AI #23612
GMP20080002

MAJOR MODIFICATION FORM FOR MINING GENERAL PERMIT MSR32

MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY

INSTRUCTIONS

Coverage recipients shall notify the Mississippi Department of Environmental Quality of plans to expand the acreage or "footprint" of an existing mining activity or modify the existing mining operation. This form must be submitted when (check all that apply):

- ☐ **SWPPP details have been developed and are ready for MDEQ review for subsequent phases of an existing, covered mining activity**
- ☑ **"Footprint" identified in the original MNOI is proposed to be enlarged (a modified SWPPP and an updated USGS topographic map must be submitted)**
- ☐ **Mine dewatering is proposed**
- ☐ **Mine dewatering has been discontinued**
- ☐ **Closed loop wash operations are proposed**
- ☐ **Closed loop wash operations have been discontinued**

This form must be signed by the original coverage recipient under Mississippi's Mining General Permit. A different operator must have general permit coverage transferred prior to coverage being modified. Coverage recipients are authorized to discharge storm water associated with proposed expansions of dewater pits or operate a recirculation system with no discharge, under the conditions of the General Permit, only upon receipt of written notification of approval by the MDEQ. If mining activities change which will incorporate a hydraulic dredging operation or a discharge of process wastewaters to State waters additional permitting actions shall be required.

COVERAGE RECIPIENT INFORMATION

COVERAGE RECIPIENT CONTACT PERSON: Elaine Bright

COMPANY NAME: SEB Mine Company

STREET OR P.O. BOX: 10200 Highway 57

CITY: Vancleave STATE: MS ZIP: 39565

PHONE # (INCLUDE AREA CODE): (228) 826-4363

PROJECT INFORMATION

MINING STORM WATER GENERAL PERMIT COVERAGE NUMBER: MSR32 1562

ADDITIONAL ACREAGE TO BE DISTURBED: 60 TOTAL ACREAGE: 81

MINE NAME: SEB Pit GEOLOGY APPLICATION/PERMIT NO. P06019

CITY: Vancleave COUNTY: Jackson

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.

Elaine Bright
Signature (must be signed by coverage recipient)

11-19-08
Date

Elaine Bright
Printed Name

Owner
Title

Please submit this form to:

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

Revision: 01/08/08