## COMMONWEA | OF VIRGINIA DEPARTMENT OF ENVIRONMENTAL QUALITY

## VIRGINIA POLLUTANT DISCHARGE ELIMINATION SYSTEM (VPDES)

## DISCHARGE MONITORING REPORT (DMR)

NOTE READ PERMIT AND GENERAL INSTRUCTIONS BEFORE COMPLETING THIS FORM

DEPT. OF ENVIRONMENTAL QUALITY
Blue Ridge Regional Office
3019 Peters Creek Road
Roanoke VA, 24019

TYPE: STORMWATER

BENCHMARK MONITORING

LIME AND GYPSUM PRODUCT

MANUFACTURERS (SIC 3274, 3275)

PERMITTEE NAME Rockydale Quarries Corporation

VAR052303 1
PERMIT NUMBER OUTFALL NO.

FACILITY NAME

Starkey Lime Plant

**ADDRESS** 

5925 Starkey Road

Roanoke VA 24018

CONTACT PERSON Keith Holt

TELEPHONE

540-597-5017

Check	MONITORING PERIOD							
One	YEAR	МО	DAY	ТО	YEAR	MO	DAY	
	2014	July	1		2014	December	31	
	2015	January	1		2015	June	30	
	2015	July	1		2015	December	31	
	2016	January	1		2016	June	30	
	2016	July	1	1	2016	December	31	
	2017	January	1		2017	June	30	
	2017	July	1	1	2017	December	31	
	2018	January	1	1	2018	June	30	
	2018	July	1	1	2018	December	31	
	2019	January	1	1	2019	June	30	

DADAMETED			CONCENTRATION			NO.	
PARAMETER		MINIMUM	AVERAGE	MAXIMUM	UNITS	EX	
	REPORTED		*****				
002 pH	BENCHMARK CONC	6.0	*****	90	SU		
004 TOTAL SUSPENDED SOLIDS	REPORTED	*****	*****				
	BENCHMARK CONC	*****	*****	100	mg/L		
361 IRON. TOTAL RECOVERABLE	REPORTED	*****	*****				
	BENCHMARK CONC	*****	*****	1.0	mg/L		
	REPORTED						
	BENCHMARK CONC						
The second secon	REPORTED						
	BENCHMARK CONC						
	REPORTED						
	BENCHMARK CONC						

STORM INFOR		1500		
DATE	YR	МО	DAY	
DURATION	HRS	MIN		
RAINFALL TOTAL (IN )				
PRECEDING EVENT	DAYS	HRS		

COMMENTS

No Flow

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 impresonment for knowing violations.

PRINCIPLE EXECUTIVE OFFICER	DATE			
Keith Holt	Ille	19	1	2
TYPE D OP PRINTED NAME	SIGNATURE	YR	MO	DAY

4/1