

AI #20231



RE-COVERAGE FORM

MINING STORM WATER, DEWATERING AND NO DISCHARGE GENERAL PERMIT

GENERAL PERMIT: MSR32 1453. 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 this Re-Coverage Form (check all that apply).

☒ Storm Water Discharges Associated with Mining

☐ Mine Dewatering

☒ Wastewater Recirculation System with No Discharge

The appropriate section of this form must be completed if the applicant proposes to operate a wastewater 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 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 of this coverage form. Coverage will be issued in the company name as it is registered with the Mississippi Secretary of State.

ALL INFORMATION MUST BE COMPLETED (indicate "N/A" where not applicable)

APPLICANT INFORMATION

APPLICANT IS THE ☐ OWNER ☒ OPERATOR (Must check one or both)

OPERATOR CONTACT PERSON: David E Leverett

OPERATOR COMPANY NAME: Memphis Stone and Gravel

OPERATOR STREET OR P. O. BOX: P.O. Box 1683

OPERATOR CITY: Memphis STATE: TN ZIP: 38101-1683

OPERATOR PHONE #: (901) 774-7874 OPERATOR EMAIL: dave.leverett@msgravel.com

OWNER CONTACT PERSON: _____

OWNER COMPANY: _____

OWNER STREET OR P. O. BOX: _____

OWNER CITY: _____ STATE: _____ ZIP: _____

OWNER PHONE #: (____) _____ OWNER EMAIL: _____

MINE INFORMATION

MINE SITE NAME: Seraptobia Mine

CONTACT NAME & POSITION: David Leverett

CONTACT PHONE NUMBER: (901) 774-7874

MINE PHYSICAL SITE ADDRESS (IF NOT AVAILABLE INDICATE NEAREST NAMED ROAD):

STREET: Hugh Taylor Road

CITY: Seraptobia COUNTY: Tate and Parola ZIP: _____

ATTACH A USGS QUAD MAP, EXTENDING 1/4 MILE BEYOND FACILITY, OUTLINING THE MINE BOUNDARIES (Maps can be obtained from the Mississippi Office of Geology. For information call 601-961-5523). (see attached Site Map #1)

1/4 OF _____ 1/4 OF SECTION _____ TOWNSHIP _____ RANGE _____

LATITUDE: 34 DEGREES 33 MINUTES 35.3 SECONDS N LONGITUDE: 89 DEGREES 59 MINUTES 03.2 SECONDS W

LAT & LONG DATA SOURCE (GPS (PLEASE GPS ENTRANCE GATE) OR MAP INTERPOLATION): Map interpolation

TOTAL ACREAGE: 440 MATERIAL TO BE MINED: sand and gravel

ESTIMATED START DATE: 2022 ESTIMATED END DATE: 2034
YYYY-MM-DD YYYY-MM-DD

SIC CODE 1442 NAICS CODE 212321

STORM WATER POLLUTION PREVENTION PLAN (SWPPP)

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 POLLUTANT SOURCES AND IDENTIFY BMPS TO EFFECTIVELY CONTROL THEM?

☒ YES

☐ NO

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 FROM THE DATE OF RECOVERY.

☒ 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 RECOVERY. IF A MINE IS CURRENTLY INACTIVE, BUT IS SUBMITTING A RECOVERY FORM, THE CONSTRUCTION EXIT MUST BE INSTALLED IMMEDIATELY OF THE MINE BECOMING ACTIVE.

☒ YES or N.A.

☐ NO

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 WASTEWATER RECIRCULATION SYSTEM WITH NO DISCHARGE, FILL OUT BELOW

IS MINE COVERED UNDER VALID "NO DISCHARGE" STATE OPERATING PERMIT?

☒ YES

☐ NO

PERMIT NO. MS R321453

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)

Site is still a "green field" NO construction or mining activity has occurred.

IF CHECKED YES TO MINE DEWATERING, FILL OUT BELOW

IS MINE COVERED UNDER VALID NPDES DISCHARGE PERMIT FOR MINE DEWATERING?

☐ YES

☒ NO

PERMIT NO. MS _____

ESTIMATED DEWATERING VOLUME: _____ (GAL/DAY)

NAME AND ADDRESS OF THE RECIPIENT OF THE DISCHARGE MONITORING REPORTS (DMRs), IF DIFFERENT FROM SIGNATORY:

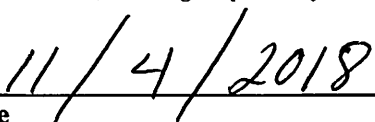
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage 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.



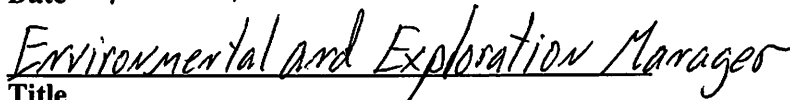
Authorized Signature¹



Printed Name



Date



Title

¹This 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.
- Duly Authorized Representative

Please submit this form to:

Chief, Environmental Permits Division
MDEQ, Office of Pollution Control
P.O. Box 2261
Jackson, Mississippi 39225



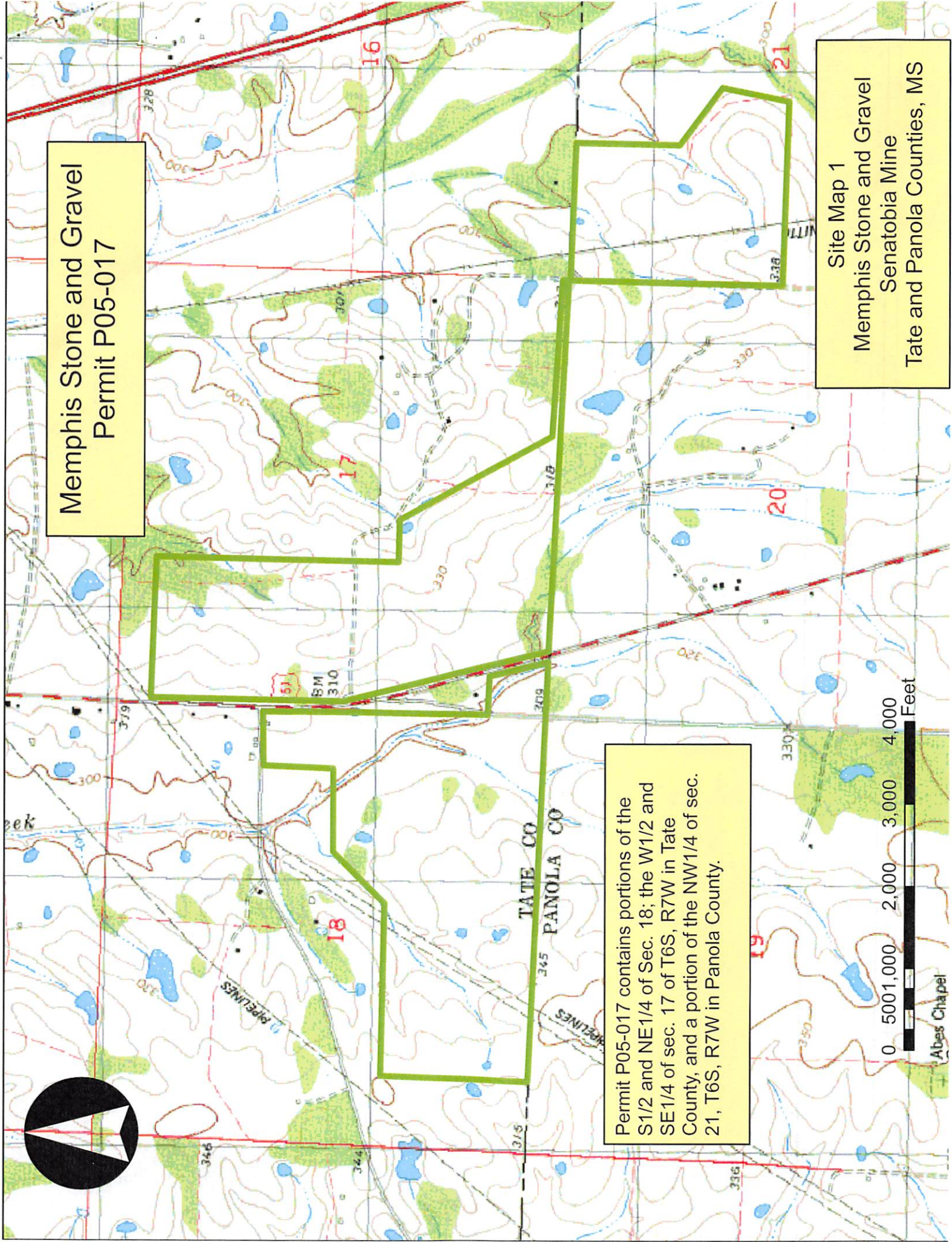
Memphis Stone and Gravel
Permit P05-017

Permit P05-017 contains portions of the S1/2 and NE1/4 of Sec. 18; the W1/2 and SE1/4 of sec. 17 of T6S, R7W in Tate County, and a portion of the NW1/4 of sec. 21, T6S, R7W in Panola County.

Site Map 1
Memphis Stone and Gravel
Senatobia Mine
Tate and Panola Counties, MS

0 500 1,000 2,000 3,000 4,000 Feet

Abes Chapel





DELBERT HOSEMAN
Secretary of State

This is not an official certificate of good standing.

Name History

Name	Name Type
MEMPHIS STONE & GRAVEL COMPANY	Legal

Business Information

Business Type:	Profit Corporation
Business ID:	591080
Status:	Good Standing
Effective Date:	09/16/1992
State of Incorporation:	TN
Principal Office Address:	1111 WILSON ST MEMPHIS, TN 38106

Registered Agent

Name
Ellis, Michael 1775 Farrish Gravel Rd;P O Box 1390 Batesville, MS 38606

Officers & Directors

Name	Title
Hal Williford 1111 Wilson St. Memphis, TN 38106	President
Patrick L Nelson 1111 Wilson St. Memphis, TN 38106	Director, Vice President
Gilbert B Wilson 1111 Wilson St. Memphis, TN 38106	Treasurer
Allen Halliday 1111 Wilson St.	Secretary

MEMPHIS, TENNESSEE, MAY 13, 1968

TO: DIRECTOR, FBI
FROM: SAC, MEMPHIS (44-1987) (P)
SUBJECT: JAMES EARL RAY, AKA; MURDER OF MARTIN LUTHER KING, JR.

RE: MEMPHIS TELETYPE TO BUREAU, MAY 12, 1968.
FOR INFORMATION OF THE BUREAU, THE FOLLOWING IS A SUMMARY OF THE
INTERVIEW OF JAMES EARL RAY, AKA, CONDUCTED BY SA [REDACTED] ON
MAY 12, 1968.

RAY STATED THAT HE WAS BORN [REDACTED] IN [REDACTED] AND
WAS CURRENTLY RESIDING AT [REDACTED] IN [REDACTED]. HE STATED
THAT HE WAS EMPLOYED AS A [REDACTED] IN [REDACTED].

RAY STATED THAT HE HAD BEEN CONVICTED OF THE CRIME OF
MURDER IN [REDACTED] IN [REDACTED] AND WAS CURRENTLY
SERVING A TERM OF [REDACTED] IN [REDACTED].

RAY STATED THAT HE HAD BEEN RELEASED FROM [REDACTED] IN
[REDACTED] AND WAS CURRENTLY RESIDING AT [REDACTED] IN [REDACTED].

RAY STATED THAT HE HAD BEEN CONTACTED BY [REDACTED] IN
[REDACTED] AND WAS CURRENTLY RESIDING AT [REDACTED] IN [REDACTED].

RAY STATED THAT HE HAD BEEN CONTACTED BY [REDACTED] IN
[REDACTED] AND WAS CURRENTLY RESIDING AT [REDACTED] IN [REDACTED].

RAY STATED THAT HE HAD BEEN CONTACTED BY [REDACTED] IN
[REDACTED] AND WAS CURRENTLY RESIDING AT [REDACTED] IN [REDACTED].

RAY STATED THAT HE HAD BEEN CONTACTED BY [REDACTED] IN
[REDACTED] AND WAS CURRENTLY RESIDING AT [REDACTED] IN [REDACTED].

RAY STATED THAT HE HAD BEEN CONTACTED BY [REDACTED] IN
[REDACTED] AND WAS CURRENTLY RESIDING AT [REDACTED] IN [REDACTED].

RAY STATED THAT HE HAD BEEN CONTACTED BY [REDACTED] IN
[REDACTED] AND WAS CURRENTLY RESIDING AT [REDACTED] IN [REDACTED].