## PERMITTED FACILITY

Appomattox Lime Company

2343 Highland Farm Road NW, Roanoke VA 24017

Permit Number: VAG840046

No Discharge:

# COMMONWEALTH OF VIRGINIA DEPARTMENT OF ENVIRONMENTAL QUALITY

NONMETALLIC MINERAL MINING DISCHARGE MONITORING REPORT (DMR)

	MONITORING PERIOD									
	YEAR	МО	DAY		YEAR	МО	DAY			
FROM	2003	10	1	то	5053	12	3)			

#### **RETURN TO**

Department of Environmental Quality Blue Ridge - Roanoke Regional Office 901 Russell Drive, Salem VA 24153 (540) 562-6700

NOTE: READ PERMIT AND GENERAL INSTRUCTIONS BEFORE COMPLETING THIS FORM AND RETURNING IT.

Outfall Num: 005	Reporting f	requency: Qua	rter							Run D	ate: Jul 25, 2019
PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO.	FREQUENCY OF	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	EX.	ANALYSIS	TYPE
001 FLOW	REPORTD	0.20	0.20	MGD	*****	******	******		0	ilam	EST
	REQRMNT	NL	NL	MGD	*****	*****	******			1/3M	EST
002 pH	REPORTD	*****	*****		8.9	******	80	50	_		
	REQRMNT	******	******		6.0	******	9.0	SU	0	1/3 M 1/3M	GRAB
004 TSS	REPORTD	*****	******	T	*****	7.6	20	mali			
004 133	REQRMNT	******	******		*****	30	60	MG/L	0	1/3 m 1/3M	GRAB

Additional Permit Requirements (Outfall 005):

Comments:

PERMITT	ACILITY
Appomatto,	_ine Company

2343 Highland Farm Road NW, Roanoke VA 24017

Permit Number: VAG840046

# COMMONW TH OF VIRGINIA DEPARTMENT OF ENVIRONMENTAL QUALITY

NONMETALLIC MINERAL MINING DISCHARGE MONITORING REPORT (DMR)

## **RETURN TO**

Department of Environmental Quality
Blue Ridge - Roanoke Regional Office
901 Russell Drive, Salem VA 24153
(540) 562-6700
NOTE: READ PERMIT AND GENERAL INSTRUCTIONS BEFORE
COMPLETING THIS FORM AND RETURNING IT.

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

BYPASS AND OVERFLOWS					
TOTAL OCCURRENCES	TOTAL FLOW(M.G.)	TOTAL BOD5(K.G.)			
$\bigcirc$	0	$\circ$			

IMPRISONMENT FOR KNOWING VIOLATIONS.

OPERATOR IN RESPONSIBLE CHARGE				DATE			
Eric Stone	Pro Stor		2024	1	5		
TYPED OR PRINTED NAME	SIGNATURE	CERTIFICATE NO.	YEAR	MO.	DAY		
PRINCIPAL EXECUTIVE	TELEPHONE						
Eric Stone	Ere St		2024	1	S		
TYPED OR PRINTED NAME	SIGNATURE		YEAR	MO.	DAY		