

## **RE-COVERAGE FORM**

MINING STORM WATER, DEWATERING AND NO DISCHARGE GENERAL PERMIT

**GENERAL PERMIT: MSR32** <u>2</u> <u>5</u> <u>4</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 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	<b>✓</b> OWNER	<b>OPERATOR</b> (Must check one or bot	th)
OPERATOR CONTACT	PERSON: See owner	information below	
OPERATOR COMPANY	NAME: N/A		
OPERATOR STREET OF			
OPERATOR CITY: N/A		STATE: N/A	<sub>ZIP:</sub> N/A
OPERATOR PHONE #: ( <u>N/A</u> )			
OWNER CONTACT PER	SON: Charles E. Be	eck	
OWNER COMPANY: C	harles E. Beck, Be	eck Mine	
OWNER STREET OR P.	о. вох: 1591 LaGr	ange Road	
OWNER CITY: Mathis		MS	ZIP: 39752
OWNER PHONE #: (66		OWNER EMAIL: N/A	

MINE INFORMATION					
MINE SITE NAME: Charles Beck Mine					
CONTACT NAME & POSITION: Charles E. Beck, Owner					
CONTACT PHONE NUMBER: (662) 258-7415					
MINE PHYSICAL SITE ADDRESS (IF NOT AVAILABLE INDICATE NEAREST NAMED ROAD):					
STREET: LaGrange Road (approximately 1.6 miles east on LaGrange Road from MS Hwy 9)					
CITY:     Sapa     COUNTY:     Choctaw     ZIP:     39752					
ATTACH A USGS QUAD MAP, EXTENDING <sup>1</sup> / <sub>2</sub> MILE BEYOND FACILITY, OUTLINING THE MINE BOUNDARIES (Maps can be obtained from the Mississippi Office of Geology. For information call 601-961-5523).					
/4 OF/4 OF SECTION 14, TOWNSHIP 19N, RANGE 10E					
LATITUDE: <u>33</u> degrees <u>30</u> minutes <u>46</u> seconds longitude: <u>89</u> degrees <u>12</u> minutes <u>45</u> seconds					
LAT & LONG DATA SOURCE (GPS (PLEASE GPS ENTRANCE GATE) OR MAP INTERPOLATION): Google Earth Pro					
TOTAL ACREAGE: <u>4</u> MATERIAL TO BE MINED: <u>dirt/sand</u>					
ESTIMATED START DATE:					
YYYY-MM-DD         YYYY-MM-DD           SIC CODE         1442         NAICS CODE         212322					

## STORM WATER POLLUTION PREVENTION PLAN (SWPPP)

THE GENERAL PERMIT REQUIRES THE SWPPP TO BE ONSITE OR LOCALLY AVAILABLE, UP-TO-DA' CONTROLLING STORM WATER POLLUTANTS. ACCORDINGLY, IN ADDITION TO THE PROJECT'S CU 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 <u>NO,</u> THE BASIN MUST HAVE A SURFACE DISCHARGE IMMEDIATELY FROM THE DATE OF RECOVERAGE.	✓ 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 <u>NO</u> , 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.	✓ 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 WASTERWATER RECIRCULATION SYSTEM WITH NO DISCHARGE, FILL OUT BELOW

IS MINE COVERED UNDER VALID "NO DISCHARGE" STATE OPERATING PERMIT?	YES	)
PERMIT NO. MS		
DISTANCE BETWEEN RECIRCULATION POND(S) AND PROPERTY LINE: (F (MUST BE AT LEAST 150 FEET)	FT)	
NUMBER OF RECIRCULATION POND(S):		
STORAGE CAPACITY OF EACH RECIRCULATION POND:	(FT	.'3)

IF CHECKED YES TO MINE DEWATERING, FILL OUT BELOW

MINE COVERED UNDER VALID NPDES DISCHARGE PERMIT FOR MINE DEWATERING?	YES NO
ERMIT NO. MS	
STIMATED DEWATERING VOLUME:(GAL/DAY)	
AME AND ADDRESS OF THE RECIPIENT OF THE DISCHARGE MONITORING REPORTS (DMRs),	IF DIFFERENT FROM SIGNATORY:
	a service in the same service of the state of the same service in the service of the same service of the same s

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.

C. Beck

Authorized Signature

Charles E. Beck

**Printed Name** 

Owner

Date

Title

<sup>1</sup>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:

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

