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	МО	DAY		YEAR	MO	DAY		
FROM	2021	10	01	то	2021	12	3/		

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,

Outfall Num: 001	Reporting F	requency: Qua	arter							Run Da	ate: Jun 26, 201
PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO.	FREQUENCY OF	SAMPLE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	EX.	ANALYSIS	TYPE
004 EL 004	REPORTD	.284	.284	MAD	*****	*******	*****	MAD	0	1/7/1	Est
001 FLOW	REQRMNT	. NL	NL	MGD	*******	******	*****			1/3M	EST
002 pH	REPORTO	*****	******	50	7.92	业长长长村内 产女	7.22	54	Ō	1/3/1	Book
	REQRMNT	******	*******		6.5	*****	9.5	SU		1/3M	GRAB
004 TSS	REPORTO	*****	******	Ma 11	*****	2.3	2.3	Moll	()	1/3/1	Grab
	REQRMNT	*****	********	17	*****	30	60	MG/L		1/3M	GRAB

Additional Permit Requirements (Outfall 001):

Comments:

PERN D 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.)		

	DATE				
Tim Childers	Timoth Child		2022	्।	04
TYPED OR PRINTED NAME	SIGNATURE	CERTIFICATE NO.	YEAR	MO.	DAY
PRINCIPAL EXECUTIVE	TELEPHONE				
Tim Childrens	Justly Chillen	540-682-3418	2027	01	04
TYPED OR PRINTED NAME	SIGNATURE		YEAR	MO.	DAY