



RE-COVERAGE FORM

MINING STORM WATER, DEWATERING AND NO DISCHARGE GENERAL PERMIT

GENERAL PERMIT: MSR32 1049. 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. |
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| 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: OPERATOR COMPANY NAME: Memphis Stone and Crave |
| OPERATOR COMPANY NAME: MEND HIS STONE AND CHAVE |
| OPERATOR CITY: Memphis STATE: TN ZIP: 38/01-1683 OPERATOR PHONE #: (901) 774-7874 OPERATOR EMAIL: DAVE, LEVELET HE MSG/AVEL, 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: DETTOR MINE FOUR | | | | |
| CONTACT NAME & POSITION: L) A VID E Leverett | | | | |
| CONTACT PHONE NUMBER: (901) 774-7874 | | | | |
| MINE PHYSICAL SITE ADDRESS (IF NOT AVAILABLE INDICATE NEAREST NAMED RGAD): | 7 1 | ا مر ا ا | | |
| STREET: SWATINTERSECTION OF COMPRESS Rd and Interstate 35 | | | | |
| CITY:COMO COUNTY: PANO /a | | | | |
| ATTACH A USGS QUAD MAP, EXTENDING % MILE BEYOND FACILITY, OUTLINING THE MINE BOUNDARIES (Maps can be obtained from the Mississippi Office of Geology. For information call 601-961-5523). | | | | |
| EYA 100F NE 1/4 OF SECTION 28 TOWNSHIP 65 RANGE 74 | | | | |
| LATITUDE: 34 DEGREES 32 MINUTES 4. SECONDS N LONGITUDE: 89 DEGREES 56 MINUTES 4. SECONDS 16 | | | | |
| LAT & LONG DATA SOURCE (GPS (PLEASE GPS ENTRANCE GATE) OR MAP INTERPOLATION): MAP INTERPOLATION | | | | |
| TOTAL ACREAGE: SO MATERIAL TO BE MINED: SAND OND GILLEY | | | | |
| ESTIMATED START DATE: 1035 ESTIMATED END DATE: 1037 ESTIMATED END DATE: | | | | |
| SIC CODE 1997 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? | VES | □NO | | |
| DOES SWPPP CONTAIN AN UP-TO-DATE ASSESSMENT OF POTENTIAL STORM WATER POLLUTANT SOURCES AND IDENTIFY BMPS TO EFFECTIVELY CONTROL THEM? | T res | □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. | VES 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 INACTIVE, BUT IS SUBMITTING A RECOVERAGE FORM, THE CONSTRUCTION EXIT MUST BE INSTALLED IMMEDIATELY OF THE MINE BECOMING ACTIVE. | VES OF N.A. | □ио | | |
| IS A WASTEWATER RECIRCULATION SYSTEM WITH NO DISCHARGE USED ON THE FACILITY? | [] xes | □NO | | |
| IS MINE DEWATERING PRESENT ON SITE? | YES | ⊘ ₩0 | | |
| IF CHECKED YES TO WASTERWATER RECIRCULATION SYSTEM WITH NO DISCHARGE, FILL OUT BELOW | | | | |
| IS MINE COVERED UNDER VALID "NO DISCHARGE" STATE OPERATING PERMIT? | VES | NO | | |
| PERMIT NO. MS 3 2 1 0 4 9 | e is sti | lla areen- | | |
| DISTANCE BETWEEN RECIRCULATION POND(S) AND PROPERTY LINE:(FT) NUMBER OF RECIRCULATION POND(S): has occurred, | | | | |
| NUMBER OF RECIRCULATION POND(S): has occurred, | | | | |
| STORAGE CAPACITY OF EACH RECIRCULATION POND:(FT³) | | | | |

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IF CHECKED YES TO MINE DEWATERING, FILL OUT BELOW

| IS MINE COVERED UNDER VALID NPDES DISCHARGE PERMIT FOR MINE DEWATERING | ? TYES TYKO | | | |
|--|--|--|--|--|
| PERMIT NO. MS | | | | |
| ESTIMATED DEWATERING VOLUME:(GAL/DAY) | | | | |
| NAME AND ADDRESS OF THE RECIPIENT OF THE DISCHARGE MONITORING REPORTS (| DMRs), IF DIFFERENT FROM SIGNATORY: | | | |
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| | | | | |
| I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designe 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 and complete. I am aware that there are significant penalties for submitting false information, includi | is, to the best of my knowledge and belief, true, accura | | | |
| violations. | / - | | | |
| Warred Threated _11/7 | 12018 | | | |
| Authorized Signature Date | | | | |
| David E. Leverett Environment | aland Exploration Mgr | | | |
| Printed Name Title | The state of the s | | | |
| ¹ This application shall be signed according to the General Permit, Act 15, T-4 as follows: | Please submit this form to: | | | |
| For a corporation, by a responsible corporate officer. For a partnership, by a general partner. | Chief, Environmental Permits Division | | | |
| For a sole proprietorship, by the proprietor. For a municipal, state or other public facility, by either a principal executive | MDEQ, Office of Pollution Control P.O. Box 2261 | | | |
| officer, the mayor, or ranking elected official. Duly Authorized Representative | Jackson, Mississippi 39225 | | | |



DELBERT HOSEMANN 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

Secretary

1111 Wilson St.

