

Bryan W. Shaw, Ph.D., P.E., *Chairman*  
Toby Baker, *Commissioner*  
Zak Covar, *Commissioner*  
Richard A. Hyde, P.E., *Executive Director*



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY  
*Protecting Texas by Reducing and Preventing Pollution*

April 3, 2015

MR SCOTT CLEVELAND

ANDERSON COLUMBIA CO INC  
PO BOX 1829  
LAKE CITY FL 32056-1829

Re: Change in Ownership  
Customer Number: CN603641549

Dear Mr. Cleveland:

Thank you for your request received on April 2, 2015, notifying us of the change in ownership. Your letter states that ANDERSON COLUMBIA CO., INC. is now the Owner and Operator of the facility or facilities listed in the enclosed document. Our records have been updated to reflect this change.

We understand that there will be no change in the type of pollutants emitted and no increase in the quantity of emissions. As the new permittee/registrant, you have committed to maintain compliance with all air quality regulations and applicable rule requirements of the Texas Commission on Environmental Quality.

Thank you for informing us of this change in ownership. If you have any questions regarding this letter, please feel free to contact Ms. Brooke Grunnet at (512) 239-1339.

Sincerely,

A handwritten signature in black ink that reads "Johnny D. Bowers".

Johnny D. Bowers, Team Leader  
Air Permits Initial Review Team  
Air Permits Division  
Texas Commission on Environmental Quality

JDB/bg

cc: Air Section Manager, Region 16 - Laredo  
Mr. Mark Chambers, Emissions Assessment Section (MC-164), Austin  
Mr. Adam Bullock, Emissions Assessment Section (MC-164), Austin  
Ms. Jeanette Emanuel, Emissions Assessment Section (MC-164), Austin  
TCEQ Central Records (MC-198)

Enclosure

Change in Ownership Table

Regulated Entity Number	Account Number	Permit / Registration Number	Permit / Registration Expiration Date	Previous Permittee / Registrant	TCEQ Region	County
RN103004081	95-0261-O	74746L001	April 12, 2015	Brothers Materials, Ltd	16 - Laredo	Webb
RN103004081	95-0261-O	74746L002	August 29, 2017	Brothers Materials Ltd	16 - Laredo	Webb
RN103004081	95-0261-O	92706	September 16, 2020	Brothers Materials Ltd	16 - Laredo	Webb
RN103004099	WE-0319-D	50051	NA	Brothers Materials Ltd	16 - Laredo	Webb

## Brooke Grunnet

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**From:** Brooke Grunnet  
**Sent:** Friday, April 03, 2015 10:15 AM  
**To:** SCOTT.CLEVELAND@ANDERSONCOLUMBIA.COM  
**Cc:** JBUTLER@WESTWARDENV.COM; RFCAIR16; Mark Chambers; Adam Bullock; Jeanette Emanuel  
**Subject:** Change in Ownership for ANDERSON COLUMBIA CO., INC.  
**Attachments:** 232119.Docx

Scott Cleveland,

This is confirmation that your request for change in ownership received on April 2, 2015 has been completed. Please refer to the attached letter for more details.

Thank you,

Brooke Grunnet







Texas Commission on Environmental Quality  
Air Permits Division  
Change of Name/Ownership Form

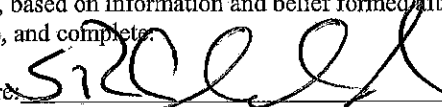
APR 02 2015  
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<b>I. Application Type</b>		
<input checked="" type="checkbox"/> Change in Ownership <input type="checkbox"/> Change in Company Name		
<b>II. Name of the New Owner or Operator of the Facilities or Equipment (Legal Entity Name of the new permittee)</b>		
A. Customer Name: Anderson Columbia Co., Inc. ✓		
B. Customer Reference Number (CN) (if issued): 603641549 ✓		
C. Submittal Date:		
D. Effective Date of Change: 3/1/15 <sup>re</sup> per Josh		
E. Is the new owner an affiliate of the previous owner?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
<b>III. Responsible Official (RO) Contact Information</b>		
Name ( <input checked="" type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr.): Scott Cleveland		
Title:		
Company Name: Anderson Columbia Co., Inc.		
Mailing Address: P.O. Box 1829		
City: Lake City	State: FL	Zip Code: 32056
Territory:	Country:	
Foreign Postal Code:	Internal Mail Code:	
Telephone No.: 386-752-7585	Fax No.:	
E-mail Address: Scott.Cleveland@andersoncolumbia.com		
<b>IV. Technical Contact Information</b>		
Name ( <input checked="" type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr.): Josh Butler		
Title: Environmental Specialist		
Company Name: Westward Environmental		
Mailing Address: P.O. Box 2205		
City: Boerne	State: TX	Zip Code: 78006
Territory:	Country:	
Foreign Postal Code:	Internal Mail Code:	
Telephone No.: 830-249-8284	Fax No.: 830-249-0221	
E-mail Address: jbutler@westwardevn.com		
<b>V. Site Information</b>		
A. Site Name: Asphalt Concrete Plant and Rock Crushing Plant		
B. Regulated Entity Number (RN) (if issued): 103004099 and 103004081		
C. Account Number (if issued):		



**Texas Commission on Environmental Quality  
Air Permits Division  
Change of Name/Ownership Form**

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<b>V. Site Information (continued)</b>								
<b>D.</b> If action is transfer of ownership, is the change for the entire site?							<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	
<b>E.</b> If action is transfer of ownership for a portion of the existing site, will the new site be a major source?							<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A	
<b>F.</b> Indicate all pollutants for which the site is a major source based on the site's potential to emit.								
Pollutant:	VOC	NO <sub>x</sub>	SO <sub>2</sub>	PM <sub>10</sub>	CO	PB	HAPs	Other
Major at the Site (YES/NO):	NO	NO	NO	NO	NO	NO	NO	N/A
<b>VI. Air Authorizations That Are Affected By This Action</b>								
<b>A.</b> List all NSR authorizations (including PBR, SE, and standard permit registrations, and NSR permits), as applicable: PBR 50051 & Standard Permit No. 92706								
<b>B.</b> List all FOPs (including SOPs and ATOs under GOPs), as applicable: N/A								
<b>VII. NSR Conditions for Change of Ownership under 30 TAC § 116.110(e)</b>								
<ul style="list-style-type: none"> <li>• The new owner agrees to be bound by all the permit conditions and all representations made in the permit and any amendments and alterations.</li> <li>• The new owner asserts there will be no change in the type of pollutants emitted.</li> <li>• The new owner asserts there will be no increase in the quantity emitted.</li> </ul>								
<b>VIII. FOP Conditions for Change of Ownership</b>								
<ul style="list-style-type: none"> <li>• For SOP holders: Pursuant to 30 TAC § 122.210 and § 122.211, the permit holder (new owner) is required to submit a permit revision application for a change to the permit identification of ownership or operational control of a site. The change must be facilitated by a written agreement containing a specific date for transfer of permit responsibility, coverage, and liability between the old and new permit holder. This written agreement is maintained with the permit.</li> <li>• For GOP holders: Pursuant to 30 TAC § 122.503, the permit holder (new owner) is required to submit (before the change is operated) an application for a new authorization to operate for a change to the permit identification of ownership or operational control of a site. The change must be facilitated by a written agreement containing a specific date for transfer of permit responsibility, coverage, and liability between the old and new permit holder. This written agreement is maintained with the permit.</li> </ul>								
<b>A.</b> Are any other changes needed for the FOP? <i>(If YES, submit the information as explained in the instructions.)</i>							<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
<b>B.</b> Is there an Acid Rain permit or Clean Air Interstate Rule (CAIR) permit included in the SOP? <i>(If YES, submit the information as explained in the instructions.)</i>							<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
<b>IX. Authorization</b>								
I, <u>Scott Cleveland</u> , certify that I am the responsible official for this application and that, based on information and belief formed after reasonable inquiry, the statements and information on this form are true, accurate, and complete.								
Signature: <u></u>					Signature Date: <u>3/15/15</u>			
Title: Environmental Director								



# TCEQ Core Data Form

TCEQ Use Only

For detailed instructions regarding completion of this form, please read the Core Data Form Instructions or call 512-239-5175.

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## SECTION I: General Information

1. Reason for Submission (If other is checked please describe in space provided)			
<input type="checkbox"/> New Permit, Registration or Authorization (Core Data Form should be submitted with the program application)			
<input type="checkbox"/> Renewal (Core Data Form should be submitted with the renewal form)	<input checked="" type="checkbox"/> Other	<b>Change of Ownership</b>	
2. Attachments Describe Any Attachments: (ex. Title V Application, Waste Transporter Application, etc.)			
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Change of Ownership Form		
3. Customer Reference Number (if issued)	Follow this link to search for CN or RN numbers in Central Registry**	4. Regulated Entity Reference Number (if issued)	
CN 603641549		RN 103004099	

## SECTION II: Customer Information

5. Effective Date for Customer Information Updates (mm/dd/yyyy)							
6. Customer Role (Proposed or Actual) – as it relates to the Regulated Entity listed on this form. Please check only one of the following:							
<input type="checkbox"/> Owner	<input type="checkbox"/> Operator	<input checked="" type="checkbox"/> Owner & Operator					
<input type="checkbox"/> Occupational Licensee	<input type="checkbox"/> Responsible Party	<input type="checkbox"/> Voluntary Cleanup Applicant	<input type="checkbox"/> Other: _____				
7. General Customer Information							
<input type="checkbox"/> New Customer	<input type="checkbox"/> Update to Customer Information	<input checked="" type="checkbox"/> Change in Regulated Entity Ownership					
<input type="checkbox"/> Change in Legal Name (Verifiable with the Texas Secretary of State)				<input type="checkbox"/> No Change**			
<b>**If "No Change" and Section I is complete, skip to Section III – Regulated Entity Information.</b>							
8. Type of Customer:				<input checked="" type="checkbox"/> Corporation	<input type="checkbox"/> Individual	<input type="checkbox"/> Sole Proprietorship- D.B.A.	
<input type="checkbox"/> City Government	<input type="checkbox"/> County Government	<input type="checkbox"/> Federal Government		<input type="checkbox"/> State Government			
<input type="checkbox"/> Other Government	<input type="checkbox"/> General Partnership	<input type="checkbox"/> Limited Partnership		<input type="checkbox"/> Other: _____			
9. Customer Legal Name (If an individual, print last name first, ex. Doe, John)						If new Customer, enter previous Customer End Date	
Anderson Columbia Co., Inc.							
10. Mailing Address:							
P.O. Box 1829							
City	Lake City	State	FL	ZIP	32056	ZIP + 4	
11. Country Mailing Information (if outside USA)				12. E-Mail Address (if applicable)			
13. Telephone Number			14. Extension or Code		15. Fax Number (if applicable)		
( 386 ) 752-7585					( ) -		
16. Federal Tax ID (9 digits)		17. TX State Franchise Tax ID (11 digits)		18. DUNS Number (if applicable)		19. TX SOS Filing Number (if applicable)	
20. Number of Employees						21. Independently Owned and Operated?	
<input type="checkbox"/> 0-20	<input type="checkbox"/> 21-100	<input type="checkbox"/> 101-250	<input type="checkbox"/> 251-500	<input type="checkbox"/> 501 and higher	<input type="checkbox"/> Yes <input type="checkbox"/> No		

## SECTION III: Regulated Entity Information

22. General Regulated Entity Information (If "New Regulated Entity" is selected below this form should be accompanied by a permit application)			
<input type="checkbox"/> New Regulated Entity	<input type="checkbox"/> Update to Regulated Entity Name	<input type="checkbox"/> Update to Regulated Entity Information	<input checked="" type="checkbox"/> No Change** (See below)
<b>**If "NO CHANGE" is checked and Section I is complete, skip to Section IV, Preparer Information.</b>			
23. Regulated Entity Name (name of the site where the regulated action is taking place)			
Asphalt Concrete Plant			

24. Street Address of the Regulated Entity: (No P.O. Boxes)							
	City		State		ZIP		ZIP + 4
25. Mailing Address:							
	City		State		ZIP		ZIP + 4
26. E-Mail Address:							
27. Telephone Number	28. Extension or Code		29. Fax Number (if applicable)				
( ) -			( ) -				
30. Primary SIC Code (4 digits)	31. Secondary SIC Code (4 digits)	32. Primary NAICS Code (6 or 6 digits)		33. Secondary NAICS Code (5 or 6 digits)			
34. What is the Primary Business of this entity? (Please do not repeat the SIC or NAICS description.)							

Questions 34 – 37 address geographic location. Please refer to the instructions for applicability.

35. Description to Physical Location:							
36. Nearest City	County		State		Nearest ZIP Code		
37. Latitude (N) In Decimal:		38. Longitude (W) In Decimal:					
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds		

39. TCEQ Programs and ID Numbers Check all Programs and write in the permits/registration numbers that will be affected by the updates submitted on this form or the updates may not be made. If your Program is not listed, check other and write it in. See the Core Data Form instructions for additional guidance.

<input type="checkbox"/> Dam Safety	<input type="checkbox"/> Districts	<input type="checkbox"/> Edwards Aquifer	<input type="checkbox"/> Industrial Hazardous Waste	<input type="checkbox"/> Municipal Solid Waste
<input checked="" type="checkbox"/> New Source Review – Air	<input type="checkbox"/> OSSF	<input type="checkbox"/> Petroleum Storage Tank	<input type="checkbox"/> PWS	<input type="checkbox"/> Sludge
92706				
<input type="checkbox"/> Stormwater	<input type="checkbox"/> Title V – Air	<input type="checkbox"/> Tires	<input type="checkbox"/> Used Oil	<input type="checkbox"/> Utilities
<input type="checkbox"/> Voluntary Cleanup	<input type="checkbox"/> Waste Water	<input type="checkbox"/> Wastewater Agriculture	<input type="checkbox"/> Water Rights	<input checked="" type="checkbox"/> Other: Unknown

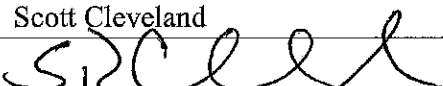
#### SECTION IV: Preparer Information

40. Name:	Josh Butler		41. Title:	Environmental Specialist	
42. Telephone Number	43. Ext./Code	44. Fax Number	45. E-Mail Address		
( 830 ) 249-8284		( 830 ) 249-0221	jbutler@westwardenv.com		

#### SECTION V: Authorized Signature

46. By my signature below, I certify, to the best of my knowledge, that the information provided in this form is true and complete, and that I have signature authority to submit this form on behalf of the entity specified in Section II, Field 9 and/or as required for the updates to the ID numbers identified in field 39.

(See the Core Data Form instructions for more information on who should sign this form.)

Company:	Anderson Columbia Co., Inc.		Job Title:	Environmental Director	
Name (in Print):	Scott Cleveland		Phone:	( 386 ) 752-7585	
Signature:			Date:	3/15/15	



TCEQ Use Only

# TCEQ Core Data Form

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## SECTION I: General Information

1. Reason for Submission (If other is checked please describe in space provided)			
<input type="checkbox"/> New Permit, Registration or Authorization (Core Data Form should be submitted with the program application)			
<input type="checkbox"/> Renewal (Core Data Form should be submitted with the renewal form)		<input checked="" type="checkbox"/> Other <b>Change of Ownership</b>	
2. Attachments Describe Any Attachments: (ex. Title V Application, Waste Transporter Application, etc.)			
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Change of Ownership Form	
3. Customer Reference Number (if issued)		4. Regulated Entity Reference Number (if issued)	
CN 603641549		RN 103004081	

## SECTION II: Customer Information

5. Effective Date for Customer Information Updates (mm/dd/yyyy)			
6. Customer Role (Proposed or Actual) – as it relates to the Regulated Entity listed on this form. Please check only one of the following.			
<input type="checkbox"/> Owner	<input type="checkbox"/> Operator	<input checked="" type="checkbox"/> Owner & Operator	
<input type="checkbox"/> Occupational Licensee	<input type="checkbox"/> Responsible Party	<input type="checkbox"/> Voluntary Cleanup Applicant	<input type="checkbox"/> Other:
7. General Customer Information			
<input type="checkbox"/> New Customer		<input type="checkbox"/> Update to Customer Information	<input checked="" type="checkbox"/> Change in Regulated Entity Ownership
<input type="checkbox"/> Change in Legal Name (Verifiable with the Texas Secretary of State)		<input type="checkbox"/> No Change**	
<b>**If "No Change" and Section I is complete, skip to Section III – Regulated Entity Information.</b>			
8. Type of Customer:			
<input checked="" type="checkbox"/> Corporation	<input type="checkbox"/> Individual	<input type="checkbox"/> Sole Proprietorship- D.B.A	
<input type="checkbox"/> City Government	<input type="checkbox"/> County Government	<input type="checkbox"/> Federal Government	<input type="checkbox"/> State Government
<input type="checkbox"/> Other Government	<input type="checkbox"/> General Partnership	<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Other:
9. Customer Legal Name (If an individual, print last name first. ex: Doe, John)			End Date:
Anderson Columbia Co., Inc.			
10. Mailing Address:			
P.O. Box 1829			
City	Lake City	State	FL
ZIP	32056	ZIP + 4	
11. Country Mailing Information (if outside USA)		12. E-Mail Address (if applicable)	
13. Telephone Number		14. Extension or Code	15. Fax Number (if applicable)
( 386 ) 752-7585			( ) -
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20. Number of Employees			21. Independently Owned and Operated?
<input type="checkbox"/> 0-20 <input type="checkbox"/> 21-100 <input type="checkbox"/> 101-250 <input type="checkbox"/> 251-500 <input type="checkbox"/> 501 and higher			<input type="checkbox"/> Yes <input type="checkbox"/> No

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## SECTION III: Regulated Entity Information

22. General Regulated Entity Information (If 'New Regulated Entity' is selected below this form should be accompanied by a permit application)			
<input type="checkbox"/> New Regulated Entity		<input type="checkbox"/> Update to Regulated Entity Name	<input type="checkbox"/> Update to Regulated Entity Information
			<input checked="" type="checkbox"/> No Change** (See below)
<b>**If "NO CHANGE" is checked and Section I is complete, skip to Section IV, Preparer Information.</b>			
23. Regulated Entity Name (name of the site where the regulated action is taking place)			
Rock Crushing Plant 1			

24. Street Address of the Regulated Entity: (No P.O. Boxes)							
	City		State		ZIP		ZIP + 4
25. Mailing Address:							
	City		State		ZIP		ZIP + 4
26. E-Mail Address:							
27. Telephone Number	28. Extension or Code		29. Fax Number (if applicable)				
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30. Primary SIC Code (4 digits)	31. Secondary SIC Code (4 digits)	32. Primary NAICS Code (6 or 8 digits)		33. Secondary NAICS Code (6 or 8 digits)			
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<input checked="" type="checkbox"/> New Source Review – Air	<input type="checkbox"/> OSSF	<input type="checkbox"/> Petroleum Storage Tank	<input type="checkbox"/> PWS	<input type="checkbox"/> Sludge
50051				
<input type="checkbox"/> Stormwater	<input type="checkbox"/> Title V – Air	<input type="checkbox"/> Tires	<input type="checkbox"/> Used Oil	<input type="checkbox"/> Utilities
<input type="checkbox"/> Voluntary Cleanup	<input type="checkbox"/> Waste Water	<input type="checkbox"/> Wastewater Agriculture	<input type="checkbox"/> Water Rights	<input checked="" type="checkbox"/> Other: Unknown

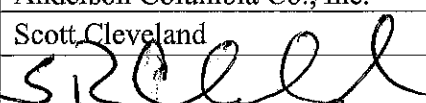
**SECTION IV: Preparer Information**

40. Name:	Josh Butler		41. Title:	Environmental Specialist	
42. Telephone Number	43. Ext./Code	44. Fax Number	45. E-Mail Address		
( 830 ) 249-8284		( 830 ) 249-0221	jbutler@westwardenv.com		

**SECTION V: Authorized Signature**

46. By my signature below, I certify, to the best of my knowledge, that the information provided in this form is true and complete, and that I have signature authority to submit this form on behalf of the entity specified in Section II, Field 9 and/or as required for the updates to the ID numbers identified in field 39.

(See the Core Data Form instructions for more information on who should sign this form.)

Company:	Anderson Columbia Co., Inc.		Job Title:	Environmental Director	
Name (In Print):	Scott Cleveland		Phone:	( 386 ) 752-7585	
Signature:			Date:	3/15/15	

April 01, 2015

Texas Commission on Environmental Quality  
Air Permits Initial Review Team, MC-161  
P.O. Box 13087  
Austin, Texas 78711-3087

Project No.: 10603-049



Attention: Mr. Johnny Bowers

Subject: Change in Ownership – Permit By Rule Registration No. 50051 & Air Quality Standard Permit No. 92706  
Anderson Columbia Co., Inc. – CN603641549  
Asphalt Concrete Plant – RN103004099  
Rock Crushing Plant 1 – RN103004081  
Webb County, Texas

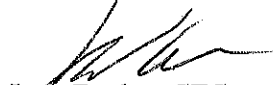


Mr. Bowers,

On behalf of Anderson Columbia Co., Inc. please accept this letter as notification of the change in ownership for the subject facilities. Anderson Columbia Co., Inc. has replaced Brothers Materials, Ltd. (CN601542236) as owner/operator of Asphalt Concrete Plant, authorized by Permit By Rule Registration No. 50051, and Rock Crushing Plant 1, authorized by Permit By Rule Registration No. 92706. A Change of Ownership form is attached along with the corresponding Core Data forms.

Westward Environmental, Inc. (WESTWARD) serves as the technical representative for Anderson Columbia Co., Inc. on this project. **Please ensure that WESTWARD is copied on all further correspondence.** If you have any questions or need any additional information, please contact our office.

Respectfully submitted,  
WESTWARD ENVIRONMENTAL, INC.

  
Josh Butler, CES  
Environmental Specialist

Distribution: Addressee  
TCEQ Region 16  
Mr. Scott Cleveland – Anderson Columbia Co., Inc.  
WEI 10603-049 File

Attachments

