





## RE-COVERAGE FORM

# MINING STORM WATER, DEWATERING AND NO DISCHARGE GENERAL PERMIT

GENERAL PERMIT: MSR32 2 4 0 4. 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 and No Discharge General Permit. This form must be completed and returned to MDEQ at the address printed and No Discharge General Permit.				
	at the bottom of this form within 30 days of the				
	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				
	and the applicant proposes to operate a wastewater				
	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).				
-	recirculation system with no discharge under the recirculation of the recircula				
	If the company seeking coverage is a corporation, a limited liability company, a partnership, or a business trust,  If the company seeking coverage is a corporation, a limited liability company, a partnership, or a business trust,  If the company seeking coverage is a corporation, a limited liability company, a partnership, or a business trust,  If the company seeking coverage is a corporation, a limited liability company, a partnership, or a business trust,  If the company seeking coverage is a corporation, a limited liability company, a partnership, or a business trust,  If the company seeking coverage is a corporation, a limited liability company, a partnership, or a business trust,  If the company seeking coverage is a corporation, a limited liability company, a partnership, or a business trust,  If the company seeking coverage is a corporation, a limited liability company, a partnership, or a business trust,  If the company seeking coverage is a corporation, a limited liability company, a partnership, or a business trust,  If the company seeking coverage is a corporation, a limited liability company, a partnership, or a business trust,  If the company seeking coverage is a corporation, a limited liability company, a partnership, or a business trust,  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 seed of the date of the				
	This registration or Certificate of Good Standing must be dated within twelve (12) more as it is registered with the submittal of this coverage form. Coverage will be issued in the company name as it is registered with the				
	Mississippi Secretary of State.				
	MISSISSIPPI Secretar.				
	ALL INFORMATION MUST BE COMPLETED (indicate "N/A" where not applicable)				
_	APPLICANT INFORMATION				
	APPLICANT IS THE OWNER (Must check one or both)				
	I'm mell Wavey				
	ONED A TOP CONTACT PERSON: OHITHING				
	OPERATOR CONTACT PERSON: Jimmey Maxey  OPERATOR CONTACT PERSON: C & M Maintenance, Inc				
	OPERATOR COMPANY NAME: C7 11 VICTIVITED TO COLD 2/0/4				
	OPERATOR COMPANY NAME: C7 111 Maintenance into operator street or p. o. box: 128 County Road 264  STATE: M 5  ZIP: 38930				
	OPERATOR COMPANY NAME: C7 111 Maintenance into operator street or p. o. box: 128 County Road 264  STATE: M 5  ZIP: 38930				
	OPERATOR COMPANY NAME: C7 11 Maintenance in a co				
	OPERATOR COMPANY NAME: C7 11 Maintenance in a co				
	OPERATOR COMPANY NAME: C7 M MAINTENAME 128 COUNTY ROAD 264  OPERATOR STREET OR P. O. BOX: 128 COUNTY ROAD 264  OPERATOR CITY: Greenwood state: M5 zip: 38930  OPERATOR PHONE #: (662) 453-3327 OPERATOR EMAIL: Fredamaxey Qatt. Net				
	OPERATOR COMPANY NAME: C7 M Maintenance mail: 128 County Road 264  OPERATOR STREET OR P. O. BOX: 128 County Road 264  OPERATOR CITY: Greenwood state: M.S. ZIP: 38930  OPERATOR PHONE #: (662) 453-3327 OPERATOR EMAIL: Fredamaxey Qath. Net  OWNER CONTACT PERSON: Jimmey Marey  OWNER COMPANY: C5 M Maintenance, M.C.				
	OPERATOR COMPANY NAME: C7 M Maintenance The 38930  OPERATOR STREET OR P. O. BOX: 128 COUNTY ROad 264  OPERATOR CITY: Creenwood STATE: M.S. ZIP: 38930  OPERATOR PHONE #: (662) 453-3327 OPERATOR EMAIL: Fredamaxey Qath. Net  OWNER CONTACT PERSON: JIMMEY MAXEY  OWNER COMPANY: C5 M Maintenance, M.C.  OWNER STREET OR P. O. BOX: 128 COUNTY ROad Well				
	OPERATOR COMPANY NAME: C7 M Maintenance The 38930  OPERATOR STREET OR P. O. BOX: 128 COUNTY ROad 264  OPERATOR CITY: Creenwood STATE: M.S. ZIP: 38930  OPERATOR PHONE #: (662) 453-3327 OPERATOR EMAIL: Fredamaxey Qath. Net  OWNER CONTACT PERSON: JIMMEY MAXEY  OWNER COMPANY: C5 M Maintenance, M.C.  OWNER STREET OR P. O. BOX: 128 COUNTY ROad Well				
	OPERATOR COMPANY NAME: C7 M Maintenance The 38930  OPERATOR STREET OR P. O. BOX: 128 COUNTY ROad 264  OPERATOR CITY: Creenwood STATE: M.S. ZIP: 38930  OPERATOR PHONE #: (662) 453-3327 OPERATOR EMAIL: Fredamaxey Qath. Net  OWNER CONTACT PERSON: JIMMEY MAXEY  OWNER COMPANY: C5 M Maintenance, M.C.  OWNER STREET OR P. O. BOX: 128 COUNTY ROad Well				
	OPERATOR COMPANY NAME: C7 M Maintenance mail: 128 County Road 264  OPERATOR STREET OR P. O. BOX: 128 County Road 264  OPERATOR CITY: Greenwood state: Ms zip: 38930  OPERATOR PHONE #: (662) 453-3327 OPERATOR EMAIL: Fredamaxey Qath. Net  OWNER CONTACT PERSON: Jimmey Maxey  OWNER COMPANY: C5 M Maintenance, MC  OWNER COMPANY: C5 M Maintenance, MC				

IF CHECKED YES TO MINE DEWATERING, FILL	OUT BELOW
S MINE COVERED UNDER VALID NPDES DISCHARGE PERMIT FOR MINE DEWATERIN	
SERMIT NO. MS (GAL/DAY) STIMATED DEWATERING VOLUME:(GAL/DAY) NAME AND ADDRESS OF THE RECIPIENT OF THE DISCHARGE MONITORING REPORT	
I certify under penalty of law that this document and all attachments were prepared under my distorance that qualified personnel properly gathered and evaluated the information submitted. But system, or those persons directly responsible for gathering the information, the information submit and complete. I am aware that there are significant penalties for submitting false information, inviolations.  O4/  Date  Printed Name  This application shall be signed according to the General Permit, Act 15, T-4 as follows:	rection or supervision in accordance with a system design ased on my inquiry of the person or persons who manage tited is, to the best of my knowledge and belief, true, accurated in the possibility of fine and imprisonment for knowledge and the possibility of fine and imprisonment for knowledge and belief, true, accurately the possibility of fine and imprisonment for knowledge and belief, true, accurately the possibility of fine and imprisonment for knowledge and belief, true, accurately the possibility of fine and imprisonment for knowledge and belief, true, accurately the possibility of fine and imprisonment for knowledge and belief, true, accurately the possibility of fine and imprisonment for knowledge and belief, true, accurately the possibility of fine and imprisonment for knowledge and belief, true, accurately the possibility of fine and imprisonment for knowledge and belief, true, accurately the possibility of fine and imprisonment for knowledge and belief, true, accurately the possibility of fine and imprisonment for knowledge and belief, true, accurately the possibility of fine and imprisonment for knowledge and belief, true, accurately the possibility of fine and imprisonment for knowledge and belief, true, accurately the possibility of fine and imprisonment for knowledge and belief, true, accurately the possibility of fine and imprisonment for knowledge and belief, true, accurately the possibility of fine and imprisonment for knowledge and belief, true, accurately the possibility of fine and imprisonment for knowledge and belief, true, accurately the possibility of fine and imprisonment for knowledge and belief, true, accurately the possibility of fine and imprisonment for knowledge and belief, true, accurately the possibility of fine and imprisonment for knowledge and belief, true, accurately the possibility of fine and true accurately the possibility of fine and true accurately the possibility of fine accurately the possibility of fine accurately the possibility of fine accurately the possibility

## F0008

Fee: \$ 25

#### 2018125559



DELBERT HOSEMANN Secretary of State

Business ID: 664062 Filed: 04/04/2018 01:07 PM C. Delbert Hosemann, Jr. Secretary of State

TELEPHONE: (601) 359-1633

P.O. BOX 136 JACKSON, MS 39205-0136

## 2018 Corporate Annual Report

#### **Business Information**

Business ID: 664062

State of Incorporation: MS

Phone: (\*\*\*)\*\*\*-\*\*\*

FEIN: \*\*\_\*\*\*\*\*

Business Name: C & M MAINTENANCE, INC.

Business Email: cmmaintenance@att.net

128 CR 266

Principal Address: Greenwood, MS 38930

#### Registered Agent

FREDA C MAXEY Name:

RT 1 BOX 212

GREENWOOD, MS 38930 Address:

#### Officers

Officers	Address:	Director:
Title/Name:	1834 Cr 339	
President: Freda Maxey	Greenwood, MS 38930	
Vice President: Jimmy E Maxey Sr	128 Cr 266 Greenwood, MS 38930	
Secretary: Jimmy E Maxey Sr	128 Cr 266 Greenwood, MS 38930	
Treasurer:		

Stocks

Stocks	4 deminade	Series:	Issued:
Class:	Authorized:	Serves	0
Common	0		0
Common	0		1000
Common	10000		

### NAICS Code/Nature of Business

212321 - Construction Sand and Gravel Mining

237990 - Other Heavy and Civil Engineering Construction

237990 - Other Heavy and Civil Engineering Construction

By entering my name in the space provided, I certify that I am authorized to file this document on behalf of this entity, have examined the document and, to the best of my knowledge and belief, it is true, correct and complete as of this day 04/04/2018.

Address: Name:

1834 County Road 339 Freda Maxey Greenwood, MS 38930 President

# Officers List

Name:

Freda Maxey President

Jimmy E Maxey Sr Director, Secretary, Vice President

Jimmy Maxey, Jr. Other

Address:

1834 Cr 339 Greenwood, MS 38930

128 Cr 266 Greenwood, MS 38930

128 CR 266 Greenwood, MS 38930 MINE INFORMATION

Mayou Mine					
MINE SITE NAME: Maxey Mine					
CONTACT NAME & POSITION: Jimmey Maxey Owner					
CONTACT PHONE NUMBER: (WUL.) 453-3327					
MINE PHYSICAL SITE ADDRESS (IF NOT AVAILABLE INDICATE NEAREST NAMED ROAD):					
STREET: County Road 180					
CITY: Greenwood COUNTY: Carroll ZIP: 38430					
ATTACH A USGS QUAD MAP, EXTENDING ½ MILE BEYOND FACILITY, OUTLINING THE MINE BOUNDARIES (Maps can be obtained from the Mississippi Office of Geology. For information call 601-961-5523).					
SE 40F 20 40F SECTION 14 , TOWNSHIP 18 NOVTH, RANGE 2 East					
LATITUDE: 33 DEGREES 25 MINUTES 6 SECONDS LONGITUDE: 90 DEGREES 5 MINUTES 2 SECONDS					
LAT & LONG DATA SOURCE (GPS (PLEASE GPS ENTRANCE GATE) OR MAP INTERPOLATION):					
TOTAL ACREAGE: 4 MATERIAL TO BE MINED: CAY (TRAVE)					
ESTIMATED START DATE: 2016-12-01 ESTIMATED END DATE: 2023-03-31					
SIC CODE 1442 YYYY-MM-DD NAICS CODE 2123 ZT					
STORM WATER POLLUTION PREVENTION PLAN (SWPPP)					
THE CENTERAL DEPART REQUIRES THE SWIRB TO BE ONCITE OF LOCALLY AVAILABLE UP TO BATE AND EFFECTIVE IN					
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?  NO  NO					
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, YES or N.A. NO					
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? YES					
IS MINE DEWATERING PRESENT ON SITE?					
12 13 13 13 13 13 13 13 13 13 13 13 13 13					
AVENUEDIL BS930					
IF CHECKED YES TO WASTERWATER RECIRCULATION SYSTEM WITH NO DISCHARGE, FILL OUT BELOW					
IS MINE COVERED UNDER VALID "NO DISCHARGE" STATE OPERATING PERMIT?  YES NO					
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:(FT³)					