GnP2011000
MAJOR MODIFICATION FORM FOR
MINING STORM WATER ACTIVITIES



8 2010 MONING STORM WATER GENERAL NPDES PERMIT MSR32

INSTRUCTIONS

Coverage recipients shall notify the Mississippi Department of Environmental Quality of plans to expand the acreage or "footprint" of an existing mining activity that discharges storm water or that has previously certified no discharge. This form and a modified Storm Water Pollution Prevention Plan (SWPPP), including an updated USGS topographic map, must be submitted when:

- SWPPP details have been developed and are ready for MDEQ review for subsequent phases of an existing, covered
 mining activity.
- The "footprint" identified in the original Mining Notice of Intent is proposed to be enlarged.

This form must be signed by the original coverage recipient under Mississippi's Mining Storm Water General Permit. A different operator must have storm water coverage transferred prior to storm water coverage being modified. Coverage recipients are authorized to discharge storm water associated with proposed expansions of existing mining activities, under the conditions of the General Permit, <u>only upon receipt of written notification of approval by the MDEQ</u>. If mining modifications incorporate a hydraulic dredging operation, closed loop wash operation, or a discharge of process wastewater to State waters, additional permitting actions shall be required.

COVERAGE RECIPIENT INFORMATION			
STREET OR P.O. BOX: 30	Mississippi bravel 422 Bigbee Rd	co, ll	
PHONE # (INCLUDE AREA CO	DDE): U62,256,1273	STATE: MS ZIP:	3882)
PROJECT INFORMATION			
MINING STORM WATER GENERAL PERMIT COVERAGE NUMBER: MSR32 2 4 5 5 ADDITIONAL ACREAGE TO BE DISTURBED: 16 TOTAL ACREAGE: 26 MINE of PIT NAME: NOW MISSISSIPE GYAVELOS 4MDEQ SURFACE MINING PERMIT # 16-028 CITY: AMORY COUNTY: MONY OF			
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.			
Signature (must be signed by coverage recipient)		Date	
Nous McCornick Printed Name		O Wn	er
Please submit this form to:	Chief, Environmental Permits Division MS Department of Environmental Quality P.O. Box 2261 Jackson, Mississippi 39225-2261	, Office of Pollution Control	

January 2007