



RE-COVERAGE FORM

MINING STORM WATER, DEWATERING AND NO DISCHARGE GENERAL PERMIT

GENERAL PERMIT: MSR32 <u>0626</u>. 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	y this Re-Coverag	e Form (check all th	nat apply).
Storm Water Discharges Associated with	th Mining	Mine Dewat	ering
Wastewater Recirculation System with	No Discharge		
The appropriate section of this form must recirculation system with no discharge and/o	be completed if or discharge impo	the applicant pro unded mine water (poses to operate a wastewater dewatering).
If the company seeking coverage is a corpora	tion, a limited lia	bility company, a pa	artnership, or a husiness trust
attach proof of its registration with the Missi	ssippi Secretary o	f State and/or its Co	ertificate of Good Standing
This registration or Certificate of Good Stan	ding must be date	d within twelve (12)	months of the date of the
submittal of this coverage form. Coverage w Mississippi Secretary of State.	Ill be issued in the	company name as	it is registered with the
ALL INFORMATION MUST B	E COMPLETED	(indicate "N/A" wh	ere not applicable)
	APPLICANT INFORM		
APPLICANT IS THE OWNER OPERATOR CONTACT PERSON: Chad Rankin	✓ OPERATOR	(Must check one or be	oth)
OPERATOR COMPANY NAME: James A. Hodge	s Construction (Company	
OPERATOR STREET OR P. O. BOX: 1281 County			
OPERATOR CITY: Saltillo		STATE: MS	ZIP: 38866
OPERATOR PHONE #: (662) 842-8583	OPERATOR E	MAIL: crankin0853	B@gmail.com
OWNER CONTACT PERSON: Mike Robison			
OWNER COMPANY:			
OWNER STREET OR P. O. BOX: Route 2, Box 55			
OWNER CITY: Guntown		MS	ZIP: 38849
OWNER PHONE #: (601) 869-1030	OWNER EMAIL:		Lir:

MINE INFORMATION

	MINE INFORMATION		
MINE SITE NAME: Guntown Pit			
CONTACT NAME & POSITION: Chad Rankin			
CONTACT PHONE NUMBER: (662) 842-8	8583		
MINE PHYSICAL SITE ADDRESS (IF NOT AVAILABLE IN	DICATE NEAREST NAMED ROAD):		
TREET: Hwy 45			
Guntown COUNT	TY: Lee	ZIP: 38801	
ATTACH A USGS QUAD MAP, EXTENDING 1/2 MILE BEYO the Mississippi Office of Geology. For information call 601-961-		NDARIES (Maps c	an be obtained from
/4 OF	, TOWNSHIP, RANGE		
ATITUDE: DEGREES MINUTES SECONDS			
AT & LONG DATA SOURCE (GPS (PLEASE GPS ENTRAN	NCE GATE) OR MAP INTERPOLATION): Ma	ip Interpolation	on
OTAL ACREAGE: 3.5 MATERI	IAL TO BE MINED: BOTTOW		
STIMATED START DATE: 8-1-1997	ESTIMATED END DATE: 8-1	-2023	
YYYY-MM-DD	YYY	Y-MM-DD	
SIC CODE 1442	NAICS CODE		
OTO DAY WATER	R POLLUTION PREVENTION PLAN (SWPPP)		
MPS (SEE BELOW) ARE REQUIRED TO BE IN THE SWPI	PP.		
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IF CHECKED YES TO MINE DEWATERING, FILL OUT BELOW

	E PERMIT FOR MINE DEWATE	RING?	YES NO
PERMIT NO. MS			
ESTIMATED DEWATERING VOLUME:	(GAL/DAY)		
NAME AND ADDRESS OF THE RECIPIENT OF THE DI	SCHARGE MONITORING REPO	RTS (DMRs), 1F DI	IFFERENT FROM SIGNATORY:
certify under penalty of law that this document and all atta o assure that qualified personnel properly gathered and eva ystem, or those persons directly responsible for gathering th and complete. I am aware that there are significant penalties iolations.	lusted the information submitted.] e information, the information subr	Based on my inquiry nitted is, to the best o	of the person or persons who manag
Authorized Signature	7/27/18 Date	3	
	Date President	3	
Authorized Signature ¹ Andy Hodges Printed Name		3	

