



RE-COVERAGE FORM

MINING STORM WATER, DEWATERING AND NO DISCHARGE GENERAL PERMIT

GENERAL PERMIT: MSR32 0942 ___. This coverage number must be completed for the referenced

The submittal of this form is required to	receive coverage u	nder the reissued Min	ing Storm Water, Dewatering
and No Discharge General Permit. This for at the bottom of this form within 30 days of	orm must be comp	leted and returned to	MDEQ at the address printed
Please indicate the activities to be covered	by this Re-Covera	ge Form (check all tha	t apply).
✓ Storm Water Discharges Associated v	with Mining	Mine Dewater	ring
Wastewater Recirculation System wit	h No Discharge		
The appropriate section of this form murecirculation system with no discharge and	st be completed For discharge imp	if the applicant propounded mine water (de	oses to operate a wastewater
If the company seeking coverage is a corpo	ration, a limited li	ability company, a par	tnership, or a business trust.
attach proof of its registration with the Mis	ssissippi Secretary	of State and/or its Cer	tificate of Good Standing.
This registration or Certificate of Good Sta	anding must be dat	ted within twelve (12) i	months of the date of the
submittal of this coverage form Coverage	will be issued in the	e company name as it	is magistamed with the
submittal of this coverage form. Coverage Mississippi Secretary of State.	will be issued in the	ne company name as it	is registered with the
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Mississippi Secretary of State. ALL INFORMATION MUST APPLICANT IS THE OWNER OPERATOR CONTACT PERSON: Chad Rankin	BE COMPLETED APPLICANT INFO	O (indicate "N/A" whe RMATION (Must check one or bot	re not applicable)
Mississippi Secretary of State. ALL INFORMATION MUST APPLICANT IS THE OWNER OPERATOR CONTACT PERSON: Chad Rankin OPERATOR COMPANY NAME: James A. Hodge	BE COMPLETED APPLICANT INFO OPERATOR ges Construction	O (indicate "N/A" whe RMATION (Must check one or bot	re not applicable)
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ALL INFORMATION MUST APPLICANT IS THE OWNER OPERATOR COMPANY NAME: James A. Hodg OPERATOR STREET OR P. O. BOX: 1281 Count OPERATOR CITY: Saltillo	APPLICANT INFO	O (indicate "N/A" whe RMATION (Must check one or bot	re not applicable) h) ZIP: 38866
ALL INFORMATION MUST APPLICANT IS THE OWNER OPERATOR CONTACT PERSON: Chad Rankin OPERATOR COMPANY NAME: James A. Hody OPERATOR STREET OR P. O. BOX: 1281 Count OPERATOR CITY: Saltillo OPERATOR PHONE #: 662 842-8583	APPLICANT INFO	O (indicate "N/A" when RMATION (Must check one or bot Company STATE: MS	re not applicable) h) ZIP: 38866
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MINE INFORMATION MINE SITE NAME: Endville Pit #1 CONTACT NAME & POSITION: Chad Rankin CONTACT PHONE NUMBER: (662 MINE PHYSICAL SITE ADDRESS (IF NOT AVAILABLE INDICATE NEAREST NAMED ROAD): STREET: Hwy 9 CITY: Sherman COUNTY. Ponotoc ZIP: 38869 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). TOWNSHIP 4E 4 OF SECTION 5 RANGE 9S LATITUDE: 34 DEGREES 19 MINUTES 39 SECONDS LONGITUDE: 88 DEGREES 54 MINUTES 66 SECONDS LAT & LONG DATA SOURCE (GPS (PLEASE GPS ENTRANCE GATE) OR MAP INTERPOLATION): Map Interpolation TOTAL ACREAGE: 10.10 MATERIAL TO BE MINED: BOTTOW 4-25-2001 4-25-2021 ESTIMATED START DATE: ESTIMATED END DATE: YYYY-MM-DD YYYY-MM-DD

STORM WATER POLLUTION PREVENTION PLAN (SWPPP)

NAICS CODE

SIC CODE

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 BMPS, TWO (2) SPECIFIC BMPS (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 ✓ YES NO POLLUTANT SOURCES AND IDENTIFY BMPS TO EFFECTIVELY CONTROL THEM? 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 YES or N.A. FROM THE DATE OF RECOVERAGE IF TRUCK TRAFFIC LEAVES MINING SITE AND MOVES DIRECTLY ONTO PAVED PUBLIC ROAD, ✓ YES or N.A. 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 INACTIVE, BUT IS SUBMITTING A RECOVERAGE FORM, THE CONSTRUCTION EXIT MUST BE INSTALLED IMMEDIATELY OF THE MINE BECOMING ACTIVE. 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 WASTERWATER 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

PERMIT NO. MS	
ESTIMATED DEWATERING VOLUME:	(GAL/DAY)
NAME AND ADDRESS OF THE RECIPIENT OF THE DI	SISCHARGE MONITORING REPORTS (DMRs), IF DIFFERENT FROM SIGNATORY:
o assure that qualified personnel properly gathered and eva- ystem, or those persons directly responsible for gathering the	tachments were prepared under my direction or supervision in accordance with a system des valuated the information submitted. Based on my inquiry of the person or persons who mana; the information, the information submitted is, to the best of my knowledge and belief, true, acc ies for submitting false information, including the possibility of fine and imprisonment for knowledge.
o assure that qualified personnel properly gathered and eva system, or those persons directly responsible for gathering the and complete. I am aware that there are significant penaltic	aluated the information submitted. Based on my inquiry of the person or persons who mana
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