

**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)**

**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.

MONITORING PERIOD							
YEAR	MO	DAY		YEAR	MO	DAY	
2021	01	01	FROM	2021	12	31	TO

Outfall Num: 005

Reporting Frequency: Annual

Run Date: Jun 26, 2019

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX.	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
002 pH	REPORTD	*****	*****			*****					
	REQRMNT	*****	*****		NL	*****	NL	SU		1/YR	GRAB
004 TSS	REPORTD	*****	*****		*****	*****					
	REQRMNT	*****	*****		*****	*****	NL	MG/L		1/YR	GRAB
199 FLOW, PRECIPITATION EVENT	REPORTD	*****			*****	*****	*****				
	REQRMNT	*****	NL	MG	*****	*****	*****			1/YR	EST

PRECEDING MEASURABLE STORM EVENT	
Days	Hours

Additional Permit Requirements (Outfall 005):

Comments:

**PERMIT 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		
<i>Tim Childers</i>	<i>Timothy Childers</i>	_____	2022	01	04
TYPED OR PRINTED NAME	SIGNATURE	CERTIFICATE NO.	YEAR	MO.	DAY
PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT			TELEPHONE		
<i>Tim Childers</i>	<i>Timothy Childers</i>	540-682-2418	2022	01	04
TYPED OR PRINTED NAME	SIGNATURE		YEAR	MO.	DAY