PERMITTED FACILITY

Rockydale - Flatrock Quarry

2343 Highland Farm Rd NW, Roanoke VA 24017

Reporting Frequency: Quarter

Permit Number: VAG840043

No Discharge:	

Outfall Num: 002

COMMONWEALTH OF VIRGINIA DEPARTMENT OF ENVIRONMENTAL QUALITY

NONMETALLIC MINERAL MINING DISCHARGE MONITORING REPORT (DMR)

	MONITORING PERIOD						
	YEAR	MO	DAY		YEAR	MO	DAY
FROM	2019	10	07	то	2019	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.

Run Date: Jun 26, 2019

	ttoporting i	roquerioy, dut	artor							Truit Da	ie. Jun 20, 20 i
PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO.	FREQUENCY OF	SAMPLE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	EX.	ANALYSIS	TYPE
I 001 FLOW	REPORTD	.034	165	MED	*****	******	******	MAD		1/3/1	Fit
	REQRMNT	NL.	NL.	MGD	*****	*****	******	1 102		1/3M	EST
002 pH ├─	REPORTD	******	******	SOI	8.10	******	8.10	SU		1/3M	Prob
	REQRMNT	******	******	707	6.5	*****	9.5	SU		1/3M	GRAB
004 TSS	REPORTO	******	******	MB/L	******	2./	2.1	MG/L		1/3M	Grab
	REQRMNT	******	******		*****	30	60	MG/L		1/3M	GRAB

Additional Permit Requirements (Outfall 002):

Comments:

PERMIN-LD 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			
Timothy Childres	Twoodly Children	R9841153	2019	12	3/	
TYPED OR PRINTED NAME	SIGNATURE	CERTIFICATE NO.	YEAR	MO.	DAY	
PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE		1		
Timothy Childres	Timothy Children	540-682-3418	2019	12	3/	
TYPED OR PRINTED NAME	SIGNATURE		YEAR	MO.	DAY	