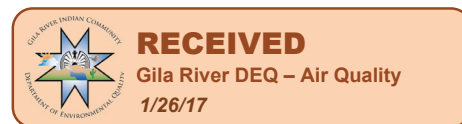




Deliver or Mail all Applications to:
Gila River Indian Community DEQ
Air Quality Program
1576-A South Nelson Road
Chandler, AZ 85226



LOG NUMBER

RENEWAL APPLICATION FOR NON-TITLE V AIR QUALITY PERMIT

(As required by Gila River Indian Community Air Quality Management Plan Title 17 Chapter 9)

RENEWAL APPLICATIONS MUST BE SUBMITTED AT LEAST SIX MONTHS, BUT NOT MORE THAN 18 MONTHS, PRIOR TO THE DATE OF PERMIT EXPIRATION.

1. EXISTING PERMIT NUMBER: 12-0001		PERMIT EXPIRATION DATE: 8/8/2017	
2. WILL THERE BE ANY CHANGES TO THE OPERATING SCENARIO(S) FROM THAT DEFINED IN THE EXISTING PERMIT?		YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	IF YES, SUBMIT AN APPLICATION FOR NON-TITLE V PERMIT (IN ADDITION TO THIS RENEWAL APPLICATION). REFER TO PART II, SECTION 5.4 AND 5.5 OF THE AIR QUALITY MANAGEMENT PLAN (AQMP) AND CONDITION 16 OF THE EXISTING PERMIT TO DETERMINE WHETHER A MINOR OR SIGNIFICANT REVISION IS NEEDED.
3. WILL THERE BE ANY NEW, MODIFIED, OR RECONSTRUCTED STATIONARY SOURCES OR AIR POLLUTION CONTROL EQUIPMENT FROM THAT DEFINED IN THE EXISTING PERMIT?		YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
4. ARE THERE ANY EMISSIONS PRESENT THAT HAVE NOT BEEN CORRECTLY IDENTIFIED AND DEFINED IN THE CURRENT PERMIT?		YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
5. WILL THERE BE ANY CHANGES THAT TRIGGER ANY OTHER NEW APPLICABLE REQUIREMENTS?		YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
6. HAS THE OWNERSHIP OF THIS FACILITY CHANGED SINCE THE PERMIT WAS LAST ISSUED OR TRANSFERRED?		YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	IF YES, SUBMIT A NOTICE OF PERMIT TRANSFER IN ACCORDANCE WITH PART II, SECTION 4.7 OF THE AQMP
7. BUSINESS NAME:		Superlite Block	
8. ADDRESS OF SITE:		6741 W. Germann Rd.	
		CITY: Chandler	STATE: AZ ZIP CODE: 85226
9. CONTACT PERSON AT SITE: Dave Burrows		a. TELEPHONE: 616-318-3037	
		b. EMAIL david.burrows@oldcastle.com	
10. NAME AND ADDRESS OF OWNERSHIP OR LEGAL ENTITY:		Superlite Block	
		4150 W. Turney Ave	
		Phoenix, AZ 85019	
11. OWNERSHIP CONTACT: Nick Nordstrom		a. TELEPHONE: 602-352-3500	
		b. FAX: 602-352-3813	
12. SEND ALL CORRESPONDENCE INCLUDING INVOICE AND PERMIT TO:		COMPANY NAME: Superlite Block	
		ADDRESS: 4150 W. Turney Ave.	
		CITY: Phoenix	STATE: AZ ZIP CODE: 85019
		ATTN: Ryan Pierce	

13. THE AUTHORIZED CONTACT PERSON REGARDING THIS APPLICATION IS:

NAME: Ryan Pierce

TELEPHONE: 602-501-9637

TITLE: EH&S Director

FAX: 602-352-3868

COMPANY: Superlite Block

E-MAIL: ryan.pierce@oldcastle.com

14. I CERTIFY THAT I AM FAMILIAR WITH THE OPERATIONS REPRESENTED ON THIS APPLICATION AND THE INFORMATION PROVIDED HEREIN IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

SIGNATURE OF OWNER OR

RESPONSIBLE OFFICIAL OF BUSINESS:

DATE: 1/25/2017

TYPE OR PRINT NAME AND TITLE: Nick Nordstrom VP of Operations