AT #56745





### **RE-COVERAGE FORM**

### MINING STORM WATER, DEWATERING AND NO DISCHARGE GENERAL PERMIT

GENERAL PERMIT: MSR32 2 1 6 0. 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

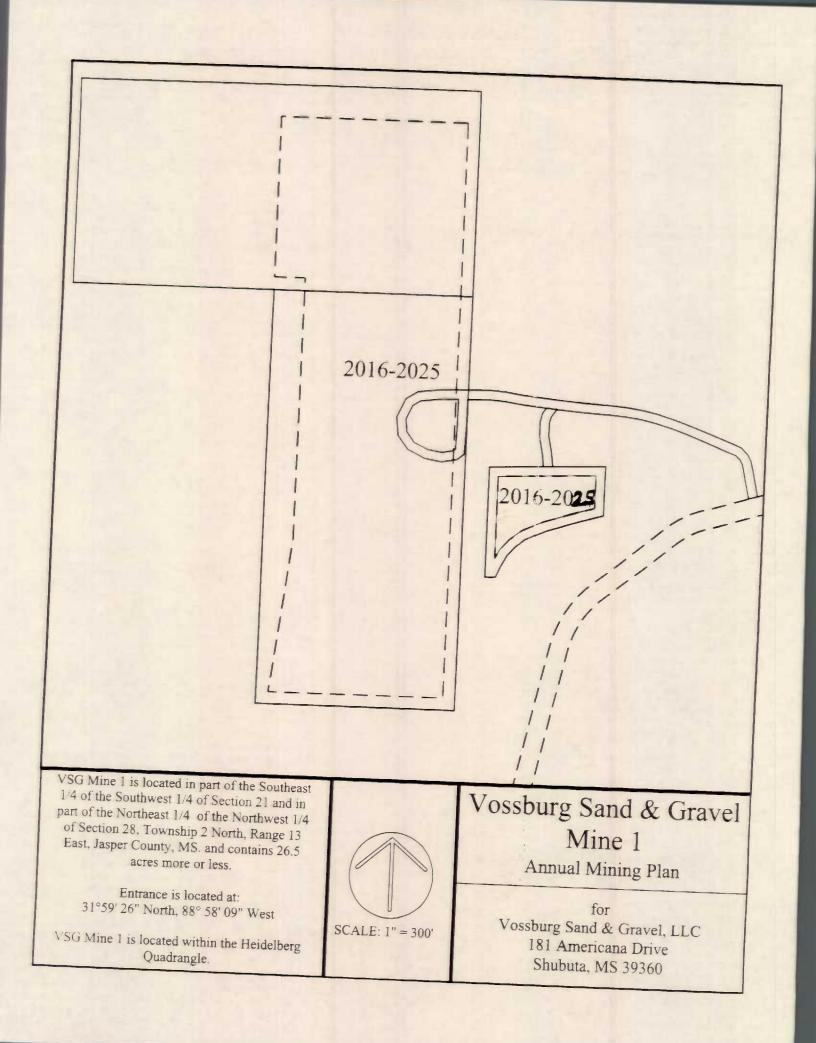
at the bottom of this form within 30 days of the date of the Letter of Instruction for Re-Coverage.

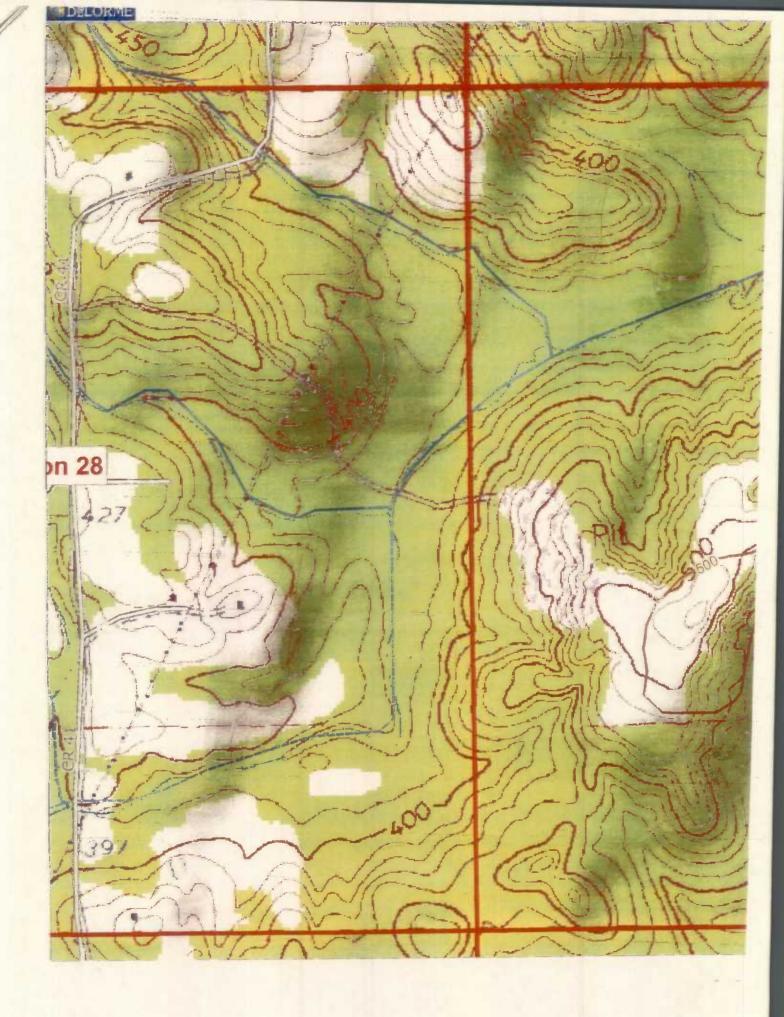
Please indicate the activities to be covered by this Re-Coverage Form (check all that apply).
Storm Water Discharges Associated with Mining Mine Dewatering
Wastewater Recirculation System with No Discharge
The appropriate section of this form must be completed if the applicant proposes to operate a wastewater 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 of Certificate of trood Standing must be deted within twolve (12) months of the date
submittal of this toverage 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 OWNER OPERATOR (Must check one or both)
OPERATOR CONTACT PERSON: Charles Phillips
OPERATOR COMPANY NAME: VOSS burg Sand and Gravel LLC. (minel) OPERATOR STREET OR P. O. BOX: 181 Americana Drive
OPERATOR STREET OR P. O. BOX: 181 Americana Orive
OPERATOR CITY: Shubuta STATE MS.
OPERATOR PHONE #: (601) 369-0546 OPERATOR EMAIL: Zebra 9753 @ yahoo. com
OWNER CONTACT PERSON: Charles Phillips
OWNER COMPANY: Voss burg Sand and Gravel (mine 1) OWNER STREET OR P. O. BOX: 181 Americana Drive
OWNER STREET OR P. O. BOX: 181 Americana Drive
OUR TREE COMMENTS
OWNER PHONE #: (601) 369-0546 OWNER EMAIL: Zebra 9753 a yahoo, com

MINE INFORMATION	1		
MINE SITE NAME: Vossburg Sand + Gravel LLC. (mine	-11		
CONTACT NAME & POSITION: Charles Philips (owner + ma	nager	)	
CONTACT PHONE NUMBER: (601) 369-0546	) -		
MINE PHYSICAL SITE ADDRESS (IF NOT AVAILABLE INDICATE NEAREST NAMED ROAD):			
STREET: County Road 411			
CITY: Paulding COUNTY: Jasper	ZIP:3°	7348	
ATTACH A USGS QUAD MAP, EXTENDING ½ MILE BEYOND FACILITY, OUTLINING THE MINE BOUT the Mississippi Office of Geology. For information call 601-961-5523).		s can be obtained fro	om
5 E MOF SW MOF SECTION 21, TOWNSHIP 2N, RANGE 1	3 East		
LATITUDE: 31 DEGREES 59 MINUTES 26 SECONDS LONGITUDE: 88 DEGREES 5	8 MINUTES D	9 SECONDS W.	est
LAT & LONG DATA SOURCE (GPS (PLEASE GPS ENTRANCE GATE) OR MAP INTERPOLATION):			
TOTAL ACREAGE: 26.5 MATERIAL TO BE MINED: Sand + gran	rel		
ESTIMATED START DATE: 2016  YYYY-MM-DD  ESTIMATED END DATE: 20	15		
SIC CODE 1442 YYYY-MM-DD NAICS CODE 212.321	YY-MM-DD		
STORM WATER POLLUTION PREVENTION PLAN (SWPPP)			
THE GENERAL PERMIT REQUIRES THE SWPPP TO BE ONSITE OR LOCALLY AVAILABLE, UP-TO-D CONTROLLING STORM WATER POLLUTANTS. ACCORDINGLY, IN ADDITION TO THE PROJECT'S BMPS (SEE BELOW) ARE REQUIRED TO BE IN THE SWPPP.	ATE AND EFFEC	CTIVE IN S, TWO (2) SPECIF	TC.
IS A COPY OF THE SWPPP AT THE PERMITTED SITE OR LOCALLY AVAILABLE?	VES	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 <u>NO.</u> 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 <u>NO</u> , 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	97.6
IS A WASTEWATER RECIRCULATION SYSTEM WITH NO DISCHARGE USED ON THE FACILITY?	YES	TONO	
IS MINE DEWATERING PRESENT ON SITE?	YES	140	
IF CHECKED YES TO WASTERWATER RECIRCULATION SYSTEM WITH NO DISCHAR	GE, FILL OUT E	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

THE CHECKED TES TO MINE DEWATERING, I	FILL OUT BELOW
IS MINE COVERED UNDER VALID NPDES DISCHARGE PERMIT FOR MINE DEWATI PERMIT NO. MS	ERING? YES NO
ESTIMATED DEWATERING VOLUME:(GAL/DAY)	
NAME AND ADDRESS OF THE RECIPIENT OF THE DISCHARGE MONITORING REPO	ORTS (DMRs), IF DIFFERENT FROM SIGNATORY:
I certify under penalty of law that this document and all attachments were prepared under my to assure that qualified personnel properly gathered and evaluated the information submitted. I system, or those persons directly responsible for gathering the information, the information submitted and complete. I am aware that there are significant penalties for submitting false information, in violations.  Authorized Signature!  Date  Diwkes  Printed Name  Title	nitted is, to the best of my knowledge and belief, true, accurately the possibility of fine and imprisonment for knowledge.
This application shall be signed according to the General Popular Act 15. The	The work
a vi putatium, by a responsible corporate office.	The second
For a partnership, by a general partner	Please submit this form to:
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 minicipal, state or other public facility.	Please submit this form to:  Chief, Environmental Permits Division
For a partnership, by a general partner	Please submit this form to:







#### DELBERT HOSEMANN Secretary of State

#### Office of the Secretary of State Jackson, Mississippi

VOSSBURG SAND & GRAVEL, LLC

Business ID: 724254

The attached 2 pages are true and correct copies of documents filed in the Mississippi Secretary of State's Office pursuant to the Mississippi Code of 1972 Annotated.

This the 01st day of May, 2018.

Given under my hand and seal of office the 01st day of May, 2018

C. DELBERT HOSEMANN. JR. Secretary of State

Certificate Number: CN18051428

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

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# P.O. BOX 136, JACKSON, MS 39205-0136 (601) 359-1333 Certificate of Formation

\*0100-1-

3 \*

The undersigned, pursuant to Senate Bill No. 2395, Chapter 402, Laws of 1994, hereby executes the following document and sets forth:

Voss	sburg Sa	nd & Gravel	L, LLC				
2. The future (Complete	e effective d						F
3. Federal T	ax ID						10/2. EF
7	Applied	For					32.00
4. Name and	Street Add	ress of the Regis	stered Agent an	d Registere	Office	is	
Name	Charles E. Phillips						
Physical Address							
P.O. Box							
City, State, Z	IP5, ZIP4	Laurel			MS	39440	
		ity Company is Liability Comp			dissolut	ion, the latest date	
1	2 /31/2	050					
o. Is full or managers? (			Limited Liabi	lity Compar	y veste	d in a manager or	
х	Yes		No				
7. Other mat	tters the ma	nagers or memt	pers elect to inc	lude			
							1

# OFFICE OF THE MISSISSIPPI SECRETARY OF STATE P.O. BOX 136, JACKSON, MS 39205-0136 (601) 359-1333 Certificate of Formation

\*0100-3-

3 \*

By: Sign	nature				
		Cherry Dilly	<b>a</b>	(Picas	se keep writing within blocks)
Printed Name Street and Mailing Address		Charles E. Phillips	s	Title	Manager
Physical Address	500 Cen	tral Avenue, Suite 200			
P.O. Box					
City, State, 2	ZIP5, ZIP4	Laurel		MS	39440
By: Signatu	ire		(1	Please ke	ep writing within blocks)
Printed 1	Name		Ti	tle	
Street and Ma	iling Address			L	
Physical Address					
P.O. Box					
City, State, ZIP	P5, ZIP4				-



### DELBERT HOSEMANN Secretary of State

This is not an official certificate of good standing.

Name History

Name

**VOSSBURG SAND & GRAVEL, LLC** 

Name Type

Legal

**Business Information** 

**Business Type:** 

Limited Liability Company

**Business ID:** 

724254

Status:

Good Standing

**Effective Date:** 

10/22/2002

State of Incorporation:

Mississippi

Principal Office Address:

Registered Agent

Name

CHARLES E PHILLIPS 181 Americana Drive Shubuta, MS 39360

Officers & Directors

Name

Title

Charles Phillips

181 AMERICANA DR. SHUBUTA, MS 39360

Manager

Charles E Phillips 181 AMERICANA DR.

SHUBUTA, MS 39360

Member

CHARLES PHILLIPS
500 CENTRAL AVE SUITE

200