A1:76159





RE-COVERAGE FORM

MINING STORM WATER, DEWATERING AND NO DISCHARGE GENERAL PERMIT

GENERAL PERMIT: MSR32 <u>2857</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
OPERATOR (Must check one or both) OPERATOR CONTACT PERSON: OPERATOR COMPANY NAME: OPERATOR STREET OR P. O. BOX: OPERATOR CITY: OPERATOR CITY: OPERATOR PHONE #: (662) 287-2296 OPERATOR EMAIL: <u>buddy Ayers @ bellsouth. Net</u>
OPERATOR STREET OR P. O. BOX: 202 Augers Road
OPERATOR CITY: Corinth STATE: M5 ZIP: 38834
OPERATOR PHONE #: (662) 287-2296 OPERATOR EMAIL: buddy Ayers @ fellsouth. Net
OWNER CONTACT PERSON:
OWNER COMPANY:
OWNER STREET OR P. O. BOX:
OWNER CITY: STATE: ZIP:
OWNER PHONE #: () OWNER EMAIL:

MINE INFORMATION MINE INFORMATION		
MINE SITE NAME: Kyle Mine		
CONTACT NAME & POSITION: Buddy agers, Vice President		
CONTACT PHONE NUMBER: (1662) 287-2296		
MINE PHYSICAL SITE ADDRESS (IF NOT AVAILABLE INDICATE NEAREST NAMED ROAD):		
STREET: CR 740		
CITY: Corenth COUNTY: alcorn	_ ZIP: <u>_ 388</u>	34
ATTACH A USGS QUAD MAP, EXTENDING ½ MILE BEYOND FACILITY, OUTLINING THE MINE BOUN the Mississippi Office of Geology. For information call 601-961-5523).	IDARIES (Maps can	be obtained from
SE (TD) 4 OF SE (TD) 14 OF SECTION 5(TD), TOWNSHIP 2 South, RANGE 6 Ea	st	
LATITUDE: 34 DEGREES 93 MINUTES 28 SECONDS LONGITUDE: 88 DEGREES 68	MINUTES <u>38</u> SI	ECONDS
LAT & LONG DATA SOURCE (GPS (PLEASE GPS ENTRANCE GATE) OR MAP INTERPOLATION):	nap	
TOTAL ACREAGE: less than 4 AC MATERIAL TO BE MINED: dirt	unitie made s	
ESTIMATED START DATE: 3-31-23 YYYY-MM-DD ESTIMATED END DATE: 3-1-23 YYYY-MM-DD	31-28	
SIC CODE NAICS CODE 237310		
STORM WATER POLLUTION PREVENTION PLAN (SWPPP)		
THE GENERAL PERMIT REQUIRES THE SWPPP TO BE ONSITE OR LOCALLY AVAILABLE, UP-TO-DA	TE AND EFFECTI	VE IN
CONTROLLING STORM WATER POLLUTANTS. ACCORDINGLY, IN ADDITION TO THE PROJECT'S C BMPS (SEE BELOW) ARE REQUIRED TO BE IN THE SWPPP.	CURRENT BMPS, T	WO (2) SPECIFIC
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 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.	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 DISCHAF	RGE, FILL OUT BE	LOW
IS MINE COVERED UNDER VALID "NO DISCHARGE" STATE OPERATING PERMIT?	YES	NO
PERMIT NO. MS		Service Control
DISTANCE BETWEEN RECIRCULATION POND(S) AND PROPERTY LINE:(FT) (MUST BE AT LEAST 150 FEET)		- V. W
NUMBER OF RECIRCULATION POND(S):		
STORAGE CAPACITY OF EACH RECIRCULATION POND:		(FT³)

IF CHECKED YES TO MINE DEWATERING, FILL OUT BELOW

IS MINE COVERED UNDER VALID NPDES DISCHARGE PERMIT FOR MINI	E DEWATERING? YES NO
PERMIT NO. MS	
ESTIMATED DEWATERING VOLUME:(GAL/DAY	0
NAME AND ADDRESS OF THE RECIPIENT OF THE DISCHARGE MONITOR	RING REPORTS (DMRs), IF DIFFERENT FROM SIGNATORY:
certify under penalty of law that this document and all attachments were prepare o assure that qualified personnel properly gathered and evaluated the information	submitted. Based on my inquiry of the person or persons who mans
ystem, or those persons directly responsible for gathering the information, the info and complete. I am aware that there are significant penalties for submitting false in	rmation submitted is, to the best of my knowledge and belief, true, ac
violations.	
Budder Down	3-9-23
Authorized Signature ¹ Date	e
Buddy Ayers	Vice President
Printed Name Title	e
This application shall be signed according to the General Permit, Act 15, T-4 as fol	llows: Please submit this form to:
 For a corporation, by a responsible corporate officer. For a partnership, by a general partner. 	Chief, Environmental Permits Division
 For a sole proprietorship, by the proprietor. 	MDEO. Office of Pollution Control
For a municipal, state or other public facility, by either a principal executive	P.O. Box 2261
officer, the mayor, or ranking elected official.	Jackson, Mississippi 39225

Duly Authorized Representative



Name History

Name

BUDDY AYERS CONSTRUCTION, INC.

Name Type

Legal

Business Information

Business Type:

Profit Corporation

Business ID:

529749

Status:

Good Standing

Effective Date:

04/28/1986

State of Incorporation:

Mississippi

Principal Office Address:

202 AYERS ROAD

CORINTH, MS 38834

Registered Agent

Name

BUDDY AYERS 202 AYERS ROAD CORINTH, MS 38834

Officers & Directors

Name

Title

Sherolyn Ayers

202 Ayers Road

Corinth, MS 38834

A. 75-

Director, President

Buddy Ayers

202 Ayers Rd

Corinth, MS 38834

Director, Treasurer, Vice President

Shawn Ayers

202 Ayers Road

Corinth, MS 38834

Director, Secretary

Date: 02/21/2023