

PERMITTED FACILITY

Rockydale Quarries Corporation - Rockydale Plant
PO Box 8425, Roanoke VA 24014
Permit Number: VAG840067

No Discharge:

**COMMONWEALTH OF VIRGINIA
DEPARTMENT OF ENVIRONMENTAL QUALITY
NONMETALLIC MINERAL MINING
DISCHARGE MONITORING REPORT (DMR)**

RETURN TO

Department of Environmental Quality
Blue Ridge Regional Office
3019 Peters Creek Road, Roanoke VA 24019
(540) 562-6700
NOTE: READ PERMIT AND GENERAL INSTRUCTIONS BEFORE
COMPLETING THIS FORM AND RETURNING IT.

MONITORING PERIOD						
YEAR	MO	DAY		YEAR	MO	DAY
2018	1	1	TO	2018	12	31

Outfall Num: 006

Reporting Frequency: Annual

Run Date: Sep 25, 2017

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION			NO. EX.	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
001 FLOW	REPORTD	*****	0.0072	MGD	*****	*****	*****		1/yr	EST
	REQMNT	*****	NL	MG	*****	*****	*****		1/YR	EST
002 pH	REPORTD	*****	*****			7.78	50	0	1/yr	Grab
	REQMNT	*****	*****		NL	*****	NL	SU	1/YR	GRAB
004 TSS	REPORTD	*****	*****		*****	20.0	mg/l	0	1/yr	Grab
	REQMNT	*****	*****		*****	NL	MG/L		1/YR	GRAB

PRECEDING MEASURABLE STORM EVENT	
Days	Hours
6	0

Additional Permit Requirements (Outfall 006):

Comments:

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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.)
0	0	0

OPERATOR IN RESPONSIBLE CHARGE			DATE		
TYPED OR PRINTED NAME	SIGNATURE	CERTIFICATE NO.	YEAR	MO.	DAY
PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE			
Keith Holt		540-597-5017	2018	5	30
TYPED OR PRINTED NAME	SIGNATURE		YEAR	MO.	DAY