PERMITTEE NA DDRESS(INCLUDE FACILITY NAM ATION IF DIFFERENT)

NAME Appomattox Lime Company ADDRESS 143 Quarry Road

FACILITY'S Appomattox

VA 24522

PHYSICAL 143 Quarry Rd ADDRESS

Appomattox

VA 24522

COMMONWIS ALTH OF VIRGINIA
DEPARTMENT OF VIRONMENTAL QUALITY
NONMETA MINERAL MINING

DISCHARGE MONITORING REPORT(DMR)

						fr				
	V	002								
	PERM	IT NUM	ABER	DISCHARGE NUMBE						
	MONITOR				RING PERIOD					
ROM	YEAR	МО	DAY		YEAR	MO	DA			
	2018	1		10	2018	12	3			

04/21/

DEPT. OF ENVIRONMENTAL CO. LITY (REGIONAL OFFICE)

Blue Ridge Regional Office 7705 Timberlake Rd

Lynchburg

VA 24502

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

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO.	FREQUENCY	SAMPLE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	EX.	OF ANALYSIS	TYPE
001 FLOW	REPORTED	******			******	*******	*******		+	1	
No Flow	REQUIREMENT	*******	NL	MG	*******	******	******		+	1/YR	EST
102 pH	REPORTED	******	******			*******			1	1 1/18	ESI
	REQUIREMENT	*****	******	-	NL	******	NL	su	+-	1/YR	CUAD
04 TSS	REPORTED	******	******		******	*******			+	1/18	GRAB
	REQUIREMENT	******	*******		******	*******	NL	MG/L		1/YR	GRAB

**DEQ Comments:** 

PRECEDING MEASI	URABLE STORM EVENT
DAYS	Hours
and the state of t	THE PROPERTY OF THE PROPERTY O

AND OVERFLOWS	OCCURRENCES	TOTAL FLOW(M.G.)	TOTAL BOD5(K.G.)	OPERATOR IN RESPONSIBLE CHARGE				TE		
CERTIFY UNDER FEMALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED.			TYPED OR PRINTED NAME	SIGNATURE	CERTIFICATE NO.	YEAR	MO.	DAY		
TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OF PERSONS WHO MANAGE THE SYSTEM OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION. THE INFORMATION SUBMITTED IS TO THE BEST OF MY PROMISEDED AND BELIEF THER. ACCURATE		PRINCIPAL EXECUTIVE OFFIC	TELEPHONE			1				
AND COMPLETE. I	AN AMARE THAT THERE IN. INCLUDING THE PO	ARE SIGNIFICANT PENAL SSIBÎLITY OF FINE AND	TIES FOR SUBMITTING	TYPED OR PRINTED NAME	SIGNATURE OF STATE	933-8258	YEAR	MO.	DAY	