



## **RE-COVERAGE FORM**

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

GENERAL PERMIT: MSR32 2404 \_\_\_\_. 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 at the bottom of this form within 30 days of the date of the Letter of Instruction	
Please indicate the activities to be covered by this Re-Coverage Form (check all t	that apply).
X Storm Water Discharges Associated with Mining Mine Dewa	itering
Wastewater Recirculation System with No Discharge	
The appropriate section of this form must be completed if the applicant pre- 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 pattach proof of its registration with the Mississippi Secretary of State and/or its C. This registration or Certificate of Good Standing must be detected with in	partnership, or a business trust,
submittal of this coverage form. Coverage will be issued in the company	2) months of the date of the
Mississippi Secretary of State.	s it is registered with the
ALL INFORMATION MUST BE COMPLETED (indicate "N/A" wi	here not applicable)
APPLICANT INFORMATION	трумине)
APPLICANT IS THE OWNER X OPERATOR (Must check one or b	poth)
OPERATOR CONTACT PERSON: Mr. Andrew Tanner	
OPERATOR COMPANY NAME:Tanner Construction Company, Inc.	
OPERATOR STREET OR P. O. BOX: Post Office Box 460	
OPERATOR CITY: Ellisville STATE: MS	<b>ZIP:</b> 39437
OPERATOR PHONE #: (601 ) 477-3820 OPERATOR EMAIL: randall@tannerc	onstruction.net
OWNER CONTACT PERSON: Horace Shaw	
OWNER COMPANY:	
OWNER STREET OR P. O. BOX: 52 CR 237	
OWNER CITY: Oxford STATE: MS	200 2000
OWNER PHONE #: (_662) 801-3580 OWNER EMAIL:	ZIP:38655

MINE INFORMATION	
MINE SITE NAME: Shaw Mine	
CONTACT NAME & POSITION: Mr. Andrew Tanner-Vice President	
CONTACT PHONE NUMBER: ( 601 ) 477-3820	
MINE PHYSICAL SITE ADDRESS (IF NOT AVAILABLE INDICATE NEAREST NAMED ROAD):	
STREET: SR 328	
CITY: Oxford COUNTY: Lafayette	710
ATTACH A USGS QUAD MAP, EXTENDING ½ MILE BEYOND FACILITY, OUTLINING THE MINE BOTH the Mississippi Office of Geology. For information call 601-961-5523).	OUNDARIES (Maps can be obtained from
SW /4 OF SE /4 OF SECTION 4 , TOWNSHIP 10S , RANGE	
LATITUDE: 34 DEGREES 14 MINUTES 6.5 SECONDS LONGITUDE: 89 DEGREES	27 ASSAULTED A2
LAT & LONG DATA SOURCE (GPS (PLEASE GPS ENTRANCE GATE) OR MAP INTERPOLATION):	37 MINUTES 43 SECONDS
TOTAL ACREAGE: 4 MATERIAL TO BE MINED: Borrow	Google Maps
FSTIMATED START DATE. 2014 02 01	
YYYY-MM DD	19-03-01 YYYY-MM-DD
SIC CODE 1442 NAICS CODE	YYYY-MM-DD
STORM WATER BOLL LITION PROVIDED	
STORM WATER POLLUTION PREVENTION PLAN (SWPPF	?)
THE GENERAL PERMIT REQUIRES THE SWPPP TO BE ONSITE OR LOCALLY AVAILABLE, UP-TO-CONTROLLING STORM WATER POLLUTANTS. ACCORDINGLY, IN ADDITION TO THE PROJECT'S BMPS (SEE BELOW) ARE REQUIRED TO BE IN THE SWPPP.	-DATE AND EFFECTIVE IN S CURRENT BMPS, TWO (2) SPECIFIC
IS A COPY OF THE SWPPP AT THE PERMITTED SITE OR LOCALLY AVAILABLE?	X YES NO
DOES SWPPP CONTAIN AN UP-TO-DATE ASSESSMENT OF POTENTIAL STORM WATER POLLUTANT SOURCES AND IDENTIFY BMPS TO EFFECTIVELY CONTROL THEM?	X 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.	X 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 INSTALLED IMMEDIATELY OF THE MINE PERCONNERS FORM, THE CONSTRUCTION EXIT MUST BE	X YES or N.A. NO
THE MINE BECOMING ACTIVE.	
IS A WASTEWATER RECIRCULATION SYSTEM WITH NO DISCHARGE USED ON THE FACILITY?	YES X NO
S MINE DEWATERING PRESENT ON SITE?	YES X NO
IF CHECKED YES TO WASTERWATER RECIRCULATION SYSTEM WITH NO DISCHA	
S MINE COVERED UNDER VALID "NO DISCHARGE" STATE OPERATING PERMIT?	ARGE, FILL OUT BELOW
ERMIT NO. MS	YES X NO
SISTANCE BETWEEN RECIRCULATION POND(S) AND PROPERTY LINE:(FT)	
UMBER OF RECIRCULATION POND(S):	
TORAGE CAPACITY OF EACH RECIRCULATION POND:	(FT3)
	(FT <sup>3</sup> )

## IF CHECKED YES TO MINE DEWATERING, FILL OUT BELOW

TO A		
IS MINE COVERED UNDER VALID NODES DISCHARM		
IS MINE COVERED UNDER VALID NPDES DISCHARGE PERMIT FOR MINE DEWAT	TERING?	_
PERMIT NO. MS	YES NO	
ESTIMATED DEWATERING VOLUME:(GAL/DAY)		
NAME AND COLUME: (GAL/DAY)		
NAME AND ADDRESS OF THE RECIPIENT OF THE DISCHARGE MONITORING DESCRIPTION OF THE DISCHARGE DESCRIPTION OF THE DISCHARGE DESCRI		
NAME AND ADDRESS OF THE RECIPIENT OF THE DISCHARGE MONITORING REP	ORTS (DMRs), IF DIFFERENT FROM SIGNATO	DRY
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certify under popular of		
and penalty of taw that this document and all attachment		
o assure that qualified personnel property made all attachments were prepared under my	direction or on-	
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Authorized Signature Date  Mr. Andrew Tanner	mitted is, to the best of my knowledge and belief, tru including the possibility of fine and imprisonment fo	m de mans te, ac or kn
Authorized Signature Date  Mr. Andrew Tanner  Vice Preside	mitted is, to the best of my knowledge and belief, tru including the possibility of fine and imprisonment fo	m de man: ie, ac or kn
Authorized Signature Tanner  Mr. Andrew Tanner  Vice Preside  Title	mitted is, to the best of my knowledge and belief, tru including the possibility of fine and imprisonment fo	m de man; le, ac or kn
Authorized Signature Date  Mr. Andrew Tanner  rinted Name  his application shall be signed according to the Grand Penalties for submitting false information, in the information in the informa	mitted is, to the best of my knowledge and belief, tru including the possibility of fine and imprisonment fo	m de man; ie, ac or kn
Mr. Andrew Tanner  Wice Preside  Title  For a corporation, by a responsible corporation, by a responsible corporation, by a responsible corporation.	mitted is, to the best of my knowledge and belief, tru including the possibility of fine and imprisonment fo	m dee, ace
Mr. Andrew Tanner  Wice Preside  Title  For a corporation, by a responsible corporate officer.  For a partnership, by a general partnership.	mitted is, to the best of my knowledge and belief, tru including the possibility of fine and imprisonment fo	m dee, ac
Mr. Andrew Tanner  Title  Australia 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 sole proprietorship, by a general partner.  For a sole proprietorship, by a general partner.	mitted is, to the best of my knowledge and belief, tru including the possibility of fine and imprisonment for  4/18  Please submit this form to:	man; ee, ac or kr
Mr. Andrew Tanner  Title  Australia partnership, by a general partner.  For a sole proprietorship, by the proprietor.  For a municipal, state or other public fertilise. In the information, informati	mitted is, to the best of my knowledge and belief, truincluding the possibility of fine and imprisonment for th	man; ee, ac or kr
Authorized Signature  Mr. Andrew Tanner  Title  his 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 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.	Please submit this form to:  Chief, Environmental Permits Division MDEQ, Office of Pollution Control	man; ee, ac or kr
Mr. Andrew Tanner  Printed Name  Wice Preside Title  his 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.	Please submit this form to:  Chief, Environmental Permits Division MDEQ, Office of Pollution Control P.O. Box 2261	man; ee, ac or kr
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