

Attachment A

FACILITY NAME & PERMIT: ROCKYDALE STAUNTON VAG 840030	AUDIT DATE: 1-16-2024	Calendar Year covered by the audit: 2023
BENCHMARK MONITORING (Describe Permit Requirement, Including Frequency)	001 FLOW, PH, TSS - YEARLY 002 FLOW, PH, TSS - QUARTERLY	
Time Period: 1-1-2023 TO 12-31-2023		
DMRs Submitted Late (List Outfalls): <p style="text-align: center;">NONE</p>		
List Outfall(s) For Monitoring Did Not Take Place For This Reporting Period: <p style="text-align: center;">NONE</p>		
When Outfalls Were Monitored, But Not All Parameters Were Quantified, List The Outfall And The Corresponding Parameters That Are Missing:		
NONE		
For all analytical results above the Benchmark value ranges, list the Outfall, parameter and corresponding results:		
NONE		
Have Fuels, lubricants, coolants, hydraulic fluids, or other petroleum products been discharged on the ground or into surface waters ? (YES/NO) NO		
Have process waters been discharged to surface waters? (YES/NO) YES - AUTHORIZED DISCHARGE - MINE PIT DEWATERING		

FACILITY NAME: ROCKYDALE - STAUNTON	AUDIT YEAR: 2023
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QUARTERLY VISUAL OUTFALL EXAMINATIONS				
(State whether or not each examination was completed with the date, or whether it is incomplete, or missing.)				
	1 ST QUARTER	2 ND QUARTER	3 RD QUARTER	4 TH QUARTER
Outfall - 002	COMPLETE 3-29-23	COMPLETE 6-21-23	COMPLETE 8-8-23	COMPLETE 10-20-23
Outfall -				
Outfall -				
Outfall				
Outfall				
Outfall				
Outfall				

FACILITY NAME: ROCKYDALE - STAUNTON.	AUDIT YEAR: 2023
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SWPPP
(State whether or not each item is complete, incomplete, or missing)

SIGNATURE	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	COMPLETE
STAFF IDENTIFIED	COMPLETE
POTENTIAL POLLUTANT SOURCE ACTIVITIES	COMPLETE

MAP - OUTLINE OF DRAINAGE AREAS

	Drainage Areas	COMPLETE
	Inventory of Exposed Materials	COMPLETE
	Spills & Leaks	COMPLETE
	Risk of Potential Pollutant Sources	COMPLETE
	Storage Areas	Structural Controls
	Measures & Controls	COMPLETE
	Good Housekeeping	COMPLETE
	Preventive Maintenance	COMPLETE
	Spill Prevention	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

FACILITY NAME: ROCKYDALE STATION.	AUDIT YEAR: 2023			
<p>- ROUTINE INSPECTIONS (Describe Permit Requirement, Including Frequency)</p> <p style="text-align: center;"> QUARTERLY - HOUSE KEEPING + FACILITY INSPECTIONS QUARTERLY - MATERIAL STORAGE PILES QUARTERLY - MATERIAL HANDLING AREAS </p>				
- (State whether or not each inspection was completed and specify date, or whether the inspection is incomplete, or missing.)	1 st Quarter COMPLETE	2 nd Quarter COMPLETE	3 rd Quarter COMPLETE	4 th Quarter COMPLETE
- INSPECTIONS -	3-23-23	6-12-23	9-12-23	12-15-23
- ADDITIONAL INSPECTIONS -				

FACILITY NAME: ROCKYDALE - STAUNTON		AUDIT YEAR: 2023
COMPREHENSIVE SITE COMPLIANCE EVALUATION		(State whether or not each component is complete, incomplete, or missing.)
Date of evaluation: 8-31-23	Industrial Materials	COMPLETE
	Leaks & Spills	COMPLETE
	Off-site Tracking	COMPLETE
	Pollutants Entering Stormwater Conveyance	COMPLETE
	Pollutants at Outfalls	COMPLETE
	Review of Training	COMPLETE
	Unauthorized Discharges Evaluation	COMPLETE
	Visual & Analytical Monitoring	COMPLETE
	SWPPP/BMP Modifications resulting from the evaluation	COMPLETE
	Report	COMPLETE

FACILITY NAME: <i>ROCKYDALE-STANTON</i>	AUDIT YEAR: <i>2023</i>	
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) <i>COMPLETE</i>	
Benchmark Monitoring	<i>COMPLETE</i>	
Proper O & M	(List the effort and the dates of the efforts to maintain proper O&M) <i>COMPLETE</i>	
Quarterly Outfall Examinations	<i>COMPLETE</i> <input checked="" type="checkbox"/> Kept with SWPPP	
SWPPP	<i>COMPLETE</i>	
	Routine Inspections	<i>COMPLETE</i>

		<input checked="" type="checkbox"/> Kept with SWPPP
Comprehensive Site Compliance Evaluations	<p style="text-align: center;"><i>COMPLETE</i></p> <p><input checked="" type="checkbox"/> Kept with SWPPP</p>	

Name and Title of Person
Conducting the Audit:

JASON VANDERMARK G. M.


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