



EXPEDITED PERMITTING PROGRAM – APPLICATION FOR ENTRY TO PROGRAM FOR AIR PERMITS

EPD Use Only

Date Received: _____ Application No. _____

To be eligible for expedited review, this application form must be accompanied by the complete permit application for the type of air permit being requested.

1. Contact Information

Facility Name: Arglass Yamamura, LLC
AIRS No. (if known): 04-13- -
Contact Person: Jose de Diego-Arozamena Title: Founder & CEO
Telephone No.: (229) 474-6823 Alternate Phone No.: (917) 385-9761
Email Address: jda@arglass.us

If EPD is unable to contact me, please contact the alternate contact person:

Contact Person: Jeff Twaddle, P.E, ERM Title: Partner
Telephone No.: (615) 656-4636 Alternate Phone No.: (615) 618-4715
Email Address: Jeff.Twaddle@erm.com

On Page 2 of this form, please check the appropriate box for which type of air permit you are requesting expedited review.

I have read the Expedited Review Program Standard Operating Procedures and accept all of the terms and conditions within. I have participated in the required pre-application meeting with EPD. I understand that it is my responsibility to ensure an application of the highest quality is submitted and to address any requests for additional information by the deadline specified. I understand that submittal of this request form is not a guarantee that expedited review will be granted.

Signature:  Date: July 7, 2023