## COMMONWEALTH OF VIRGINIA DEPARTMENT OF ENVIRONMENTAL QUALITY

## VIRGINIA POLLUTANT DISCHARGE ELIMINATION SYSTEM (VPDES)

## DISCHARGE MONITORING REPORT (DMR)

PERMIT NUMBER

BENCHMARK MONITORING LIME AND GYPSUM PRODUCT MANUFACTURERS (SIC 3274, 3275)

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

PERMITTEE NAME	Rockydale Quarries Corporation

FACILITY NAME Starkey Lime Plant

ADDRESS: <u>5925 Starkey Road</u>

Roanoke VA 24018

CONTACT PERSON Chris Willis

TYPE: **STORMWATER** 

TELEPHONE 540-315-0375

Check	MONITORING PERIOD						
One	YEAR	MO	DAY	TO	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		2016	December	31
	2017	January	1		2017	June	30
	2017	July	1		2017	December	31
	2018	January	1		2018	June	30
	2018	July	1		2018	December	31
Х	2019	January	1		2019	June	30

OUTFALL NO.

PARAMETER		CONCENTRATION			NO.	
174VWETER		MINIMUM	AVERAGE	MAXIMUM	UNITS	EX.
002 54	REPORTED		*****			
002 pH	BENCHMARK CONC.	6.0	*****	9.0	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.					
	REPORTED					
	BENCHMARK CONC.					
	REPORTED					
	BENCHMARK CONC.					

VAR052303

	STORM EVENT INFORMATION					
	DATE	YR.	МО	DAY		
	DAIL					
ı	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 imprisonment for knowing violations.

PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT				■
Chris Willis	Can Will	19	7	10
TYPED OR PRINTED NAME	SIGNATURE	YR.	MO.	DAY