## **Texas Commission on Environmental Quality**

Standard Permit New Registration

# Site Information (Regulated Entity)

What is the name of the site to be authorized?	ATLANTA READY MIX
Does the site have a physical address?	Yes
Physical Address	
Number and Street	1501 ANTI RD
City	ATLANTA
State	TX
ZIP	75551
County	CASS
Latitude (N) (##.#####)	33.135084
Longitude (W) (-###.#####)	-94.184638
Primary SIC Code	
Secondary SIC Code	
Primary NAICS Code	327320
Secondary NAICS Code	
Regulated Entity Site Information	
What is the Regulated Entity's Number (RN)?	RN108012923
What is the name of the Regulated Entity (RE)?	ATLANTA READY MIX
Does the RE site have a physical address?	Yes
Physical Address	
Number and Street	1501 CR 3333
City	ATLANTA
State	TX
ZIP	75551
County	CASS
Latitude (N) (##.#####)	33.135084
Longitude (W) (-###.#####)	-94.184638
Facility NAICS Code	327320
What is the primary business of this entity?	READY MIX CONCRETE PRODUCERS

# Customer (Applicant) Information

How is this applicant associated with this site?	Owner Operator
What is the applicant's Customer Number (CN)?	CN605763598
Type of Customer	Corporation
Full legal name of the applicant:	
Legal Name	Red River Ready Mix, LLC
Texas SOS Filing Number	803542674

Federal Tax ID	842183951
State Franchise Tax ID	
	18421839517
State Sales Tax ID	
Local Tax ID	
DUNS Number	
Number of Employees	21-100
Independently Owned and Operated?	No
I certify that the full legal name of the entity applying for this permit has been provided and is legally authorized to do business in Texas.	Yes
Responsible Authority Contact	
Organization Name	Red River Ready Mix, LLC
Prefix	MR
First	Buck
Middle	
Last	Page
Suffix	
Credentials	
Title	Area 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)	2515 W 7TH ST
Routing (such as Mail Code, Dept., or Attn:)	
City	TEXARKANA
State	TX
ZIP	75501
Phone (###-###-)	9033145122
Extension	
Alternate Phone (###-###)	
Fax (###-###+##)	
E-mail	buck.page@rrrmix.com
Responsible Official Contact	
Person TCEQ should contact for questions about this application:	
Same as another contact?	CN605763598, Red River Ready Mix, LLC
Organization Name	Red River Ready Mix, LLC
Prefix	MR
First	Buck
Middle	

Last	Page
Suffix	
Credentials	
Title	Area Manager
Enter new address or copy one from list:	7 1.00 1.10 tage:
Mailing Address	
Address Type	Domestic
Mailing Address (include Suite or Bldg. here, if	2515 W 7TH ST
applicable)	
Routing (such as Mail Code, Dept., or Attn:)	
City	TEXARKANA
State	TX
ZIP	75501
Phone (###-####)	9033145122
Extension	
Alternate Phone (###-###)	
Fax (###-###-####)	
E-mail	buck.page@rrrmix.com
Technical Contact	
Teominal Contact	
Person TCEQ should contact for questions	
	CN605763598, Red River Ready Mix, LLC
Person TCEQ should contact for questions about this application:	CN605763598, Red River Ready Mix, LLC Red River Ready Mix, LLC
Person TCEQ should contact for questions about this application:  Same as another contact?	
Person TCEQ should contact for questions about this application:  Same as another contact?  Organization Name	Red River Ready Mix, LLC
Person TCEQ should contact for questions about this application:  Same as another contact?  Organization Name  Prefix	Red River Ready Mix, LLC
Person TCEQ should contact for questions about this application:  Same as another contact?  Organization Name  Prefix  First	Red River Ready Mix, LLC
Person TCEQ should contact for questions about this application:  Same as another contact?  Organization Name  Prefix  First  Middle	Red River Ready Mix, LLC  MR  Buck
Person TCEQ should contact for questions about this application:  Same as another contact?  Organization Name  Prefix  First  Middle  Last	Red River Ready Mix, LLC  MR  Buck
Person TCEQ should contact for questions about this application:  Same as another contact?  Organization Name  Prefix  First  Middle  Last  Suffix	Red River Ready Mix, LLC  MR  Buck
Person TCEQ should contact for questions about this application:  Same as another contact?  Organization Name  Prefix  First  Middle  Last  Suffix  Credentials	Red River Ready Mix, LLC MR Buck Page
Person TCEQ should contact for questions about this application:  Same as another contact?  Organization Name  Prefix  First  Middle  Last  Suffix  Credentials  Title	Red River Ready Mix, LLC MR Buck Page
Person TCEQ should contact for questions about this application:  Same as another contact?  Organization Name  Prefix  First  Middle  Last  Suffix  Credentials  Title  Enter new address or copy one from list:	Red River Ready Mix, LLC MR Buck Page
Person TCEQ should contact for questions about this application:  Same as another contact?  Organization Name  Prefix  First  Middle  Last  Suffix  Credentials  Title  Enter new address or copy one from list:  Mailing Address	Red River Ready Mix, LLC  MR  Buck  Page  Area Manager
Person TCEQ should contact for questions about this application:  Same as another contact?  Organization Name  Prefix  First  Middle  Last  Suffix  Credentials  Title  Enter new address or copy one from list:  Mailing Address  Address Type  Mailing Address (include Suite or Bldg. here, if	Red River Ready Mix, LLC  MR  Buck  Page  Area Manager
Person TCEQ should contact for questions about this application:  Same as another contact?  Organization Name  Prefix  First  Middle  Last  Suffix  Credentials  Title  Enter new address or copy one from list:  Mailing Address  Address Type  Mailing Address (include Suite or Bldg. here, if applicable)	Red River Ready Mix, LLC  MR  Buck  Page  Area Manager
Person TCEQ should contact for questions about this application:  Same as another contact?  Organization Name  Prefix  First  Middle  Last  Suffix  Credentials  Title  Enter new address or copy one from list:  Mailing Address  Address Type  Mailing Address (include Suite or Bldg. here, if applicable)  Routing (such as Mail Code, Dept., or Attn:)	Red River Ready Mix, LLC MR Buck Page  Area Manager  Domestic 2515 W 7TH ST
Person TCEQ should contact for questions about this application:  Same as another contact?  Organization Name  Prefix  First  Middle  Last  Suffix  Credentials  Title  Enter new address or copy one from list:  Mailing Address  Address Type  Mailing Address (include Suite or Bldg. here, if applicable)  Routing (such as Mail Code, Dept., or Attn:)  City	Red River Ready Mix, LLC  MR  Buck  Page  Area Manager  Domestic  2515 W 7TH ST

Extension

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

Fax (###-###-###)

E-mail buck.page@rrrmix.com

### Standard Permit General Information- New Reg Sites

1) Is this facility permanent or temporary? Permanent

2) Will the proposed facility meet all of the

requirements of the standard permit?

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

3.1. Select the rule associated to the unit 6004

specified.

#### Standard Permit Attachments

1) Attach PI-1S-CBP Registration Form

[File Properties]

File Name <a

href=/ePermitsExternal/faces/file?fileId=238492>PI-

1S-CBP\_20871\_RRRM Atlanta.xlsx</a>

Hash 887B101C936758B2F3CAA2B8F24922CD186990A3D71FF6A0CE86F55208E876B4

MIME-Type application/vnd.openxmlformats-

officedocument.spreadsheetml.sheet

Confidential

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

[File Properties]

File Name <a

href=/ePermitsExternal/faces/file?fileId=238203>SAP130081

Renewal Application.pdf</a>

Hash A497C03C70B915BC466E60AE0E7EAD53F23044E72696FA404C0BC39D330830EF

MIME-Type application/pdf

Confidential

### **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 Edward Updike, the owner of the STEERS account ER048944.
- 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: Edward Updike OWNER OPERATOR

Account Number: ER048944
Signature IP Address: 12.179.38.131
Signature Date: 2025-02-05

Signature Hash: 314311CA1011FC3B2B20E7063879E47F29260A1BC025DEF9D08B231CF784390B

Form Hash Code at A3D4FF31167739882C494B3541C5F84ABB316A1E6B5C2FD8D7D55792B36DA7C9

time of Signature:

#### Fee Payment

Transaction by:	The application fee payment transaction was made by ER073204/Earl R Page JR
Paid by:	The application fee was paid by EARL BUCK PAGE
Fee Amount:	\$900.00
Paid Date:	The application fee was paid on 2025-02-10
Transaction/Voucher number:	The transaction number is 582EA000650477 and the voucher number is 748254
Submission	

Reference Number:	The application reference number is 752426
Submitted by:	The application was submitted by ER073204/Earl R Page JR
Submitted Timestamp:	The application was submitted on 2025-02-10 at 13:37:12 CST
Submitted From:	The application was submitted from IP address 96.18.56.146
Confirmation Number:	The confirmation number is 627686
Steers Version:	The STEERS version is 6.86

## **Additional Information**

Application Creator: This account was created by John Tayntor