PERMITTED FA

Appomattox Lime Company

2343 Highland Farm Road NW, Roanoke VA 24017

Permit Number: VAG840046

No Discharge:

## COMMONWEALT. JF VIRGINIA **DEPARTMENT OF ENVIRONMENTAL QUALITY**

NONMETALLIC MINERAL MINING DISCHARGE MONITORING REPORT (DMR)

	MONITORING PERIOD								
	YEAR	MO	DAY		YEAR	MO	DAY		
FROM	2022	4	1	то	2022	6	30		

**RETURN TO** 

13.0

60

Department of Environmental Quality Blue Ridge - Roanoke Regional Office 901 Russell Drive, Salem VA 24153 (540) 562-6700

MGIL

MG/L

NOTE: READ PERMIT AND GENERAL INSTRUCTIONS BEFORE COMPLETING THIS FORM AND RETURNING IT.

0

1/2 M

1/3M

GRAD

GRAB

Outfall Num: 001	Reporting	Frequency: Qua			17 10 20	22 6 30					
PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				110		ate: Jul 25, 201
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	NO.	FREQUENCY OF ANALYSIS	SAMPLE TYPE
001 FLOW	REPORTO	0.56	0.56	mas	市外在农业会会会	*****	******	(3	0	1 1	
	REQRMNT	NL	NL	MGD	市资金的复数的	*****	*****	+		1/3 m	EST
002 pH	REPORTO	****	****		0 51	******	d	T 69. 4		1/3M	EST
	REGRMNT	*****	******		0.01		8.21	30	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	13 M	GEAB
				-	6.0	****	9.0	SU		1/3M	GRAB
OOA TOO	REPORTO	****	由物中的物质由物	0	市中市大会会会会	13 0	13 0	100 - 11	^		

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13.0

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Additional Permit Requirements (Outfall 001):

REQRMNT

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Comments:

004 TSS

## PERMITTED FACILITY

Apportatiox Lime Company 2343 Highland Farm Road NW, Roanoke VA 24017 Permit Number: VAG840046

## COMMONWEALTH OF VIRGINIA DEPARTMENT OF ENVIRONMENTAL QUALITY

NONMETALLIC MINERAL MINING DISCHARGE MONITORING REPORT (DMR)

## RETURN TO

Department of Environmental Quality
Blue Ridge - Rosnoke Regional Office
901 Russell Drive, Salam VA 24153
(540) 562-6700

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 GATHER AND EVALUATE 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. AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND

BYPA	SS AND OVERFLOWS	ND OVERFLOWS					
TOTAL OCCURRENCES	TOTAL FLOW(M.G.)	TOTAL BODS(K.G.)					
0	0	0					

IMPRISONMENT FOR KNOWING VIOLATIONS.

	DATE				
Enc Stone	Dr. C		2022	6	24
TYPED OR PRINTED NAME	SIGNATURE	CERTIFICATE NO.	YEAR	MO.	DAY
PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE			
Scie Stone	Fout Fr	434-933-8258 Exx 102	2022	6	24
TYPED OR PRINTED NAME	SIGNATURE		YEAR	MO.	DAY