## CONCRETE BATCHING PLANTS AIR GENERAL PERMIT EXAMPLE REGISTRATION WORKSHEET

Facility Identification Number - If known (seven digit number)

0950012 0950012 - 305
Registration Type
Check one:  INITIAL REGISTRATION - Notification of intent to:  Construct and operate a proposed new facility.  Operate an existing permitted facility not currently using an air general permit (e.g., a facility proposing to go from an air operation permit to an air general permit). If the facility currently holds one or more air operation permits, such permit(s) must be surrendered by the owner or operator upon the effective date of this air general permit. (See "Surrender of Existing Air Operation Permit(s)" below.)  Operates an existing facility not currently permitted or using an air general permit.  RE-REGISTRATION (for facilities currently using an air general permit) - Notification of intent to:  Continue operating the facility after expiration of the current term of air general permit use.  Continue operating the facility after a change of ownership.  Make an equipment change requiring re-registration pursuant to Rule 62-210.310(2)(e), F.A.C.  Any other change not considered an administrative correction under Rule 62-210.310(2)(d), F.A.C.
Surrender of Existing Air Operation Permit(s) - For Initial Registrations Only, if Applicable  All existing air operation permits for this facility are hereby surrendered upon the effective date of this air general permit; specifically permit number(s):
General Facility Information
Facility Owner/Company Name (Name of corporation, agency, or individual owner who or which owns, leases, operates, controls, or supervises the facility.)  Preferred Materials, Inc.
Site Name (Name, if any, of the facility site; e.g., Plant A, Metropolis Plant, etc. If more than one facility is owned, a complete registration must be submitted for each.)  Winter Garden Plant
Facility Location (Physical location of the facility, not necessarily the mailing address.)  Street Address: 201 Hennis Road
City: Winter Garden County: Orange Zip Code: 34787
Facility Start-Up Date (Estimated start-up date of proposed new facility.)(N/A for existing facility.)

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DIVISION OF AIR

1 acing	y Contact		
	and Position Title (Plant manager or person to be lame and Title: Darryl Fales, President (Authorized I		ay operations at the facility.)
Teleph Cell ph	y Contact Telephone Numbers  none:  Darryl.Fales@preferredmaterials.com	Fax: 239-229-675	50
Organi Mailin	y Contact Mailing Address zation/Firm: Preferred Materials, Inc. g Address: 25061 Old US 41 South tonita Springs	County: Lee	Zip Code: <u>34135</u>
Corres	spondence Contact/Representative (to serve as	additional Department cont	act)
Name a	and Position Title  Jame and Title: Erin Zimmet, Environmental Manager		
Teleph Cell ph	pondence Contact/Representative Telephone Nur one: 386-257-5504 none: : Erin Zimmet@oldcastlematerials.com	mbers Fax: <u>386-239</u> -354	17
Organi	pondence Contact/Representative Mailing Addre zation/Firm: Preferred Materials, Inc. g Address: 13101 Telecom Drive, Suite 101 ampa	SS  County: Hillsborough	Zip Code: <u>33637</u>
Gover	nment Facility Code (check only one)		
	Facility not owned or operated by a federal,  Facility owned or operated by the federal go		
	Facility owned or operated by the state.  Facility owned or operated by the county.		·
	Facility owned or operated by the municipal	lity.	
	Facility owned or operated by a water mana	•	2012 MA
			N-2 M 9:50

Check one:  Stationary Facility		Relocatable Facility			
Type(s) of Reasona	able Precautions Used to	Prevent Unconfined En	nissions		
Check all precauti	ons to be used for the ma	nagement of roads, parking	ng areas, stock piles and	yards:	
☐ Pave Roads ■ Maintain Roads/Parking/Yards ☐ Remove Particulate Matter		■ Pave Parking Areas       □ Pave Yards         ■ Use Water Application       □ Use Dust Suppressant         ■ Reduce Stock Pile Height       □ Install Wind Breaks			
Check all precauti	ons to be used for the ma	nagement of drop points	to trucks:		
☐ Spray Bar		Chute	Enclosure		
		Partial enclosure			
F.A.C.  ROCESS  QUIPMENT TYPE  ilo, weigh hopper,  atcher, etc.)	PROCESS EQUIPMENT IDENTIFICATION*	CONTROL DEVICE (baghouse, vent filter, etc.)	CONTROL DEVICE MANUFACTURER	CONTROL DEVICE MODEL NUMBER	
Cement Silo		Baghouse	C & W	CP 305	
Flyash Silo		Baghouse	C&W	CP 305	
Slag Silo		Baghouse	C & W	CP 305	
Weigh Hopper		Baghouse	Unknown		
(location, numeric d	esignation, capacity or pr	es of process equipment (roduct) specific to each pi		provide an identifier	
Description of Faci		ide a description of the co	oncrete batching plant on	erations at the	
facility in sufficient a basis for tracking a manufactured, all air	detail to demonstrate the any future equipment or p r pollutant-emitting proce	ide a description of the confacility's eligibility for use process changes at the factorses, and identify any air feg.: trucks, bulldozers, from	se of this air general pern ility. Describe type of co pollution control measur	nit and to provide oncrete product(s)	
The facility cons aggregate mater	ists of an office, agg rial conveying equip	regate storage area ment and concrete n	s, batch plant, stora nixing trucks.	NEW MA	
	rated during pneuma .W CP 305 baghous	atic filling of the ceme es.	ent, flyash, and slag	silos arec.	

Emissions generated from truck loading operations are controlled by a central dust collector. The central dust collectors is a C&W CP 900 baghouse.

## **Owner/Authorized Representative Statement**

This statement must be signed and dated by the person named above as owner or authorized representative.

I, the undersigned, am the owner or authorized representative of the owner or operator of the facility addressed in this Air General Permit Registration Form. I herby certify, based on information and belief formed after reasonable inquiry, that the facility addressed in this registration form is eligible for use of this air general permit and that the statements made in this registration form are true, accurate and complete. Further, I agree to operate and maintain the facility described in this registration form so as to comply with all applicable standards for control of air pollutant emissions found in the statutes of the State of Florida and rules of the Department of Environmental Protection and revision thereof.

I will promptly notify the Department of any changes to the information contained in this registration form.

Signature

Date

Darryl Fales, President