

AI #10528



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MDEQ

RE-COVERAGE FORM

MINING STORM WATER, DEWATERING AND NO DISCHARGE GENERAL PERMIT

GENERAL PERMIT: MSR32 0003. 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).

- ☒ Storm Water Discharges Associated with Mining ☐ 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	<input type="checkbox"/> OWNER	<input checked="" type="checkbox"/> OPERATOR	(Must check one or both)
OPERATOR CONTACT PERSON: <u>John R. Dedeaux</u>			
OPERATOR COMPANY NAME: <u>Perkinston Sand & Gravel Co Inc</u>			
OPERATOR STREET OR P. O. BOX: <u>P O Box 468</u>			
OPERATOR CITY: <u>Perkinston</u>	STATE: <u>MS</u>	ZIP: <u>39573</u>	
OPERATOR PHONE #: <u>(601) 928.8031</u>	OPERATOR EMAIL: <u>jrdedeaux@gmail.com</u>		
OWNER CONTACT PERSON: <u>Larry O. Norris</u>			
OWNER COMPANY: <u>Norris Land & Timber</u>			
OWNER STREET OR P. O. BOX: <u>101 Ferguson St</u>			
OWNER CITY: <u>Hattiesburg</u>	STATE: <u>MS</u>	ZIP: <u>39401</u>	
OWNER PHONE #: <u>(601) 545.2011</u>	OWNER EMAIL: _____		

MINE INFORMATION

MINE SITE NAME: Pit 2

CONTACT NAME & POSITION: John. R. Dedeaux

CONTACT PHONE NUMBER: (601) 928.8031

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

STREET: 1035 Wire Road West

CITY: Perkinston COUNTY: Stone ZIP: 39573

ATTACH A USGS QUAD MAP, EXTENDING 1/2 MILE BEYOND FACILITY, OUTLINING THE MINE BOUNDARIES (Maps can be obtained from the Mississippi Office of Geology. For information call 601-961-5523).

SE 10 /4 OF NE 30 /4 OF SECTION 10, TOWNSHIP 3S, RANGE 12W

LATITUDE: 30 DEGREES 47 MINUTES 30 SECONDS LONGITUDE: 89 DEGREES 10 MINUTES 29 SECONDS

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

TOTAL ACREAGE: 49 MATERIAL TO BE MINED: sand

ESTIMATED START DATE: na ESTIMATED END DATE: 2023
YYYY-MM-DD

SIC CODE 1442 NAICS CODE 423390

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 BMP'S, TWO (2) SPECIFIC BMP'S (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 BMP'S 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 RECOVERY. ☒ 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 RECOVERY. IF A MINE IS CURRENTLY INACTIVE, BUT IS SUBMITTING A RECOVERY 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 WASTEWATER 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: _____ (FT³)

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 _____

ESTIMATED DEWATERING VOLUME: _____ (GAL/DAY)

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

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.


Authorized Signature¹

Date

4/26/18

John R. Dedeaux

Pres.

Printed Name

Title

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 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



DELBERT HOSEMANN
Secretary of State

Office of the Secretary of State
Jackson, Mississippi

Certificate of Good Standing

I, C. DELBERT HOSEMANN, JR., Secretary of State of the State of Mississippi, and as such, the legal custodian of the records as required by the laws of Mississippi, to be filed in my office, do hereby certify:

That on the 16th day of January, 1961, the State of Mississippi issued a Charter/Certificate of Authority to:

PERKINSTON SAND AND GRAVEL COMPANY

That the state of incorporation is Mississippi.

That the period of duration is perpetual.

That according to the records of this office, Articles of Dissolution or a Certificate of Withdrawal have not been filed.

That according to the records of this office, a current Annual Report has been delivered to the Office of the Secretary of State.

I further certify that all fees, taxes and penalties owed to this state, as reflected in the records of the Secretary of State, have been paid and that the corporation is in existence or has authority to transact business in Mississippi.

That insofar as the records of this office are concerned, the said PERKINSTON SAND AND GRAVEL COMPANY is in good standing at this time.

Given under my hand and seal of office
the 19th day of April, 2018

C. Delbert Hosemann, Jr.

C. DELBERT HOSEMANN, JR.
Secretary of State

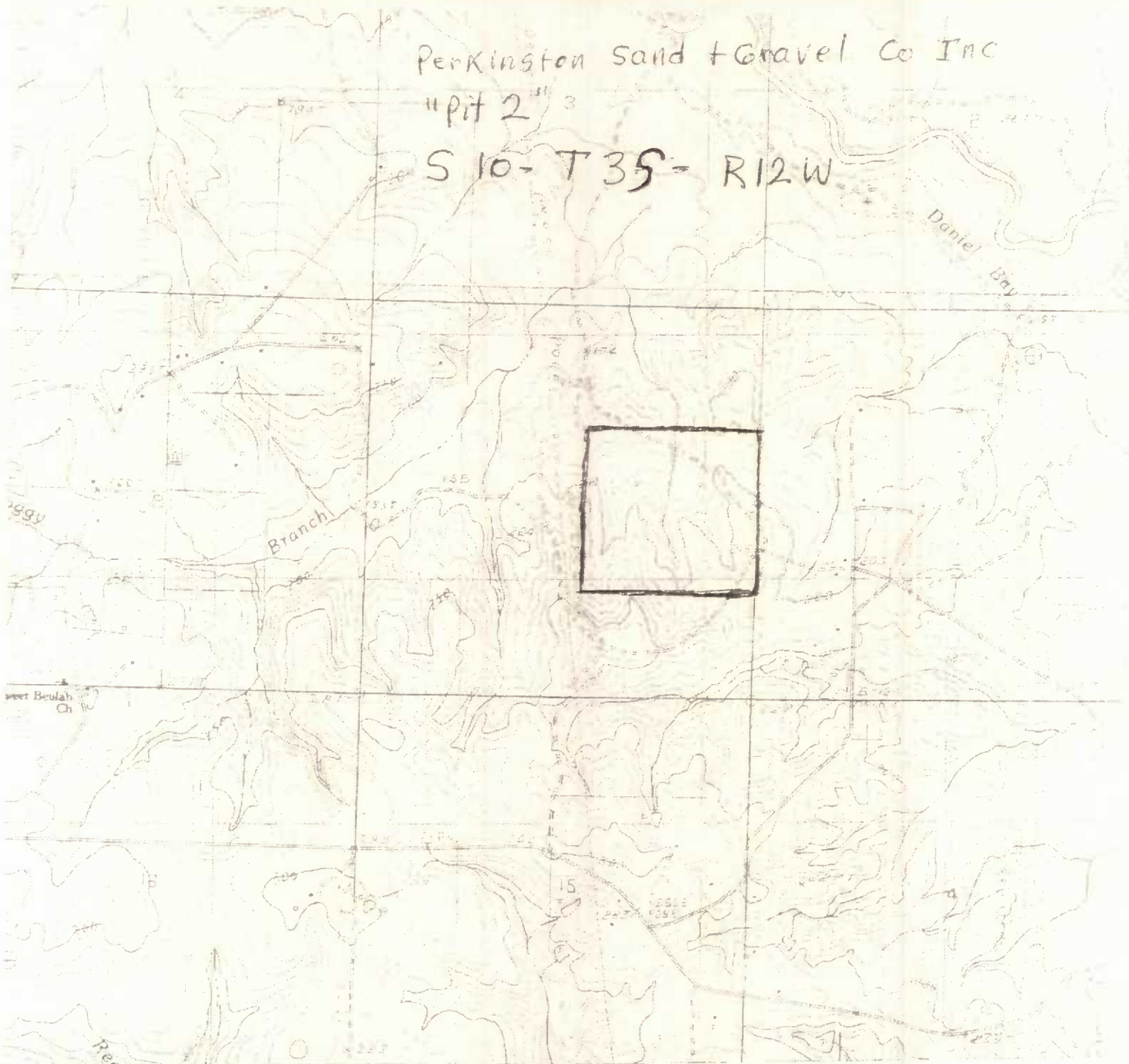
Certificate Number: CN18051076

Verify this certificate online at <http://corp.sos.ms.gov/corpconv/verifycertificate.aspx>

PerKinston Sand + Gravel Co Inc

"pit 2" 3

S 10- T 35- R 12 W



Excerpt

Wiggins, MISSISSIPPI

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USGS

John R. Dedeaux