service for several years. I cannot tell from the application how much work is being done to it, whetere it is being repowered or otherwise made subject to subpart 000 NSPS.

some descrete photographs and dates of last observed operations would be helpful.

Bill Leffler