



RE-COVERAGE FORM

MINING STORM WATER, DEWATERING AND NO DISCHARGE GENERAL PERMIT

GENERAL PERMIT: MSR32 1 1 1 1 3. 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, Dewateri and No Discharge General Permit. This form must be completed and returned to MDEQ at the address print at the bottom of this form within 30 days of the date of the Letter of Instruction for Re-Coverage.	in
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 wastewate 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: DELIGN PIREAST : PIPE, INC.	
OPERATOR STREET OR P. O. BOX: P.O. Box 2401	
OPERATOR CITY: GULFFORT STATE: MS ZIP: 39505	
OPERATOR PHONE #: (216) 831-5833 OPERATOR EMAIL: CFOR5 C DBIGNAPECAST. COM	
OWNER CONTACT PERSON: DANNY MURRAY	
OWNER COMPANY: NA	
OWNER STREET OR P. O. BOX: 1491 Carry Farm RD.	
OWNER CITY: GULFPORT STATE: MS ZIP: 39503	
OWNER PHONE #: (218) Sed- 6782 OWNER EMAIL: DANNY MURRAY & BOUSOUTH . NET	

MINE INFORMATION MINE SITE NAME: THOMAS D. MUETRAY Coppes Free ! VICE CONTACT NAME & POSITION: 697-4765 CONTACT PHONE NUMBER: (72.8 MINE PHYSICAL SITE ADDRESS (IF NOT AVAILABLE INDICATE NEAREST NAMED ROAD): COUNTY FARM COUNTY: ZIP: 39503 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). NE 1458 OF NW 459 OF SECTION, SE 14, TOWNSHIP 7 SAM, RANGE 12 WEST LATITUDE: 30 DEGREES 26 MINUTES 40 SECONDS LONGITUDE: 2 DEGREES Z MINUTES 31 SECONDS LAT & LONG DATA SOURCE (GPS (PLEASE GPS ENTRANCE GATE) OR MAP INTERPOLATION): __ TOTAL ACREAGE: MATERIAL TO BE MINED: HU DIET ESTIMATED START DATE: MARKE ESTIMATED END DATE: NOV. 2022 SIC CODE NAICS CODE 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? DOES SWPPP CONTAIN AN UP-TO-DATE ASSESSMENT OF POTENTIAL STORM WATER 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 FROM THE DATE OF RECOVERAGE. 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. IS A WASTEWATER RECIRCULATION SYSTEM WITH NO DISCHARGE USED ON THE FACILITY? IS MINE DEWATERING PRESENT ON SITE? YES IF CHECKED YES TO WASTERWATER RECIRCULATION SYSTEM WITH NO DISCHARGE, FILL OUT BELOW IS MINE COVERED UNDER VALID "NO DISCHARGE" STATE OPERATING PERMIT? YES INO 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: (FT^3)

IF CHECKED YES TO MINE DEWATERING, FILL OUT BELOW

TES TO MINE DEWATERING,	
PERMIT NO. MS ESTIMATED DEWATERING VOLUME: (GAL/DAY) NAME AND ADDRESS OF THE RECIPIENT OF THE DISCHARGE MONITORING REPO	
I certify under penalty of law that this document and all attachments were prepared under my to assure that qualified personnel properly gathered and evaluated the information submitted. system, or those persons directly responsible for gathering the information, the information subrand complete. I am aware that there are significant penalties for submitting false information, i violations. Authorized Signature Date Printed Name Title	based on my inquiry of the person or persons who mana
This 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