



RE-COVERAGE FORM

MINING STORM WATER, DEWATERING AND NO DISCHARGE GENERAL PERMIT

GENERAL PERMIT: MSR32 2 3 5 9. 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 r	eceivo ec			
The submittal of this form is required to r and No Discharge General Permit. This fo at the bottom of this form within 30 days of	rm must be con the date of the	under the reissued apleted and returned Letter of Instruction	Mining Storm Water, Ed to MDEQ at the addre	Dewatering ess printed
Please indicate the activities to be covered b	y this Re-Cover	age Form (check all	that apply	
Storm Water Discharges		g- o m (eneck all	тпат арргу).	
Storm Water Discharges Associated wi	ith Mining	Mine Dew	atering	
Wastewater Recirculation System with	No Discharge			
The appropriate section of this form must recirculation system with no discharge and/o		Water	(uewatering).	
If the company seeking coverage is a company	4*			
If the company seeking coverage is a corpora attach proof of its registration with the Missi This registration or Certificate of Good Standard	ssinni Segreta	iability company, a	partnership, or a busine	ss trust.
Inis registration or Certificate of Cood Stan	d:	or State and/or its	ertificate of Good Stan	ding
			1) months of all the	the
This registration or Certificate of Good Stand submittal of this coverage form. Coverage w	ill be issued in t	he company name as	it is resistant the date of	the
submittal of this coverage form. Coverage w. Mississippi Secretary of State.	ill be issued in t	he company name a	s it is registered with the	the
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MINE SITE NAME: Highway 49 Mine	E INFORMATION		
CONTACT NAME & POSITION: Chris Neely			
CONTACT PAGE & POSITION: COMES INVESTIGATION			
CONTACT PHONE NUMBER: (601) 668-7743			
MINE PHYSICAL SITE ADDRESS (IF NOT AVAILABLE INDICATE STREET: West County Line Road & Hwy 49	NEAREST NAMED ROAD):		
CITY: Pocohontas COUNTY: Hing			
COUNTY: Hing	ds	ZID.	
ATTACH A USGS QUAD MAP, EXTENDING ½ MILE BEYOND FACE the Mississippi Office of Geology. For information call 601-961-5523). SW /4 OF SW /4 OF SECTION 35 , TOW LATITUDE: 32 DECREES 24 MINUSTRE 044	ILITY, OUTLINING THE MIN	E BOUNDARIES (M	
24 MINUTES 04 SECONDS	LONGUERO		
LAT & LONG DATA SOURCE (GPS (PLEASE GPS ENTRANCE GATE TOTAL ACREACE. 4	DEGRI	EES 16 MINUTES	38 SECONDS
TOTAL ACREAGE: 4 MATERIAL TO BE): Map interpolat	tion
ESTIMATED START DATE: 2018-04-17			
YYYY MM-DD	ESTIMATED END DATE:	2023-04-17	
SIC CODE	NAICS CODE_	YYYY-MM-DD	
OTODA N	ON PREVENTION PLAN (SW.		
		INCIDENT DAK	ECTIVE IN
CONTROLLING STORM WATER POLLUTANTS. ACCORDINGLY, IN EMPS (SEE BELOW) ARE REQUIRED TO BE IN THE SWPPP. SA COPY OF THE SWPPP AT THE PERMITTED SITE OR LOCALLY OES SWPPP CONTAIN AN UP-TO-DATE ASSESSMENT OF POTENTIOLLUTANT SOURCES AND IDENTIFY BMPS TO EFFECTIVELY CO A SEDIMENTATION BASIN IS A PROJECT BMP, DOES IT DISCHAIRFACE OF THE BASIN? IF NO. THE BASIN MUST HAVE A SURFACE OM THE DATE OF RECOVERAGE. TRUCK TRAFFIC LEAVES MINING SITE AND MOVES DIRECTLY A CONSTRUCTION EXIT AN INSTALLED BMP? IF NO. A CONSTRUCTION EXIT AN INSTALLED BMP? IF NO. A CONSTRUCTIVE, BUT IS SUBMITTING A RECOVERAGE FORM, THE CONSTALLED IMMEDIATELY OF THE DATE OF RECOVERAGE. IF A MACTIVE, BUT IS SUBMITTING A RECOVERAGE FORM, THE CONSTALLED IMMEDIATELY OF THE MINE BECOMING ACTIVE. A WASTEWATER RECIRCULATION SYSTEM WITH NO DISCHARGE MINE DEWATERING PRESENT ON SITE?	AVAILABLE? IAL STORM WATER NTROL THEM? RGE ONLY FROM THE CE DISCHARGE IMMEDIATE ONTO PAVED PUBLIC ROAD OCTION EXIT MUST BE MINE IS CURRENTLY IRUCTION EXIT MUST BE	✓ YES ✓ YES ✓ YES or ! ✓ YES or ! ✓ YES or !	NO NO NA. NO NA. NO NA. NO
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i iF	CHECKED YES TO MINE DEWATERING, FILL OUT BELOW	
IS MINE COVERED UNDER VALID NPDES	DISCHARGE PERMIT FOR MINE DEWATERING?	
- I DES	DISCHARGE PERMIT FOR MINE DEWATERING?	YES NO
PERMIT NO. MS		V
ESTIMATED DEWATERING VOLUME:	(GAL/DAY)	
NAME AND ADDRESS OF THE RECIPIENT	OF THE DISCHARGE MONITORING REPORTS (DMRs), IF DIF	
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