



DEPARTMENT OF ENVIRONMENT AND CONSERVATION DIVISION OF AIR POLLUTION CONTROL

William R. Snodgrass Tennessee Tower 312 Rosa L. Parks Avenue, 15th Floor, Nashville, TN 37243 Telephone: (615) 532-0554, Email: Air.Pollution.Control@TN.gov

NON-TITLE V PERMIT APPLICATION FACILITY IDENTIFICATION

| | Тур | e or print and sub | mit. Atta | ach a | ppropriate so | ource descrip | tior | n forms. | | |
|--------------------------------|---|--------------------|-----------|----------------|---------------------|---------------|-----------------------------|-----------------------------|--|--|
| | | | SITE | INF | ORMATION | | | | | |
| 1. 0 | 1. Organization's legal name and SOS control number [as registered with the TN Secretary of State (SOS)] | | | | | | | | | |
| Nashv | rille Ready Mix of Co | olumbia, LLC | | | | | | | | |
| 2. Si | 2. Site name (if different from legal name) | | | | | | | | | |
| | Is a construction permit application fee being submitted? Yes No (see instructions for appropriate fee to submit) | | | | | | | | | |
| 4. Si | te address (St./Rd./ | /Hwy.) | | | County name | | | | | |
| 453 Th | 453 Theta Pike | | | | | | | Maury | | |
| Ci | ity | | | Zip | code | 5. | | 5. NAICS or SIC code | | |
| Colum | Columbia 38401 | | | | | | | 3273 | | |
| 6. Si | in lat. /long.) Latitude 35.650467 | | | | Longitude | | | | | |
| (ir | | | | | -87.029140 | | | | | |
| | CONTACT INFORMATION (RESPONSIBLE PERSON) | | | | | | | | | |
| 7. R | Responsible person/Authorized contact | | | | | | | Phone number with area code | | |
| Richar | d Farmer | | | | | 615-294-46 | 615-294-4672 | | | |
| Mailing address (St./Rd./Hwy.) | | | | | | Fax numb | Fax number with area code | | | |
| 605 Cowan Street | | | | 61 | | 615-256-23 | 615-256-2352 | | | |
| Ci | City | | | State Zip code | | Email address | | | | |
| Nashville | | | TN 37207 | | rfarmer@nrm1987.com | | | | | |
| | | CONT | ACT INF | ORM | ATION (TEC | HNICAL) | | | | |
| 8. Principal technical contact | | | | | | Phone nui | Phone number with area code | | | |
| Arup Bandyopadhyay | | | | | | 615-337-66 | 615-337-6636 | | | |
| Mailing address (St./Rd./Hwy.) | | | | | | Fax numb | Fax number with area code | | | |
| P.O. Box 877 | | | | | | | | | | |
| City | | | State Z | | Zip code | Email add | Email address | | | |
| Hermitage TN | | | TN | | 37076 | arup@envcompl | | npliancesvc.com | | |
| | | CON | NTACT IN | IFOR | MATION (BI | LLING) | | | | |
| 9. Billing contact | | | | | | Phone nui | Phone number with area code | | | |
| Jennifer Meadows | | | | | | 615-256-20 | 615-256-2071 | | | |
| Mailing address (St./Rd./Hwy.) | | | | | | Fax numb | Fax number with area code | | | |
| 605 Cowan Street | | | | | | 615-256-23 | 352 | | | |
| City State | | | | | Zip code | Email add | Email address | | | |
| Nashville | | | TN | | 37207 | jmeadows | @ni | rm1987.com | | |

| | AIR CONTAIN | JINANT SOL | URCE(S) INF | ORMATION | | | | |
|---|--|-------------------------|-------------------------------------|---|--|--|--|--|
| process emissi and include a U uniquely identi | Description of air contaminant source(s) and Unique Source ID(s). List, identify, and briefly describe process emission sources, fuel burning installations, and incinerators that are contained in this application and include a Unique Source ID for each source. The Unique Source ID is a name/number/letter, which uniquely identifies the air contaminant source(s), like Boiler #1, Paint Line #1, Engine #1, etc. (see instructions for more details) | | | | | | | |
| Cement Silo Baghou | ıse #1 | | | | | | | |
| Fly Ash Silo Baghous Silo-To-Weigh-Batch | | | | | | | | |
| Silo 10 Weight Bater | ici 208/1003c ii i | | | | | | | |
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| | nminant source(s) in a no | onattainme | nt area? If | "Yes", then minor | source BACT must be | | | |
| addressed. Ye | - - | | | | | | | |
| 42 No. |] [/] | D | | Marila Maria | 15 6 | | | |
| 12. Normal operation: | Hours/Day 8 Hours/Day | Days/Week 5 Days/Wee | | Weeks/Year 52 Weeks/Year | Days/Year 260 Days/Year | | | |
| 13. Percent annua | | March – M | | June - August | Sept. – Nov. | | | |
| throughput | 15% | 35% | | 35% | 15% | | | |
| 14. Operating | TYPE OF PERMIT | | D (check a) completed | ompleted Date of ownership change (if applicable) | | | | |
| permit | 7 1 1 | N/A | completed | Date of Ownershi | bate of ownership change (if applicable) | | | |
| | Last permit number(s) |) | Emission Source Reference Number(s) | | | | | |
| | 062382P | | 60-0165-01 | | | | | |
| Constant | Control | | | Emission Source Reference Number(s) | | | | |
| permit | Construction Last permit number(s) | | | Emission source reference number(s) | | | | |
| • | | | | | | | | |
| If you chose Construction permit above, then choose either New Construction, Modification, or Location Transfer | | | | | | | | |
| New Construction | ew Construction Starting date | | | Completion date | | | | |
| Modification | dification Date modification started or will start | | | Date completed or will complete | | | | |
| Location Transfer | ation Transfer Transfer date | | | Address of last location | | | | |

| or operating permit application: | | | | | | | |
|--|--|--------------|--|--|--|--|--|
| We have installed new filter baghouses on the Cement Silo #1 and Fly Ash #1 and rebuilt the baghouse for the | | | | | | | |
| Silo-To-Weigh-Batcher-Baghouse. | | | | | | | |
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| 16. Comments | | | | | | | |
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| SIGNATURE | | | | | | | |
| Based upon information and belief formed after a reasonable inquiry, I, as the responsible person of the above mentioned facility, certify that the information contained in this application is accurate and true to the best of my | | | | | | | |
| knowledge. As specified in TCA Section 39-16-702(a)(4), this declaration is made under penalty of perjury. | | | | | | | |
| 17. Signature (application must be signed | 17. Signature (application must be signed before it will be processed) Date | | | | | | |
| Richard Farer 6/6/18 | | | | | | | |
| Signer's name (type or print) Title Phone number with area code | | | | | | | |
| Richard Farmer | Technical Sales Manager | 615-256-2071 | | | | | |