AT#1369





READY-MIX CONCRETE GENERAL PERMIT **RE-COVERAGE FORM**

FOR COVERAGE UNDER MISSISSIPPI'S REISSUED MULTIMEDIA READY-MIX CONCRETE GENERAL PERMIT MSG11 GENERAL NPDES COVERAGE NO. MSG11 0 1 4 8

INS	STRUCTIONS		
The submittal of this form is required to receive cover This form must be completed and returned to the add Letter of Instruction for Re-Coverage.	age under the Ready-Mix ress printed at the bottom	Concrete Multimed of page 2 within 90	ia General Permit. days of the date of the
Amendments to the Storm Water Pollution Prevention or is ineffective in controlling storm water pollutants.	a Plan (SWPPP) are requi	red to be attached if	the plan is not current
The applicant must be the owner or operator (legal en manager or environmental consultant). The owner or compliance.	tity that controls the facili operator that receives cov	ty's operation, rathorerage is responsible	er than the plant/site for permit
If the facility is out of business or no longer active, pleatermination (RFT) Form found in the Ready-Mix Conwastewater and/or operate air emission equipment with	ncrete Forms Package. Fa	cilities that continue	e to discharge
This recoverage form is not required to be submitted i ALL INFORMATION REQUESTS MUS		SUBJECT	
Certificate of Coverage should be mailed to:	owner/operator	✓ facility	(please check one)
Discharge Monitoring Reports should be mailed to:	owner/operator	✓ facility	(please check one)
✓ OWNER ✓ OPERATOR	INFORMATION (CH	ECK ONE OR BO	ОТН)

CONTACT NAME & POSITION: Britton Spencer, Operations Manager COMPANY NAME: Spencer Ready Mix, Inc. STREET OR P.O. BOX: 9161 Highway 49 N ZIP: 39209 CITY: Jackson STATE: MS PHONE NUMBER (INCLUDE AREA CODE): 601-981-6080

FACILITY/SITE INFORMATION

CONTACT PHONE NUMBER (INCLUDE AREA CODE): 601-481-6050 PRIMARY STANDARD INDUSTRIAL CLASSIFICATION (SIQ CODE & DESCRIPTION OF INDUSTRIAL ACTIVITY: (2 2 7 3) Ready meet concrete manufacturing BATCHING TYPE: WET DRY CENTRAL MIX CALL SITE ADDRESS (IF NOT AVAILABLE INDICATE NEAREST NAMED ROAD): STREET: 9161 Highway 49 N CITY: Jackson COUNTY: Hinds	FACILITY NAME: Spencer Ready Mi	x					
PRIMARY STANDARD INDUSTRIAL CLASSIFICATION (SIC) CODE & DESCRIPTION OF INDUSTRIAL ACTIVITY: (3 2 7 3) Ready moved concents manufacturing BATCHING TYPE: WET DRY CENTRAL MIX PLANT PRODUCTION RATE: average 25	CONTACT NAME & POSITION:						
BATCHING TYPE: WET DRY CENTRAL MIX PLANT PRODUCTION RATE: average 25 cubic yards/hr PHYSICAL SITE ADDRESS (IF NOT AVAILABLE INDICATE NEAREST NAMED ROAD): STREET: 9161 Highway 49 N CITY: Jackson COUNTY: Minds ZIP: 39209 PROVIDE THE LATITUDE AND LONGITUDE OF EACH WASTEWATER OUTFALL (If no discharge, provide the coordinates of the plant entrance. Attach additional pages, if necessary.) LATITUDE: 32 degrees 24 minutes 18.6 seconds LONGITUDE: 90 degrees 17 minutes 04.8 seconds LATITUDE: 32 degrees 24 minutes 18.6 seconds LONGITUDE: 90 degrees 17 minutes 04.8 seconds NEAREST NAMED WATERBODY STORM WATER LEAVING THE SITE WILL ENTER: Bogue Chito Creek STORM WATER POLLUTION PREVENTION PLAN (SWPPP) 1. IS A COPY OF THE SWPPP AT THE PERMITTED SITE: YES NO 3. DOES THE SWPPP MEET THE REQUIRMININIS LISTED IN ACT'S IS ANDOR'S YES NO OF THE GENERAL PERMIT* IF NO, PLEASE ATTACH THE AMENDMENT SWPPP 1. Is a copy of the sweet that qualified personnel property gathered and evaluated the information submitted. Based on my inquiry reproson operators who manage the system, or those persons directly responsible for gathering the information submitted. Based on my inquiry reproson operators who manage the system, or those persons directly responsible for gathering the information submitted. Based on my inquiry reprosoned persons who manage the system, or those persons directly responsible for gathering the information submitted. Based on my inquiry in formation including the possibility of fines and impresonment for Knowing violations for submitting false information including the possibility of fines and impresonment for Knowing violations and discharge wastewater or storm water associated with industrial activity that the project continues as described in the original notice of intent. Also, I certify that I understand when coverage is terminated I am no longer authorized to emit regulated air emissions and discharge wastewater or storm water associated with industrial activity to mean and information including the possibil							
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P.O. Box 2261	After signing please mail to:			in a Control			

Page 2 of 2

Revised: 03/05/14