Texas Commission on Environmental Quality

Standard Permit New Registration

Site Information (Regulated Entity)

What is the name of the site to be authorized?	Asphalt Plant #4
Does the site have a physical address?	No
Because there is no physical address, describe how to locate this site:	SE of Corner of FM 211 & CR 375
City	Meadow
State	TX
ZIP	79316
County	TERRY
Latitude (N) (##.#####)	33.3255
Longitude (W) (-###.#####)	-102.3084
Primary SIC Code	2951
Secondary SIC Code	
Primary NAICS Code	324121
Secondary NAICS Code	
Regulated Entity Site Information	
What is the Regulated Entity's Number (RN)?	RN110822806
What is the name of the Regulated Entity (RE)?	PORTABLE ASPHALT PLANT SN C11 050
Does the RE site have a physical address?	Yes
Physical Address	
Number and Street	5523 N FM 1912
City	AMARILLO
State	TX
ZIP	79108
County	POTTER
Latitude (N) (##.#####)	35.264167
Longitude (W) (-###.#####)	-101.655278
Facility NAICS Code	324121
What is the primary business of this entity?	CONSTRUCTION MATERIALS
Customer (Applicant) Information	

Customer (Applicant) Information

Owner Operator
CN605479559
Corporation
Helmcamp Materials, Ltd.
800156065

Federal Tax ID	
State Franchise Tax ID	10107588229
State Sales Tax ID	1010/300229
Local Tax ID	
DUNS Number	
Number of Employees	
Independently Owned and Operated?	No
I certify that the full legal name of the entity	Yes
applying for this permit has been provided and is legally authorized to do business in Texas.	165
Responsible Authority Contact	
Organization Name	Helmcamp Materials, Ltd.
Prefix	MR
First	Eric
Middle	
Last	Schranz
Suffix	
Credentials	
Title	General Manager
Responsible Authority Mailing Address	
Enter new address or copy one from list:	
Address Type	Domestic
Mailing Address (include Suite or Bldg. here, if applicable)	PO BOX 456
Routing (such as Mail Code, Dept., or Attn:)	
City	BUFFALO
State	TX
ZIP	75831
Phone (###-####)	9036265911
Extension	
Alternate Phone (###-###)	
Fax (###-###-####)	
E-mail	e.schranz@helmcampmaterials.com
Responsible Official Contact	
Person TCEQ should contact for questions about this application:	
Same as another contact?	CN605479559, Helmcamp Materials, Ltd.
Organization Name	Helmcamp Materials, Ltd.
Prefix	MR
First	Eric
Middle	

Last	Schranz
Suffix	Sullanz
Credentials	
Title	General Manager
Enter new address or copy one from list:	General Manager
Mailing Address	Domestic
Address Type Mailing Address (include Suite or Pldg, bore, if	
Mailing Address (include Suite or Bldg. here, if applicable)	PO BOX 456
Routing (such as Mail Code, Dept., or Attn:)	
City	BUFFALO
State	TX
ZIP	75831
Phone (###-###-###)	9036265911
Extension	
Alternate Phone (###-####)	
Fax (###-###-###)	
E-mail	e.schranz@helmcampmaterials.com
Technical Contact Person TCEQ should contact for questions	
about this application:	
Same as another contact?	W . 15 :
Organization Name	Westward Environmental Inc
Prefix	MR
First	Max
Middle	
Last	Pickus
Suffix	
Credentials	
Title	Environmental Specialist
Enter new address or copy one from list:	
Mailing Address	
Address Type	Domestic
Mailing Address (include Suite or Bldg. here, if applicable)	PO BOX 2205
Routing (such as Mail Code, Dept., or Attn:)	
City	BOERNE
State	TX
ZIP	78006
Phone (###-####)	8302498284

Extension

Alternate Phone (###-###-###)

Fax (###-###)

8302490221

E-mail

Mpickus@WESTWARDENV.COM

Standard Permit General Information- New Reg Sites

1) Is this facility permanent or temporary?

2) Will the proposed facility meet all of the requirements of the standard permit?

3) Select the type of unit that is being registered:

3.1. Select the rule associated to the unit specified.

Standard Permit Attachments

1) Please attach one PDF with the PI-1S and all required documents to complete the project.

[File Properties]

File Name 240905_10157-

145_Application.pdf

Hash 84314F4404666B70ED68C82E9659AD334E431ADACCD82AD5EC216A9AEE860B18

MIME-Type application/pdf

Confidential

2) Please attach any other necessary information needed to complete the registration.

Expedite

1) Per Texas Health and Safety Code, Section 382.05155, does the applicant want to expedite the processing of this application?

No

Certification

The electronic signature below indicates that the Responsible Official has knowledge of the facts herein set forth and that the same are true, accurate, and complete to the best of my knowledge and belief. By this signature, the maximum emission rates listed on this certification reflect the maximum anticipated emissions due to the operation of this facility and all representations in this certification of emissions are conditions upon which the facilities and sources will operate. It is understood that it is unlawful to vary from these representations unless the certification is first revised. The signature certifies that to the best of the Responsible Officials knowledge and belief, the project will satisfy the conditions and limitations of the indicated exemption or permit by rule and the facility will operated in compliance with all regulations of the Texas Commission on Environmental Quality and with Federal U.S. Environmental Protection Agency regulations governing air pollution. The signature below certifies that, based on information and belief formed after reasonable inquiry, the statements and information above and contained in the attached document(s) are true, accurate, and complete. If you questions on how to fill out this form or about air quality permits. Please call (512) 239-1250. Individuals are entitled to

request and review their personal information that the agency gathers on its forms.

- 1. I am Judd Henderson, the owner of the STEERS account ER053647.
- 2. I have the authority to sign this data on behalf of the applicant named above.
- 3. I have personally examined the foregoing and am familiar with its content and the content of any attachments, and based upon my personal knowledge and/or inquiry of any individual responsible for information contained herein, that this information is true, accurate, and complete.
- 4. I further certify that I have not violated any term in my TCEQ STEERS participation agreement and that I have no reason to believe that the confidentiality or use of my password has been compromised at any time.
- 5. I understand that use of my password constitutes an electronic signature legally equivalent to my written signature.
- 6. I also understand that the attestations of fact contained herein pertain to the implementation, oversight and enforcement of a state and/or federal environmental program and must be true and complete to the best of my knowledge.
- 7. I am aware that criminal penalties may be imposed for statements or omissions that I know or have reason to believe are untrue or misleading.
- 8. I am knowingly and intentionally signing Standard Permit New Registration.
- 9. My signature indicates that I am in agreement with the information on this form, and authorize its submittal to the TCEQ.

OWNER OPERATOR Signature: Judd Henderson OWNER OPERATOR

Account Number: ER053647

Signature IP Address: 12.206.103.18

Signature Date: 2024-09-06

Signature Hash: 0DF3FD1BE9CBE61E7DFA5C846E9807A297402DF479DCA756A7B19937C346B819

Form Hash Code at

9B9C1801D0F9FAA67AD6C88792062B048C74F281A8679ECD0CF08CFA0BB9FB89

time of Signature:

Fee Payment

Transaction by:	The application fee payment transaction was made by ER053647/Judd Henderson
Paid by:	The application fee was paid by JUDD HENDERSON
Fee Amount:	\$900.00
Paid Date:	The application fee was paid on 2024-09-06
Transaction/Voucher number:	The transaction number is 582EA000624417 and the voucher number is 720252

Submission

Reference Number:	The application reference number is 680227
Submitted by:	The application was submitted by ER053647/Judd Henderson
Submitted Timestamp:	The application was submitted on 2024-09-06 at 09:40:16 CDT
Submitted From:	The application was submitted from IP address 12.206.103.18

Confirmation Number:	The confirmation number is 561804	
Steers Version:	The STEERS version is 6.82	
Additional Information		
Application Creator: This account was created by Joseph M Pickus		