AI#17167





RE-COVERAGE FORM

MINING STORM WATER, DEWATERING AND NO DISCHARGE GENERAL PERMIT

GENERAL PERMIT: MSR32 1 081. 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 app	dy).	
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 OPER			
OPERATOR CONTACT PERSON: Scott Dobbs 662.436.2600			
OPERATOR COMPANY NAME: Preston Dobbos Trucking & Gravel Sales LLC			
OPERATOR STREET OR P. O. BOX: POSO X 9	•		
OPERATOR CITY: Have Hon	STATE: M\$55	ZIP: 39746	
OPERATOR PHONE #: (662) 343-5150 OP	ERATOR EMAIL:		
642 -436-2600	Clas O		
OWNER CONTACT PERSON: 500H Dobbs Elaine Obbs OWNER COMPANY: Preston Dobbs Trucking & Glavel Sales LLC			
OWNER COMPANY: Preston DO DOS IN	ucking of Gravel Dal	esuc	
OWNER STREET OR P. O. BOX: 400 91 HAM: 1			
OWNER CITY: HAND for	STATE: M:SS	ZIP: 39746	
OWNER PHONE #: (662) 343 - 5150 OWNER EMAIL:			
462-186-2600	ADDITION OF THE REST		
436			

IF CHECKED YES TO MINE DEWATERING, FILL OUT BELOW

IS MINE COVEDED UNDER WALLD MAN	ALLOCT BELOW
IS MINE COVERED UNDER VALID NPDES DISCHARGE PERMIT FOR MINE D. PERMIT NO. MS <u>3 2 1 0 8 1</u>	EWATERING? YES NO
ESTIMATED DEWATERING VOLUME:(GAL/DAY)	
NAME AND ADDRESS OF THE RECIPIENT OF THE DISCHARGE MONITORING	G REPORTS (DMRs), IF DIFFERENT FROM SIGNATORY:
1 certify under penalty of law that this document and all attachments were prepared und to assure that qualified personnel properly gathered and evaluated the information subm system, or those persons directly responsible for gathering the information, the information and complete. I am aware that there are significant penalties for submitting false inform violations. Authorized Signature Date	
Printed Name Title	Registed / gent operatu
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 are above.	Please submit this form to:

F0100

Fee: \$ 50

2017242652



DELBERT HOSEMANN Secretary of State Business ID: 1128993 Filed: 09/28/2017 01:19 PM C. Delbert Hosemann, Jr. Secretary of State

TELEPHONE: (601) 359-1633

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

Mississippi Limited Liability Company Certificate of Formation

Business Information

Business Type: Limited Liability Company

Business Name: Preston Dobbs Trucking and Gravel Sales LLC

Business Email: dobbspreston@gmail.com

Future Effective Date: 09/28/2017

NAICS Code/Nature of Business

423320 - Brick, Stone, and Related Construction Material Merchant Wholesalers

484220 - Specialized Freight (except Used Goods) Trucking, Local

484230 - Specialized Freight (except Used Goods) Trucking, Long-Distance

Registered Agent

Name:

Martha Elaine Dobbs

Address:

40091 Hamilton Road Hamilton, MS 39746

Signature

The undersigned certifies that:

- 1) he/she has notified the above-named registered agent of this appointment;
- 2) he/she has provided the agent an address for the company, and;
- 3) the agent has agreed to serve as registered agent for this company

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 document.