AI #18052

MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY

RECEIVED
APR 16 2018
Dept. of Environmental Quality

RE-COVERAGE FORM

MINING STORM WATER, DEWATERING AND NO DISCHARGE GENERAL PERMIT

GENERAL PERMIT: MSR32 1176. This coverage number must be completed for the referenced mining activity or this form will be considered incomplete and will be returned. The coverage number can be found at the bottom left corner of your previous Certificate of Coverage.

The submittal of this form is required to receive coverage under the reissued Mining Storm Water, Dewatering and No Discharge General Permit. This form must be completed and returned to MDEQ at the address printed at the bottom of this form within 30 days of the date of the Letter of Instruction for Re-Coverage.

Please indicate the activities to be covered by this Re-Coverage Form (check all that apply).

- [x] **Storm Water Discharges Associated with Mining**
- [x] **Mine Dewatering**
- [ ] **Wastewater Recirculation System with No Discharge**

The appropriate section of this form must be completed if the applicant proposes to operate a wastewater recirculation system with no discharge and/or discharge impounded mine water (dewatering).

If the company seeking coverage is a corporation, a limited liability company, a partnership, or a business trust, attach proof of its registration with the Mississippi Secretary of State and/or its Certificate of Good Standing. This registration or Certificate of Good Standing must be dated within twelve (12) months of the date of the submittal of this coverage form. Coverage will be issued in the company name as it is registered with the Mississippi Secretary of State.

ALL INFORMATION MUST BE COMPLETED (indicate "N/A" where not applicable)

APPLICANT INFORMATION

APPLICANT IS THE [x] OWNER [x] OPERATOR (Must check one or both)

OPERATOR CONTACT PERSON: GARY W. HENZE

OPERATOR COMPANY NAME: HENZE ENTERPRISES INC

OPERATOR STREET OR P. O. BOX: P.O. Box 1594

OPERATOR CITY: GAUTIER STATE: MS ZIP: 39553

OPERATOR PHONE #: (228) 497-1022 OPERATOR EMAIL: henzeenterprises@gmail.com

OWNER CONTACT PERSON: AVRIL D. HENZE

OWNER COMPANY: HENZE ENTERPRISES INC

OWNER STREET OR P. O. BOX: P.O Box 1594

OWNER CITY: GAUTIER STATE: MS ZIP: 39553

OWNER PHONE #: (228) 497-1022 OWNER EMAIL: henzeenterprises@gmail.com

IF CHECKED YES TO MINE DEWATERING, FILL OUT BELOW

IS MINE COVERED UNDER VALID NPDES DISCHARGE PERMIT FOR MINE DEWATERING? ☑ YES ☐ NO

PERMIT NO. MS 3211176

ESTIMATED DEWATERING VOLUME: _____ (GAL/DAY)

NAME AND ADDRESS OF THE RECIPIENT OF THE DISCHARGE MONITORING REPORTS (DMRs), IF DIFFERENT FROM SIGNATORY:

AVRIL D. HENZE, P.O. BOX 1594, GAUTIER, MS 39553

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 fine and imprisonment for knowing violations.

Avril D Henze
Authorized Signature[1]

4/13/10
Date

AVRIL D. HENZE
Printed Name

PRESIDENT
Title

[1]This 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 either a principal executive officer, the mayor, or ranking elected official.
- Duly Authorized Representative

Please submit this form to:

Chief, Environmental Permits Division
MDEQ, Office of Pollution Control
P.O. Box 2261
Jackson, Mississippi 39225

Rec by Melissa CHECK 3/15/18

F0008

2018086739

Fee: $ 25

Business ID: 579616
Filed: 03/15/2018 08:29 AM
C. Delbert Hosemann, Jr.
Secretary of State

DELBERT HOSEMANN
Secretary of State

P.O. BOX 136
JACKSON, MS 39205-0136

TELEPHONE: (601) 359-1633

2018 Corporate Annual Report

Business Information

Business ID: 579616
Business Name: HENZE ENTERPRISES, INC.
State of Incorporation: MS
Business Email: henzeenterprises@gmail.com
Phone: (***)***-****
FEIN: **-*******

Principal Address: 4017 Old Spanish Trail
GAUTIER, MS 39553

Registered Agent

Name: AVRIL D HENZE
Address: 4017 OLD SPANISH TRAIL
GAUTIER, MS 39553

Officers

Title/Name:	*Address:*	*Director:*
President: Avril D Henze	PO Box 1594 Gautier, MS 39553	☑
Vice President: Gary W. Henze	PO Box 1594 Gautier, MS 39553	☑
Secretary: G.w. Henze	PO Box 1594 Gautier, MS 39553	☑
Treasurer: G.w. Henze	PO Box 1594 Gautier, MS 39553	☑

Stocks

Class:	*Authorized:*	*Series:*	*Issued:*
Common	0		0
Common	0		0
Common	10000		8000

NAICS Code/Nature of Business

238910 - Site Preparation Contractors

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238910 - Site Preparation Contractors

Signature

By entering my name in the space provided, I certify that I am authorized to file this document on behalf of this entity, have examined the document and, to the best of my knowledge and belief, it is true, correct and complete as of this day ***03/15/2018***.

Name:

Avril D Henze

President

Address:

P O Box 1594

Gautier, MS 39553

DELBERT HOSEMANN
Secretary of State

Invoice Number: 14433595

Invoice Date: 03/15/2018

Customer Information

Mrs. Avril D Henze
P O Box 1594
Gautier, Mississippi 39553

Description	Tracking Number	Qty	Item Cost	Amount Paid
Annual Report - Online	2018086739		$ 25.00	$ 25.00
MSI Transaction Fee			$ 1.25	$ 1.25

Payment Details

Invoice Total:	$ 26.25
Payment Total:	$ 26.25
Amount Due:	$ 0.00

Payment Method

Payment Type: eCheck

Include invoice number on all correspondence and send to:

Mississippi Secretary of State's Office
P.O. Box 136
Jackson, MS 39205

To discuss payment for Corporation items call:
(601) 359-1633

MINE INFORMATION

MINE SITE NAME: HENZE ENTERPRISES INC CLASS II RUBBISH & DIRT MINING OPERATION

CONTACT NAME & POSITION: GARY W. HENZE

CONTACT PHONE NUMBER: (228) 497-1022

MINE PHYSICAL SITE ADDRESS (IF NOT AVAILABLE INDICATE NEAREST NAMED ROAD):

STREET: 18901 HWY 57, VANCLEVE

CITY: MS COUNTY: JACKSON ZIP: 39565

ATTACH A USGS QUAD MAP, EXTENDING ½ MILE BEYOND FACILITY, OUTLINING THE MINE BOUNDARIES (Maps can be obtained from the Mississippi Office of Geology. For information call 601-961-5523).

_____/4 OF _____/4 OF SECTION 24 13, TOWNSHIP 5S, RANGE 8W

LATITUDE: ___ DEGREES ___ MINUTES ___ SECONDS LONGITUDE: ___ DEGREES ___ MINUTES ___ SECONDS

LAT & LONG DATA SOURCE (GPS (PLEASE GPS ENTRANCE GATE) OR MAP INTERPOLATION): _____

TOTAL ACREAGE: 160 MATERIAL TO BE MINED: CLAY & SAND

ESTIMATED START DATE: 2003-04-01 (YYYY-MM-DD) ESTIMATED END DATE: — (YYYY-MM-DD)

SIC CODE 1629 NAICS CODE 238910

STORM WATER POLLUTION PREVENTION PLAN (SWPPP)

THE GENERAL PERMIT REQUIRES THE SWPPP TO BE ONSITE OR LOCALLY AVAILABLE, UP-TO-DATE AND EFFECTIVE IN CONTROLLING STORM WATER POLLUTANTS. ACCORDINGLY, IN ADDITION TO THE PROJECT'S CURRENT BMPS, TWO (2) SPECIFIC BMPS (SEE BELOW) ARE REQUIRED TO BE IN THE SWPPP.

IS A COPY OF THE SWPPP AT THE PERMITTED SITE OR LOCALLY AVAILABLE?	☑ YES	☐ NO
DOES SWPPP CONTAIN AN UP-TO-DATE ASSESSMENT OF POTENTIAL STORM WATER POLLUTANT SOURCES AND IDENTIFY BMPS TO EFFECTIVELY CONTROL THEM?	☑ YES	☐ NO
IF A SEDIMENTATION BASIN IS A PROJECT BMP, DOES IT DISCHARGE ONLY FROM THE SURFACE OF THE BASIN? IF NO, THE BASIN MUST HAVE A SURFACE DISCHARGE IMMEDIATELY FROM THE DATE OF RECOVERAGE	☑ YES or (N.A)	☐ NO
IF TRUCK TRAFFIC LEAVES MINING SITE AND MOVES DIRECTLY ONTO PAVED PUBLIC ROAD, IS A CONSTRUCTION EXIT AN INSTALLED BMP? IF NO, A CONSTRUCTION EXIT MUST BE INSTALLED IMMEDIATELY OF THE DATE OF RECOVERAGE. IF A MINE IS CURRENTLY INACTIVE, BUT IS SUBMITTING A RECOVERAGE FORM, THE CONSTRUCTION EXIT MUST BE INSTALLED IMMEDIATELY OF THE MINE BECOMING ACTIVE.	☑ YES or (N.A)	☐ NO
IS A WASTEWATER RECIRCULATION SYSTEM WITH NO DISCHARGE USED ON THE FACILITY?	☐ YES	☑ NO
IS MINE DEWATERING PRESENT ON SITE?	☑ YES	☐ NO

IF CHECKED YES TO WASTERWATER RECIRCULATION SYSTEM WITH NO DISCHARGE, FILL OUT BELOW

IS MINE COVERED UNDER VALID "NO DISCHARGE" STATE OPERATING PERMIT? ☐ YES ☑ NO

PERMIT NO. MS __ __ __ __ __ __

DISTANCE BETWEEN RECIRCULATION POND(S) AND PROPERTY LINE: _____ (FT)
(MUST BE AT LEAST 150 FEET)

NUMBER OF RECIRCULATION POND(S): _____

STORAGE CAPACITY OF EACH RECIRCULATION POND: _____ (FT^3)