AI#73958 GnP20180001





MINING NOTICE OF INTENT (MNOI) FOR COVERAGE UNDER MINING STORM WATER, DEWATERING AND NO DISCHARGE GENERAL PERMIT MSR32 2 7 4 0 (Number to be assigned by State)

File at least 30 days prior to the commencement of mining; 15 days if a Storm Water Pollution Prevention Plan (SWPPP) is already on file and mine dewatering is <u>not</u> proposed. Lateral expansion of an existing mine that has general permit coverage requires the submittal of the Major Modification Form, not a new MNOI. However, modification of the existing SWPPP to include the expansion is required. <u>Discharge of storm water or impounded water associated with mining or the operation of a wastewater recirculation system with no discharge without written notification of coverage from MDEQ is a violation of State Law.

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</u>

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attach proof of its registration with the Mississippi Secretary of S	State and/or its Certificate of Good Standing. This
registration or Certificate of Good Standing must be dated within	n twelve (12) months of the date of the submittal
of this coverage form. Coverage will be issued in the company na	ame as it is registered with the Mississippi
Secretary of State.	
Please indicate the activities to be covered by this MNOI (check a	all that apply).
✓ Storm Water Discharges Associated with Mining	Mine Dewatering
Wastewater Recirculation System with No Discharge	
The appropriate section of the MNOI must be completed if the appropriate impounded mine water (dewatering) and/or operate a vidischarge.	pplicant proposes to discharge storm water, wastewater recirculation system with no
A site-specific Storm Water Pollution Prevention Plan (SWPPP) of General Permit and a United States Geological Survey (USGS) que location and outfalls must be included with the MNOI submittal. shown on all copies. Quadrangle maps can be obtained from the MAdditional submittals may include the following (check all that any	uadrangle map or photocopy, indicating the site The name of the quadrangle map must be MDEQ, Office of Geology at 601-961-5523.
Section 404 Documentation	Notice of Exempt Operations Form
Dam/Reservoir Safety Permit or Written Authorization	
ALL INFORMATION MUST BE COMPLETED (i	indicate "N/A" where not applicable)

MSR32 <u>3</u> 7 <u>4</u> <u>0</u>

(NUMBER TO BE ASSIGNED BY STATE)

OWNER CONTACT INFORMATION OWNER CONTACT PERSON: C. R. Ridgeway, IV	
OWNER CONTACT PERSON: C. R. Ridgeway, IV	
OWNER COMPANY LEGAL NAME: County Line, LLC	
OWNER STREET OR P. O. BOX: PO Box 187	
	39205
OWNER CITY: Jackson STATE: MS ZIP:	ltv com
OWNER PHONE #: () OWNER EMAIL: bob@ridgewayrea	illy.com
OPERATOR CONTACT INFORMATION	
OPERATOR CONTACT PERSON: Brandon H. Brown, Project Manager	
OPERATOR COMPANY LEGAL NAME: Hemphill Construction Company, Inc.	
PO Drawer 879	
OPERATOR STREET OR P. O. BOX: PO Drawer 879	20073
OPERATOR CITY: Florence STATE: MS ZIP:	39073
OPERATOR CITY: Florence STATE: MS ZIP: OPERATOR PHONE #: (601) 326-9119 OPERATOR EMAIL: bhbrown@hemphille	construction.com
MINE INFORMATION	
MINE NAME: North Livingston West Pit	
MINE SITE ADDRESS (If the physical address is not available, please indicate nearest named road.)	
Street: North Livingston Road City: Ridgeland State: MS County: Madison 2	ip: 39157
NE and SE /4 OF NW /4 OF SECTION 33 , TOWNSHIP 7 North , RA	NGE 1 East
MINE SITE TRIBAL LAND ID (N/A If not applicable):	
MINE SITE TRIBAL LAND ID (N/A If not applicable): ATTACH A USGS QUAD MAP, EXTENDING ½ MILE BEYOND FACILITY, OUTLINING THE! (Maps can be obtained from the Mississippi Office of Geology. For information call 601-961-5523).	MINE BOUNDARIES
ATTACH A USGS QUAD MAP, EXTENDING ½ MILE BEYOND FACILITY, OUTLINING THE	
ATTACH A USGS QUAD MAP, EXTENDING ½ MILE BEYOND FACILITY, OUTLINING THE Maps can be obtained from the Mississippi Office of Geology. For information call 601-961-5523). LATITUDE: 32 degrees 25 minutes 42 seconds LONGITUDE: 90 degrees 12 minutes 12 minutes 12 minutes 14 minutes 14 minutes 15 minutes 16 minutes 16 minutes 17 minutes 17 minutes 17 minutes 17 minutes 17 minutes 18 minutes 18 minutes 18 minutes 19 minu	minutes 04 seconds
ATTACH A USGS QUAD MAP, EXTENDING ½ MILE BEYOND FACILITY, OUTLINING THE REMAINS (Maps can be obtained from the Mississippi Office of Geology. For information call 601-961-5523). LATITUDE: 32 degrees 25 minutes 42 seconds LONGITUDE: 90 degrees 12 LONGITUDE: 1 longitude: 14 LONGITUDE: 15 LONGITUDE: 15 LONGITUDE: 16 LONGITUDE: 17 LONGITUDE: 17 LONGITUDE: 16 LONGITUDE: 17 LONG	minutes 04 seconds
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TIMATED START DATE: 08/01/2018	ESTIMATED END DATE:	00/01/2019
STIMATED START DATE: 08/01/2018 YYYY-MM-DD	NATOS CODE	YYYY-MM-DD 212399
C CODE1499	NAICS CODE	
RECEIVING S	STREAM INFORMATION	
NEAREST NAMED RECEIVING STREAM: Hanging N		
		YES NO
S RECEIVING STREAM ON MISSISSIPPI'S 303(D)	LIST OF IMPAIRED WATER	
BODIES? (The 303(d) list of impaired waters and TMD http://www.deq.state.ms.us/MDEQ.nsf/page/T	WR Total Maximum Daily Load Ser	ction)
HAS A TMDL BEEN ESTABLISED FOR THE RECEI	IVING STREAM SEGMENT?	YES NO
	WATER DISCHARGE IS PROPOSI	ED
COMPLETE IF STORM	WATER DISCINICOLIS	
ATTACH A STORM WATER POLLUTION PREVEN	TION PLAN (SEE PERMIT FOR REQUIR	EMENTS)
IDENTIFY THE ASSOCIATION OR GENERIC SWP.	PP ON FILE AT MDEQ: OVER THE ALL MODES	
	DECID CHI ATUONI	
COMPLETE IF WA	STEWATER RECIRCULATION	
SYSTEM WITH N	O DISCHARGE IS PROPOSED	
DISTANCE BETWEEN RECIRCULATION POND(S)	AND PROPERTY LINE:(F	Τ)
(MUST BE AT LEAST 150 FEET)		
NUMBER OF RECIRCULATION POND(S):		
		(223)
STORAGE CAPACITY OF EACH RECIRCULATION	N POND(S):	(FT ³)
COMPLETE IF MIN	NE DEWATERING IS PROPOSED	
ESTIMATED DEWATERING VOLUME:	(GAL/DAY)	
		C (DMDc) IF
NAME AND ADDRESS OF THE RECIPIENT OF TH	IE DISCHARGE MONITORING REPORTS	5 (DIVIKS), IF
DIFFERENT FROM SIGNATORY:		

DOCUMENTATION OF COMPLIANCE WITH OTHER REGULATIONS/REQUIREMENTS

Coverage under this general permit will not be granted until all other required MDEQ permits and approvals are addressed.

	IS MINE INVOLVE THE RE-ROUTING, FILLING OR CROSSING OF A WATER	
CONVEYANCE OF ANY KIND? YES NO		
Section 404 permit, provide appropriate documentation wi The mine has been approved by individual permit, or The work will be covered by a nationwide permit and		
LIST ANY NPDES PERMIT NO(s)	GEOLOGY APPLICATION/PERMIT NO.	
LIST OTHER GEOLOGY PERMIT NUMBERS THAT APPLY TO COVERAGE AREA		
LIST OTHER GEOLOGY PERMIT NUMBERS THAT A	FFEI TO COVERAGE AREA	
IS THE MINE LESS THAN 4 ACRES AND GREATER T	HAN 1320 FEET FROM ANOTHER MINE?	
YES A "Notice of Exempt Operations" Form m if previously submitted to the Office of Geo	ust be included with the MNOI or proof of prior submission, plogy.	
NO A "Notice of Intent to Mine Class I or Class General Permit. For information on Office	ss II Materials" Form must be filed before coverage will be granted under the Mining of Geology requirements, call 601-961-5515.	
LIST ANY LOCAL STORM WATER ORDINANCES W	ITH WHICH THE OPERATIONS MUST COMPLY AND SUBMIT ANY	
ASSOCIATED APPROVAL DOCUMENTATION.		
	VE NATURAL SURFACE ELEVATIONS, INDICATE WHICH, IF ANY, OF THE	
The impoundment will be constructed with a perip	heral dam or levee 8 feet or greater in height, measured from the lowest elevation of its toe.	
The impoundment will have a maximum storage ve	plume greater than 25 acre-feet.	
The impoundment will impound a watercourse wit	h a continuous flow.	
The impoundment has the potential to threaten do	wastream lives or man-made structures.	
If <u>any</u> of the impoundments meet any of the above criteris Division before coverage will be granted under the Mining	i, the applicant will be required to obtain written authorization from MDEQ, Dam Safety g General Permit.	
l 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.		
Did R-	7/9/18	
Authorized Signature ¹	Date / 1	
Richard Rula	President	
Printed Name	Title	
This application shall be signed according to the Genera For a corporation, by a responsible corporate off For a partnership, by a general partner. For a sole proprietorship, by the proprietor. For a municipal, state or other public facility, by Duly Authorized Representative	Permit, Act 15, T-4 as follows: icer. either a principal executive officer, the mayor, or ranking elected official.	
Please submit this form to: Chief, Environmental P MDEQ, Office of Pollut P.O. Box 2261 Jackson, Mississippi 39	ion Control	