PERMITTED FACILITY

Rockydale - Broadway Quarry -

2343 Highland Farm Road NW, Roanoke VA 24017

Permit Number: VAG840133

No Discharge:

COMMONWEALTH OF VIRGINIA DEPARTMENT OF ENVIRONMENTAL QUALITY

NONMETALLIC MINERAL MINING DISCHARGE MONITORING REPORT (DMR)

	MONITORING PERIOD									
	YEAR	MO	DAY		YEAR	MO	DAY			
FROM	2019	1	01	TO	2019	12	31			

RETURN TO

Department of Environmental Quality

Valley Regional Office

4411 Early Road, P.O. Box 3000, Harrisonburg VA 22801

(540) 574-7800

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

Run Date: Jun 26, 2019

Outfall Num: 006	Reporting F	requency: Ann	ual							Run Da	te: Jun 26, 201
PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO.	FREQUENCY OF	SAMPLE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	EX.	ANALYSIS	TYPE
002 pl-l	REPORTD	******	*****			******					
	REGRMNT	******	*******		NL	******	NL.	SU		1/YR	GRAB
004 TSS	REPORTD	*******	******		*******	******					
	REORMNT	*******	*******		*******	*******	NL	MG/L		1/YR	GRAB
199 FLOW, PRECIPITATION EVENT	REPORTD	******			*****	*******	*****				
	REQRMNT	******	NL.	MG	******	*******	******			1/YR	EST

PRECEDING ME	EASURABLE STORM EVENT
Days	Hours

Additional Permit Requirements (Outfall 006):

Comments:

PERM: FACILITY

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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. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS.

BYPASS AND OVERFLOWS					
TOTAL OCCURRENCES	TOTAL FLOW(M.G.)	TOTAL BOD5(K.G.)			
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					

OPERATOR IN RESPONSIBLE CHARGE				DATE			
Timothy Childers	Tomothy Children	R9841153	2019	12	3/		
TÝPED OR PRINTED NAME	SIGNATURE	CERTIFICATE NO.	YEAR	MO.	DAY		
PRINCIPAL EXECUTI	VE OFFICER OR AUTHORIZED AGENT	TELEPHONE	-	1			
Timothy Childers	Timothy Children	540-682-3418	2019	12_	3/		
TYPED OR PRINTED NAME	SIGNATURE		YEAR	MO.	DAY		