Request for Termination (RFT) of Co



Mining General NPDES Permit No. MSR32 2 5 6 5 County Tallaha chie (Fill in your Certificate of Coverage Number and County)

Use this form to request coverage termination only after mining controls are successfully established. Inspections must continue MDEQ.	g activities have permanently stopped e until the coverage recipient receiv	ed and permanent crosion and sediment es written notice of coverage termination by
Please check which of the following apply:		
Non-Exempt Mining Operation (copy of Permit Board Order, authorizing 90% or final release of mining performance bond attached) Exempt Mining Operation (as defined in MDEQ's Mississippi Surface Mining and Reclamation Rules and Regulations)		
STATES AND	ease Print or Type)	
Facility Name: Flautt Pit		ure Date: Never Opened
Physical Site Street Address (if not available, indicate nearest named ro		
City: Webb	County: Tallahatchie	
Landowner Company Name:		
Landowner Company Contact Name and Position: Michael B. Flaut	t	
Street Address / P.O. Box: PO Box 237		
City: Webb	State: MS	Zip: 38966
Tel. # (<u>662</u>) <u>375-2116</u>		
Operator Company Name (if different than owner): Joe McGee Con	struction Co., Inc.	
Operator Contact Name and Position: Jason McGee		
City: Lake	State: MS	Zip: 39092
Tel. # (601) 775-3754		
I certify under penalty of law that this document and all attachments were present that qualified personnel properly gathered and evaluated the information subpersons directly responsible for gathering the information, the information is aware that there are significant penalties for submitting false information, in that by submitting this Request for Termination and receiving written confiractivity under this general permit. Discharging pollutants in storm water ass Water Act where the discharge is not authorized by a NPDES permit. I also operator from liability for any violations of this permit or the Clean Water Act	omitted. Based on my inquiry of the perso ubmitted is, to the best of my knowledge a cluding the possibility of fines and imprise mation, I will no longer be authorized to d sociated with industrial activity to waters of understand that the submittar of this Requ	n or persons who manage the system, or those and belief, true, accurate and complete. I am onment for knowing violations. I understand ischarge storm water associated with industrial f the United States is unlawful under the Clean est for Termination does not release an owner or

¹This application shall be signed according to the General Permit, ACT 15, T-4 as follows:

For a corporation, by a responsible corporate officer.

For a partnership, by a general partner.

For a sole proprietorship, by the proprietor.

For a municipal, state or other public facility, by principal executive officer, mayor, or ranking elected official.

Telephone

After signing please mail to:

Authorized Name (Print)

Jason McGee

Environmental Permits Division, Office of Pollution Control

601-775-3754

P.O. Box 2261 Jackson, MS 39225

Revision: 06/26/12

10/3/16

Date Signed