

## Attachment A

<b>FACILITY NAME &amp; PERMIT:</b> Appomattox Lime VAG-840046	<b>AUDIT DATE:</b> 1-12-2024	<b>Calendar Year covered by the audit:</b> 2023
<b>BENCHMARK MONITORING</b> (Describe Permit Requirement, Including Frequency)	001 - Flow, PH, TSS - Quarterly 002 - Flow, PH, TSS, Annual 003 - Flow, PH, TSS, Annual 004 - Flow PH TSS Quarterly 005 - Flow PH TSS Quarterly	
<b>Time Period:</b> 1-1-2023 thru 12-31-2023		
<b>DMRs Submitted Late (List Outfalls):</b> None		
<b>List Outfall(s) For Monitoring Did Not Take Place For This Reporting Period:</b>		
<b>When Outfalls Were Monitored, But Not All Parameters Were Quantified, List The Outfall And The Corresponding Parameters That Are Missing:</b>		
None		
<b>For all analytical results above the Benchmark value ranges, list the Outfall, parameter and corresponding results:</b>		
None		
Have Fuels, lubricants, coolants, hydraulic fluids, or other petroleum products been discharged on the ground or into surface waters? (YES) <input checked="" type="radio"/> (NO)		
Have process waters been discharged to surface waters? (YES) <input checked="" type="radio"/> (NO)		

FACILITY NAME: Appomattox Lime		AUDIT YEAR: 2023		
<b>QUARTERLY VISUAL OUTFALL EXAMINATIONS</b>				
(State whether or not each examination was completed with the date, or whether it is incomplete, or missing.)				
	1 <sup>ST</sup> QUARTER	2 <sup>ND</sup> QUARTER	3 <sup>RD</sup> QUARTER	4 <sup>TH</sup> QUARTER
Outfall - 001	Complete 3-21-2023	Complete 5-4-2023	Complete 8-22-2023	Complete 11-15-2023
Outfall - 002	Complete 3-21-2023	Complete 5-4-2023	Complete 8-22-2023	Complete 11-15-2023
Outfall - 003	Complete 3-21-2023	Complete 5-4-2023	Complete 8-22-2023	Complete 11-15-2023
Outfall 004	Complete 3-21-2023	Complete 5-4-2023	Complete 8-22-2023	Complete 11-15-2023
Outfall 005	Complete 3-21-2023	Complete 5-4-2023	Complete 8-22-2023	Complete 11-15-2023
Outfall				
Outfall				

FACILITY NAME: <i>Appomattox Lime</i>	AUDIT YEAR: <i>2023</i>
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**SWPPP**  
(State whether or not each item is complete, incomplete, or missing)

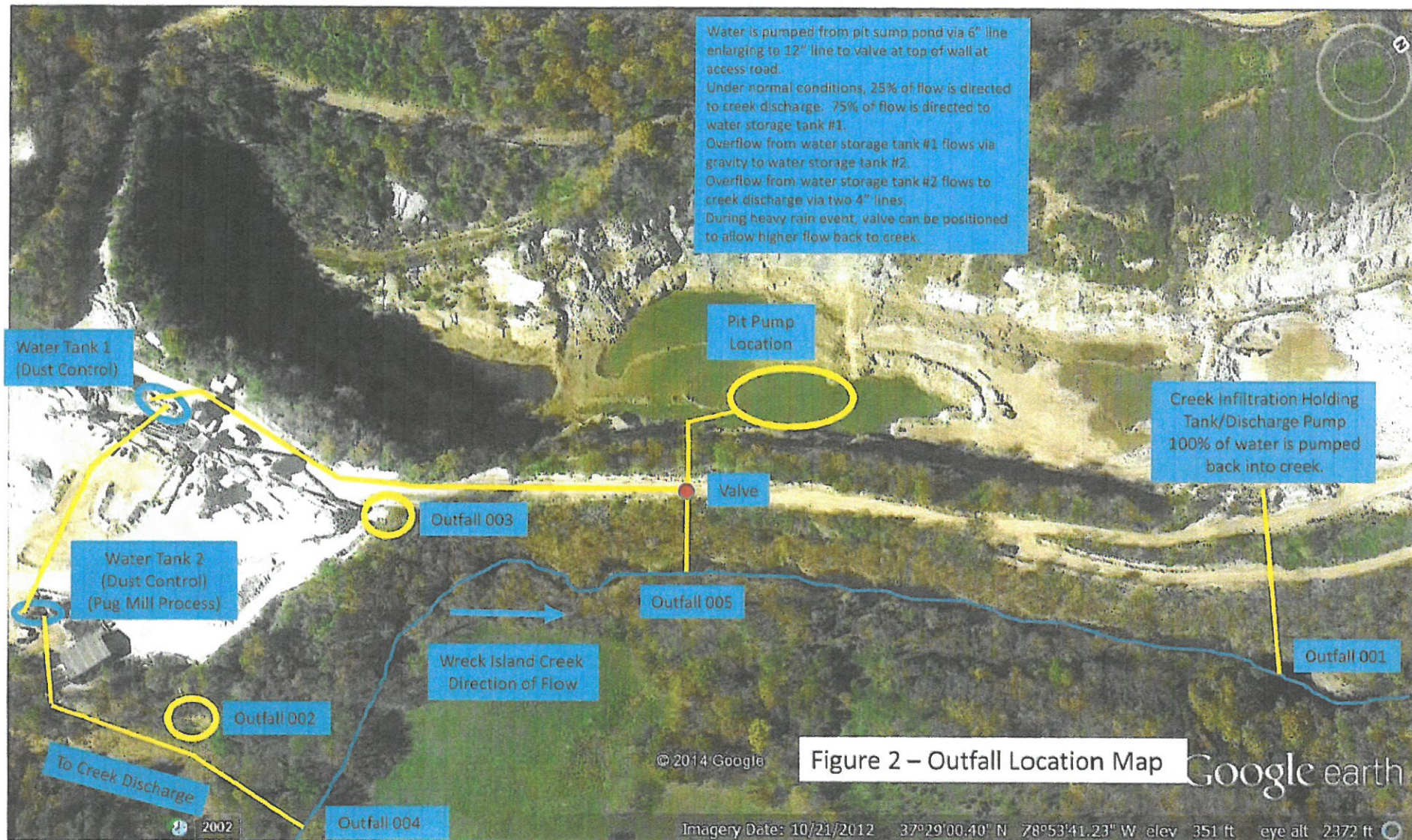
SIGNATURE	<i>[Signature]</i> Complete
UPDATES, AND SIGNATURES FOR THE UPDATES Specify date and reason (e.g. high benchmark, construction/change in design, deficiency identified during routine inspection; etc) for the updates	None
STAFF IDENTIFIED	Complete
POTENTIAL POLLUTANT SOURCE ACTIVITIES	Complete

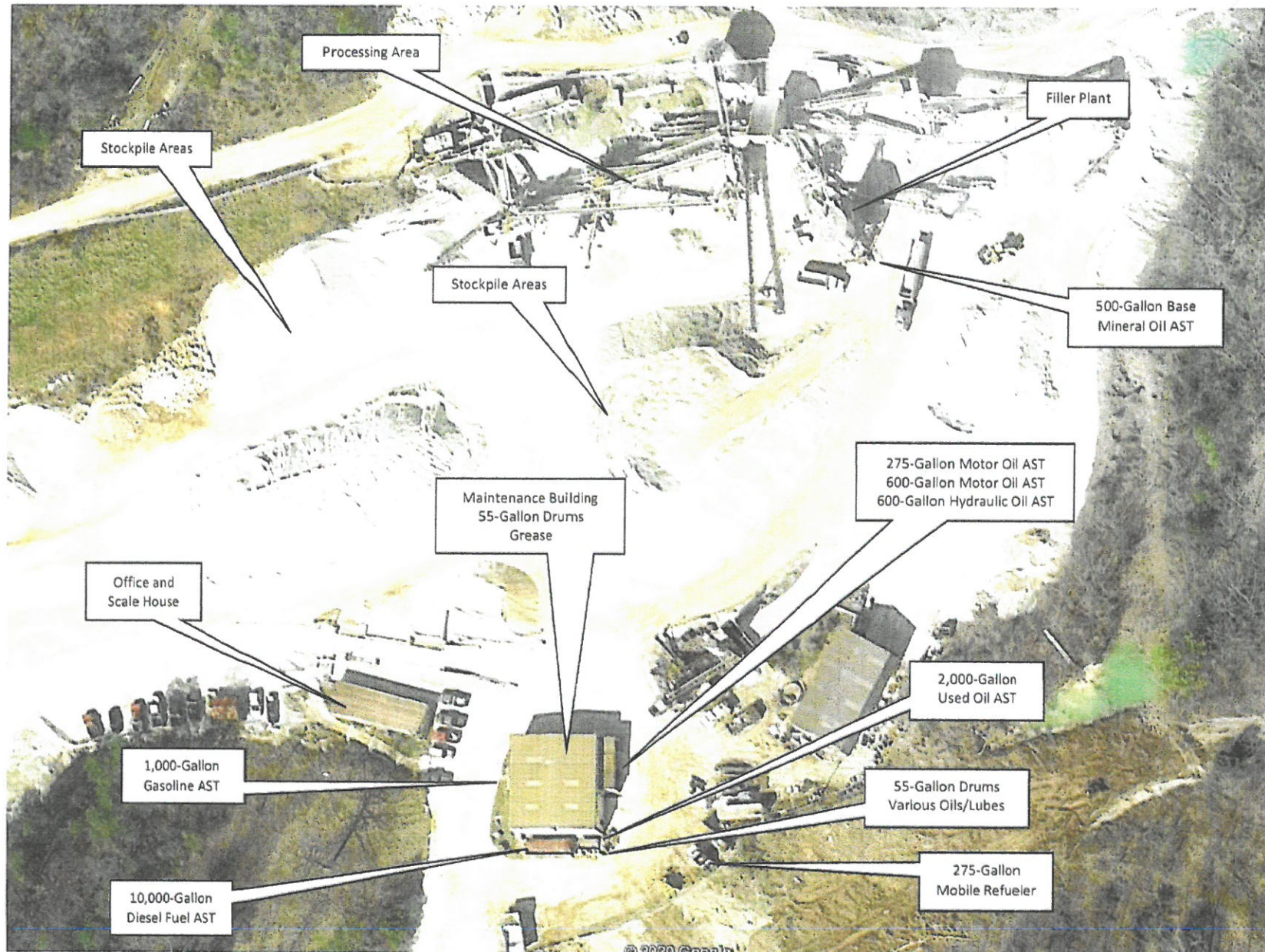
**MAP - OUTLINE OF DRAINAGE AREAS**

<i>See Attached</i>	Drainage Areas	Complete
	Inventory of Exposed Materials	Complete
	Spills & Leaks	Complete
	Risk of Potential Pollutant Sources	Complete
	Storage Areas	Structural Controls
	Measures & Controls	Complete
	<i>Good Housekeeping</i>	Complete
	<i>Preventive Maintenance</i>	Complete
	<i>Spill Prevention</i>	Complete

**STORM WATER CONTROLS**

- Good housekeeping (including sweeping)	- Complete	- Employee Training	- Complete
- Preventive Maintenance	- Complete	Record Keeping	Complete
- Spill Prevention	- Complete	Sediment & Erosion Control	Complete
-	-	Management of Runoff	Complete





**FIGURE 3 – AERIAL FACILITY LAYOUT  
ROCKYDALE – APPOMATTOX QUARRY  
APPOMATTOX, VIRGINIA**

FACILITY NAME: <i>Appomattox Lime</i>	AUDIT YEAR: <i>2023</i>
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**- ROUTINE INSPECTIONS**  
 (Describe Permit Requirement, Including Frequency)  
*Each outfall .001 to 005 will be inspected quarterly*

<b>- (State whether or not each inspection was completed and specify date, or whether the inspection is incomplete, or missing.)</b>	1 <sup>st</sup> Quarter	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quarter
	<i>Complete 3-21-2023</i>	<i>Complete 5-4-2023</i>	<i>Complete 8-22-2023</i>	<i>Complete 11-15-2023</i>
<b>- INSPECTIONS</b>	<i>Quarterly Housekeeping + Facility</i>			<i>→</i>
<b>- ADDITIONAL INSPECTIONS</b>	<i>Weekly + Monthly AST</i>			<i>→</i>

FACILITY NAME: Appomattox Lime		AUDIT YEAR: 2023
<b>COMPREHENSIVE SITE COMPLIANCE EVALUATION</b>		(State whether or not each component is complete, incomplete, or missing.)
Date of evaluation:  01/12/2024	Industrial Materials	Complete 11-14-2023
	Leaks & Spills	Complete 11-14-2023
	Off-site Tracking	Complete - 11-14-2023
	Pollutants Entering Stormwater Conveyance	Complete 11-14-2023
	Pollutants at Outfalls	Complete 11-14-2023
	Review of Training	Complete 7-6-2023
	Unauthorized Discharges Evaluation	Complete 11-14-2023
	Visual & Analytical Monitoring	Complete 11-14-2023
	SWPPP/BMP Modifications resulting from the evaluation	Complete @ 11-14-2023 No modifications
	Report	Complete

FACILITY NAME: Appomattox Lime	AUDIT YEAR: 2023	
MAINTAINING ALL RECORDS	NOTES: (State whether or not each record is complete, incomplete, or missing. List the incomplete and missing records.)	
Corrective Actions	(List Corrective Actions and dates of each Corrective Action) Complete - Sediment traps cleaned New Rip Rap in check dams Cleaned Settling Ponds	
Benchmark Monitoring	Complete	
Proper O & M	(List the effort and the dates of the efforts to maintain proper O&M) Complete - See Attachment	
Quarterly Outfall Examinations	Complete <input checked="" type="checkbox"/> Kept with SWPPP	
SWPPP	Complete	
	Routine Inspections	Complete



	<input checked="" type="checkbox"/> Kept with SWPPP
Comprehensive Site Compliance Evaluations	<p>Complete</p> <p><input checked="" type="checkbox"/> Kept with SWPPP</p>

Name and Title of Person  
Conducting the Audit:

Eric Stone General Manager

Certification:

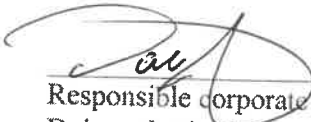
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage 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.

Dallas Satterfield

Printed name of responsible corporate officer or  
Duly authorized representative who signed this document

01/29/2024

Date



Responsible corporate officer or  
Duly authorized representative

01/29/2024

Date