

WEST VIRGINIA
SECRETARY OF STATE
KEN HECHLER
ADMINISTRATIVE LAW DIVISION

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DEC 9 3 49 PM '97

OFFICE OF WEST VIRGINIA
SECRETARY OF STATE

Form #1

NOTICE OF PUBLIC HEARING ON A PROPOSED RULE

AGENCY: DIVISION ENVIRONMENTAL PROTECTION
OFFICE OF WATER RESOURCES TITLE NUMBER: 47

RULE TYPE: Procedural; CITE AUTHORITY 22-1-3 and 22-11-4(14)

AMENDMENT TO AN EXISTING RULE: YES ___ NO X

IF YES, SERIES NUMBER OF RULE BEING AMENDED: _____

TITLE OF RULE BEING AMENDED: _____

IF NO, SERIES NUMBER OF NEW RULE BEING PROPOSED: 30A

TITLE OF RULE BEING PROPOSED: WV/NPDES Coal and Quarry Mining
Forms

DATE OF PUBLIC HEARING: January 12, 1998 TIME: 6 p.m.

LOCATION OF PUBLIC HEARING: Division Environmental Protection
#10 McJunkin Road
Nitro, WV 25143
Training Room

COMMENTS LIMITED TO: ORAL___, WRITTEN___, BOTH X

COMMENTS MAY ALSO BE MAILED TO THE FOLLOWING ADDRESS: Same as above

Attn: Ken Politan

The Department requests that persons wishing to make comments at the hearing make an effort to submit written comments in order to facilitate the review of these comments.

The issues to be heard shall be limited to the proposed rule.

ATTACH A **BRIEF** SUMMARY OF YOUR PROPOSAL

Ken Politan

Authorized Signature

\$17.80



BUREAU OF ENVIRONMENT
10 McJunkin Road
Nitro, WV 25143-2506

CECIL H. UNDERWOOD
GOVERNOR

JOHN E. CAFFREY
COMMISSIONER

December 9, 1997

Ms. Judy Cooper
Director, Administrative Law Division
Office of the Secretary of State
Capitol Complex
Charleston, West Virginia 25305

RE: 47CSR10A - "WV/NPDES Coal and Quarry Mining Forms"

Dear Ms. Cooper:

This is to advise that I am giving approval to file the above-referenced procedural rule as notice of public hearing on a proposed rule.

Your cooperation in this regard is very much appreciated. If you have any questions or require additional information, please feel free to contact Carrie Chambers at 759-0515.

Sincerely yours,


John E. Caffrey
Commissioner

JEC:cc

Attachment

**BUREAU OF ENVIRONMENT
DIVISION OF ENVIRONMENTAL PROTECTION**

BRIEFING DOCUMENT

Rule Title: 47CSR30A - WV/NPDES Coal and Quarry Mining Forms

- A. AUTHORITY: WV Code §22-11-4(14)**
- B. SUMMARY OF RULE: WV/NPDES Application forms for Activities Involving Coal and Quarry Mining Activities**
- C. STATEMENT OF CIRCUMSTANCES WHICH REQUIRE RULE: To reflect current WV/NPDES rules and to consolidate forms**
- D. FEDERAL COUNTERPART REGULATIONS - INCORPORATION BY REFERENCE/DETERMINATION OF STRINGENCY:**
N/A
- E. CONSTITUTIONAL TAKINGS DETERMINATION:**
N/A
- F. CONSULTATION WITH THE ENVIRONMENTAL PROTECTION ADVISORY COUNCIL:**
N/A

APPENDIX B

FISCAL NOTE FOR PROPOSED RULES

Rule Title: WV/NPDES Coal & Quarry Mining Forms

Type of Rule: Legislative Interpretive X Procedural

Agency WV Division Environmental Protection

Address #10 McJunkin Road

 Nitro, WV 25143

1. Effect of Proposed Rule

| | ANNUAL | | FISCAL YEAR | | |
|-----------------------------|----------|----------|-------------|--------|------------|
| | INCREASE | DECREASE | CURRENT | NEXT | THREKAFTER |
| <u>ESTIMATED TOTAL COST</u> | \$ -0- | \$ -0- | \$ -0- | \$ -0- | \$ -0- |
| PERSONAL SERVICES | | | | | |
| CURRENT EXPENSE | | | | | |
| REPAIRS & ALTERNATIONS | | | | | |
| EQUIPMENT | | | | | |
| OTHER | | | | | |

2. Explanation of above estimates: N/A

3. Objectives of these rules: N/A

Rule Title: WV/NPDES Coal and Quarry Mining Forms

4. Explanation of Overall Economic Impact of Proposed Rule.

A. Economic Impact on State Government.

N/A

B. Economic Impact on Political Subdivisions; Specific Industries; Specific groups of Citizens.

N/A

C. Economic Impact on Citizens/Public at Large.

N/A

Date: December 9, 1997

Signature of Agency Head or Authorized Representative

Ken Politan

**TITLE 47
PROCEDURAL RULES
DIVISION OF ENVIRONMENTAL PROTECTION
OFFICE OF WATER RESOURCES**

**SERIES 30A
WV/NPDES COAL AND QUARRY MINING FORMS**

§47-30A-1. General.

1.1. Scope. -- This rule is for the purpose of filing all forms required by Chapter 22-11-4 of the West Virginia Code.

1.2. Authority. -- 22-1-3 and 22-11-4(14).

1.3. Filing Date. --

1.4. Effective Date. --

§47-30A-2. Forms.

2.1 All current forms and copies of any forms currently used under or required by 22-11 of the West Virginia Code for coal and quarry operations are included with this series.

**(ED NOTE: THESE FORMS ARE ON FILE AND AVAILABLE AT THE
SECRETARY OF STATE'S OFFICE)**

NPDES ISSUANCE/REISSUANCE ADVERTISEMENT
(EACH BLANK MUST BE FILLED IN ACCORDANCE WITH THE MR-34-B INSTRUCTIONS)
ADVERTISEMENT

Notice is hereby given that _____
has submitted an application for the _____ of Article 11 /WVNPDES Permit No. _____
to the Division of Environmental Protection, _____
in order to discharge drainage from a _____ operation in the
_____ seam/mineral bed. The operation will discharge into
_____ of _____
and is located _____ (miles), _____ of _____, in
_____ District of _____ County,
Longitude _____ ° _____ ' _____ " and Latitude _____ ° _____ ' _____ " (Coordinates
from USGS Topographic Map).

Comments on the Article 11/WVNPDES application or requests for a public hearing regarding
the Article 11/NPDES application shall be in writing and if a public hearing is requested shall state the
nature of the issues proposed to be raised in the hearing. Such written comments or requests should be
sent to the Division of Environmental Protection (DEP) at the address above, and must also reference the
Article 11 /WVNPDES permit number shown above. Comments received by _____,
or thirty (30) days from date of publication, will be considered. A copy of the Article 11/WVNPDES
application, draft permit and fact sheet (if required) will be available for inspection and obtaining copies
during normal business hours at the DEP Regional Office located at the address above.

DEP Telephone No. _____ Article 11/NPDES Permit No. _____

LOCATION MAP

Each ad must include a clear and accurate location map of a scale and detail found in the West Virginia General Highway Map. . The map size must be at a minimum four (4) inches by four (4) inches with the following shown on the map:

1. Clearly define the approximate limits of the proposed permit area
2. Longitude and latitude lines must cross at or near the center of the proposed permit area
3. A north arrow must be shown
4. A map scale.
5. District(s).
6. County(s).

**NPDES ISSUANCE OR RE-ISSUANCE APPLICATION
ADVERTISEMENT (MR-34-B) INSTRUCTIONS**

(EACH NUMBERED BLANK MUST BE FILLED IN ACCORDANCE WITH THE MR-34-B INSTRUCTIONS)
ADVERTISEMENT

Notice is hereby given that _____ (1) _____
has submitted an application for the _____ (2) _____ of Article 11 /WVNPDES Permit No. _____ (3) _____
to the Division of Environmental Protection, _____ (4) _____
in order to discharge drainage from a _____ (5) _____ operation in the
_____ (6) _____ seam/mineral bed. The operation will discharge into
_____ (7) _____ of _____ (8) _____
and is located _____ (9) _____ (miles), _____ (10) _____ of _____ (11) _____, in
_____ (12) _____ District of _____ (13) _____ County,
Longitude __ (14) __ ° __ (15) __ ' __ (16) __ " and Latitude __ (17) __ ° __ (18) __ ' __ (19) __ " (Coordinates from
USGS Topographic Map).

Comments on the Article 11/WVNPDES application or requests for a public hearing regarding
the Article 11/NPDES application shall be in writing and if a public hearing is requested shall state the
nature of the issues proposed to be raised in the hearing. Such written comments or requests should be
sent to the Division of Environmental Protection (DEP) at the address above, and must also reference the
Article 11 /WVNPDES permit number shown above. Comments received by _____ (20) _____,
or thirty (30) days from date of publication, will be considered. A copy of the Article 11/WVNPDES
application, draft permit and fact sheet (if required) will be available for inspection and obtaining copies
during normal business hours at the DEP Regional Office located at the address above.

DEP Telephone No. _____ (21) _____ Article 11/NPDES Permit No. _____ (22) _____

LOCATION MAP

Each ad must include a clear and accurate location map of a scale and detail found in the West Virginia General Highway Map. . The map size must be at a minimum four (4) inches by four (4) inches with the following shown on the map:

1. Clearly define the approximate limits of the proposed permit area
2. Longitude and latitude lines must cross at or near the center of the proposed permit area
3. A north arrow must be shown
4. A map scale.
5. District(s).
6. County(s).

**NPDES ISSUANCE OR RE-ISSUANCE APPLICATION
ADVERTISEMENT (MR-34-B) INSTRUCTIONS**

General Instructions

This advertisement form is to be used if you wish to advertise only the issuance or reissuance application for an Article 11/WVNPDES permit. This ad form is to be used for both the Article 3 (coal) and Article 4 (quarry) mining WVNPDES permits when not being jointly advertised.

The ad must be published one time with a thirty day comment period. The ad and proof of notification must be submitted to WVDEP in accordance with the WV/NPDES Rules for Coal Mining Facilities Title 47, Series 30, Section 10.2.c, which states:

“Proof of Publication. The applicant shall be responsible for publication of a legal advertisement in a qualified newspaper of general circulation in the location of the proposed permit area. Before the expiration of the WVNPDES notice period in 10.2.a.2.A of these rules, the applicant shall send the director a copy of the advertisement and proof of publishing along with an affidavit certifying that the notice, and a fact sheet, if required, was sent to all persons listed in Sections 10.2.d.1.A and 10.2.1.B of these rules. A WVNPDES permit may not be issued until such an affidavit is received.”

Each ad must include a location map depicting the proposed permit area before it will be considered complete. Listed below are the instructions for filling in each blank in the MR-34-B ad form and the map requirements. Each map requirement and blank must be addressed, and if completed improperly the applicant may be required to re-advertise.

Filling In The Blank Instructions

The instructions are listed sequentially as the blanks are found in the MR-34-B form.

Blank 1: Applicants name and business street address. This should correspond to the address found in Module 1, Part I of the application.

Blank 2: Issuance / Reissuance. Enter “Issuance” if the application is for the initial issuance of the permit, or enter “Reissuance” if the application is to reissue the permit

Blank 3: WVNPDES Number. This is the number assigned to your issuance application for a new NPDES permit by WVDEP, or your NPDES permit number for a re-issuance application.

Blank 4: WVDEP Regional Office street address. This is the address of the WVDEP regional office where the application can be found for review.

Blank 5: Type of operation/activity covered. Start the description with either the word “coal” or “quarry” depending on the type of mining proposed, followed by the type of operation/activity proposed. Some examples would be: coal surface mining, coal tipple, quarry deep mining, coal refuse pile, quarry processing plant, quarry haulroad or any combination there of.

Blank 6: Seam. List the seam(s) being mined, loaded or processed. If the activity is a haulroad the sentence should be ended at the end of the activities listed in “Blank 4”.

Blank 7: Receiving Stream(s). List the immediate receiving stream(s) that the discharged drainage enter and the succeeding streams down to the major sub basin (Blank 7).

Blank 8: Major Sub Basin. This will be the same name(s) as shown at the beginning of Module 1 for the USGS/SCS Hydrologic Region(s) of the application.

Blank 9: Distance. This is the distance to the nearest post office from the approximate center of the operation.

Blank 10: Direction. This is the compass direction from the operation to the nearest post office.

Blank 11: Nearest Post Office. This should be the same as shown in Module 1, Part II.

Blank 12 & 13: District & County. Enter the district(s) (11) of the county(s), and the county(s) (12) the operation is located in.

Blank 14, 15 & 16: Longitude. Enter the Degrees ° (13), Minutes '(14), and Seconds "(15) at the approximate center of the operation.

Blank 17, 18 & 19: Latitude. Enter the Degrees ° (16), Minutes '(17), and Seconds "(18) at the approximate center of the operation.

Blank 20: End of comment period. Enter the date of the day thirty (30) calendar days after the date the ad ran in the paper.

Blank 21: WVDEP regional office phone No. Enter the Phone number of the WVDEP regional office where the application was submitted.

Blank 22: WVNPDES No. Enter the same number as in "Blank 3" of this ad.

LOCATION MAP

Each ad must include a clear and accurate location map of a scale and detail found in the West Virginia General Highway Map. The map size must be at a minimum four (4) inches by four (4) inches with the following shown on the map:

1. Clearly define the approximate limits of the proposed permit area.
2. Longitude and latitude lines must cross at or near the center of the proposed permit area.
3. A north arrow must be shown.
4. A map scale.
5. District(s).
6. County(s)

NPDES MODIFICATION ADVERTISEMENT
(EACH BLANK MUST BE FILLED IN ACCORDANCE WITH THE MR-34-BM INSTRUCTIONS)
ADVERTISEMENT

Notice is hereby given that _____
has submitted an application for Modification No. _____ to Article 11 /WVNPDES Permit No. _____
_____ to the Division of Environmental Protection, _____
_____ in order to _____. The
operation will discharge into _____ of
_____ and is located _____ (miles), _____ of
_____, in _____ District of
_____ County, Longitude _____° _____' _____" and Latitude
_____° _____' _____" (Coordinates from USGS Topographic Map).

Comments on the Article 11/WVNPDES application or requests for a public hearing regarding the Article 11/NPDES application shall be in writing and if a public hearing is requested shall state the nature of the issues proposed to be raised in the hearing. Such written comments or requests should be sent to the Division of Environmental Protection (DEP) at the address above, and must also reference the Article 11 /WVNPDES permit number shown above. Comments received by _____, or thirty (30) days from date of publication, will be considered. A copy of the Article 11/WVNPDES application, draft permit and fact sheet (if required) will be available for inspection and obtaining copies during normal business hours at the DEP Regional Office located at the address above.

DEP Telephone No. _____ Article 11/NPDES Permit No. _____

LOCATION MAP

Each ad must include a clear and accurate location map of a scale and detail found in the West Virginia General Highway Map. . The map size must be at a minimum four (4) inches by four (4) inches with the following shown on the map:

1. Clearly define the approximate limits of the proposed permit area
2. Longitude and latitude lines must cross at or near the center of the proposed permit area
3. A north arrow must be shown
4. A map scale.
5. District(s).
6. County(s).

**NPDES MODIFICATION APPLICATIONS
ADVERTISEMENT (MR-34-BM) INSTRUCTIONS**

(EACH NUMBERED BLANK MUST BE FILLED IN ACCORDANCE WITH THE MR-34-BM INSTRUCTIONS)
ADVERTISEMENT

Notice is hereby given that _____ (1) _____
has submitted an application for Modification No. __ (2) __ to Article 11 /WVNPDES Permit No.
____ (3) _____ to the Division of Environmental Protection, _____ (4) _____
____ (4) _____ in order to _____ (5) _____. The
operation will discharge into _____ (6) _____ of
_____ (7) _____ and is located ____ (8) ____ (miles), ____ (9) ____ of
_____ (10) _____, in _____ (11) _____ District of
_____ (12) _____ County, Longitude __ (13) ° __ (14) ' __ (15) " and
Latitude __ (16) ° __ (17) ' __ (18) " (Coordinates from USGS Topographic Map).

Comments on the Article 11/WVNPDES application or requests for a public hearing regarding
the Article 11/NPDES application shall be in writing and if a public hearing is requested shall state the
nature of the issues proposed to be raised in the hearing. Such written comments or requests should be
sent to the Division of Environmental Protection (DEP) at the address above, and must also reference the
Article 11 /WVNPDES permit number shown above. Comments received by _____ (19) _____,
or thirty (30) days from date of publication, will be considered. A copy of the Article 11/WVNPDES
application, draft permit and fact sheet (if required) will be available for inspection and obtaining copies
during normal business hours at the DEP Regional Office located at the address above.

DEP Telephone No. _____ (20) _____ Article 11/NPDES Permit No. _____ (21) _____

LOCATION MAP

Each ad must include a clear and accurate location map of a scale and detail found in the West Virginia General Highway Map. . The map size must be at a minimum four (4) inches by four (4) inches with the following shown on the map:

1. Clearly define the approximate limits of the proposed permit area
2. Longitude and latitude lines must cross at or near the center of the proposed permit area
3. A north arrow must be shown
4. A map scale.
5. District(s).
6. County(s).

NPDES MODIFICATION APPLICATIONS ADVERTISEMENT (MR-34-BM) INSTRUCTIONS

General Instructions

This advertisement form is to be used if you wish to advertise only the modification application for an Article 11/WVNPDES permit.

The ad must be published one time with a thirty day comment period. The ad and proof of notification must be submitted to WVDEP in accordance with the WV/NPDES Rules for Coal Mining Facilities Title 47, Series 30, Section 10.2.c, which states:

“Proof of Publication. The applicant shall be responsible for publication of a legal advertisement in a qualified newspaper of general circulation in the location of the proposed permit area. Before the expiration of the WVNPDES notice period in 10.2.a.2.A of these rules, the applicant shall send the director a copy of the advertisement and proof of publishing along with an affidavit certifying that the notice, and a fact sheet, if required, was sent to all persons listed in Sections 10.2.d.1.A and 10.2.1.B of these rules. A WVNPDES permit may not be issued until such an affidavit is received.”

Each ad must include a location map depicting the proposed permit area before it will be considered complete. Listed below are the instructions for filling in each blank in the MR-34-BM ad form and the map requirements. Each map requirement and blank must be addressed, and if completed improperly the applicant may be required to re-advertise.

Filling In The Blank Instructions

The instructions are listed sequentially as the blanks are found in the MR-34-BM form.

Blank 1: Applicants name and business street address. This should correspond to the address found in Module 1, Part I of the application.

Blank 2: Permit Modification No. This is the modification number of the NPDES permit. The modification number is derived by counting the number of modification that have been submitted to WVDEP since the “ORIGINAL” issuance of the NPDES permit. Some of the modification numbers have gotten out of sequence on the older permits so if you are not sure what the next modification number is then check with the regional office to make sure.

Blank 3: WVNPDES Number. This is the number on the face of your NPDES permit that was assigned to your issued NPDES permit by WVDEP.

Blank 4: WVDEP Regional Office street address. This is the address of the WVDEP regional office where the application can be found for review.

Blank 5: Type of modification being requested. Some examples would be: add a deep mine in the Gilbert seam and two additional outlets, add a tipple, add an outlet, add six outlets, etc.

Blank 6: Receiving Stream(s). List the immediate receiving stream(s) that the discharged drainage enter and the succeeding streams down to the major sub basin (Blank 7).

Blank 7: Major Sub Basin. This will be the same name(s) as shown at the beginning of Module 1 for the USGS/SCS Hydrologic Region(s) of the application.

Blank 8: Distance. This is the distance to the nearest post office from the approximate center of the operation.

Blank 9: Direction. This is the compass direction from the operation to the nearest post office.

Blank 10: Nearest Post Office. This should be the same as shown in Module 1, Part II.

Blank 11 & 12: District & County. Enter the district(s) (11) of the county(s), and the county(s) (12) the operation is located in.

Blank 13, 14 & 15: Longitude. Enter the Degrees ° (13), Minutes ‘ (14), and Seconds “ (15) at the approximate center of the operation.

Blank 16, 17 & 18: Latitude. Enter the Degrees ° (16), Minutes ‘ (17), and Seconds “ (18) at the approximate center of the operation.

Blank 19: End of comment period. Enter the date of the day thirty (30) calendar days after the date the ad ran in the paper.

Blank 20: WVDEP regional office phone No. Enter the Phone number of the WVDEP regional office where the application was submitted.

Blank 21: WVNPDES No. Enter the same number as in “Blank 3” of this ad.

LOCATION MAP

Each ad must include a clear and accurate location map of a scale and detail found in the West Virginia General Highway Map. The map size must be at a minimum four (4) inches by four (4) inches with the following shown on the map:

1. Clearly define the approximate limits of the proposed permit area.
2. Longitude and latitude lines must cross at or near the center of the proposed permit area.
3. A north arrow must be shown.
4. A map scale.
5. District(s).
6. County(s)

**NPDES ISSUANCE/REISSUANCE WITH 401 STATE CERTIFICATION
ADVERTISEMENT**

(EACH BLANK MUST BE FILLED IN ACCORDANCE WITH THE MR-34-BC INSTRUCTIONS)

ADVERTISEMENT

Notice is hereby given that _____
has submitted an application for the issuance of Article 11 /WVNPDES Permit No. _____
and a request for State Certification as required by Section 401 of the Clean Water Act to the Division of
Environmental Protection, _____
in order to discharge drainage from a _____ operation
in the _____ seam/mineral bed. This activity is authorized by the U. S. Army
Corps of Engineers General Permit No. _____, which covers _____
_____. The operation will discharge into
_____ of _____ and is located
_____ (miles), _____ of _____, in
_____ District of _____
County, Longitude _____ ° _____ ' _____ " and Latitude _____ ° _____ ' _____ "
(Coordinates from USGS Topographic Map).

Pursuant to Section 401 of the Federal Clean Water Act, the State has certified with conditions, that the above described activity will comply with Sections 301, 302, 303, 306 and 307 of the Federal Clean Water Act and other appropriate requirements of State Law. When issuing certification, the WVDEP considered the impact on water resources, fish and wildlife, recreation, critical habitats, wetlands and other natural resources under its jurisdiction from the category of activities authorized by the general permit and has conditioned its certification by requiring this notice among other conditions. Any person adversely affected or aggrieved by the Division's certification authorizing this activity may request a hearing appealing to the Division's certification within fifteen (15) calendar days after the publication of this notice pursuant to Title 47, Series 5A procedural rules. Such requests for a hearing shall identify the requesting party's interest and the manner in which the interest is aggrieved or adversely affected. Such requests shall be sent to the WVDEP at the above address.

Comments on the Article 11/WVNPDES application or requests for a public hearing regarding the Article 11/NPDES application shall be in writing and if a public hearing is requested shall state the nature of the issues proposed to be raised in the hearing. Such written comments or requests should be sent to the Division of Environmental Protection (DEP) at the address above, and must also reference the Article 11 /WVNPDES permit number shown above. Comments received by _____, or thirty (30) days from date of publication, will be considered. A copy of the Article 11/WVNPDES

application, draft permit and fact sheet (if required) will be available for inspection and obtaining copies during normal business hours at the DEP Regional Office located at the address above.

DEP Telephone No. _____

Article 11/NPDES Permit No. _____

LOCATION MAP

Each ad must include a clear and accurate location map of a scale and detail found in the West Virginia General Highway Map. . The map size must be at a minimum four (4) inches by four (4) inches with the following shown on the map:

1. Clearly define the approximate limits of the proposed permit area
2. Longitude and latitude lines must cross at or near the center of the proposed permit area
3. A north arrow must be shown
4. A map scale.
5. District(s).
6. County(s).

**NPDES ISSUANCE/REISSUANCE WITH 401 STATE CERTIFICATION
ADVERTISEMENT (MR-34-BC) INSTRUCTIONS**

(EACH NUMBERED BLANK MUST BE FILLED IN ACCORDANCE WITH THE MR-34-BC INSTRUCTIONS)
ADVERTISEMENT

Notice is hereby given that _____ (1) _____
has submitted an application for the issuance of Article 11 /WVNPDES Permit No. _____ (2) _____
and a request for State Certification as required by Section 401 of the Clean Water Act to the Division of
Environmental Protection, _____ (3) _____
in order to discharge drainage from a _____ (4) _____ operation
in the _____ (5) _____ seam/mineral bed. This activity is authorized by the U. S. Army Corps of
Engineers General Permit No. _____ (6) _____, which covers _____ (7) _____
_____ (7) _____. The operation will discharge into
_____ (8) _____ of _____ (9) _____ and is located
_____ (10) _____ (miles), _____ (11) _____ of _____ (12) _____, in
_____ (13) _____ District of _____ (14) _____ County,
Longitude _____ (15) _____ ° _____ (16) _____ ' _____ (17) _____ " and Latitude _____ (18) _____ ° _____ (19) _____ ' _____ (20) _____ " (Coordinates from
USGS Topographic Map).

Pursuant to Section 401 of the Federal Clean Water Act, the State has certified with conditions, that the above described activity will comply with Sections 301, 302, 303, 306 and 307 of the Federal Clean Water Act and other appropriate requirements of State Law. When issuing certification, the WVDEP considered the impact on water resources, fish and wildlife, recreation, critical habitats, wetlands and other natural resources under its jurisdiction from the category of activities authorized by the general permit and has conditioned its certification by requiring this notice among other conditions. Any person adversely affected or aggrieved by the Division's certification authorizing this activity may request a hearing appealing to the Division's certification within fifteen (15) calendar days after the publication of this notice pursuant to Title 47, Series 5A procedural rules. Such requests for a hearing shall identify the requesting party's interest and the manner in which the interest is aggrieved or adversely affected. Such requests shall be sent to the WVDEP at the above address.

Comments on the Article 11/WVNPDES application or requests for a public hearing regarding the Article 11/NPDES application shall be in writing and if a public hearing is requested shall state the nature of the issues proposed to be raised in the hearing. Such written comments or requests should be sent to the Division of Environmental Protection (DEP) at the address above, and must also reference the Article 11 /WVNPDES permit number shown above. Comments received by _____ (21) _____, or thirty (30) days from date of publication, will be considered. A copy of the Article 11/WVNPDES

application, draft permit and fact sheet (if required) will be available for inspection and obtaining copies during normal business hours at the DEP Regional Office located at the address above.

DEP Telephone No. _____(22)_____

Article 11/NPDES Permit No. _____(23)_____

LOCATION MAP

Each ad must include a clear and accurate location map of a scale and detail found in the West Virginia General Highway Map. . The map size must be at a minimum four (4) inches by four (4) inches with the following shown on the map:

1. Clearly define the approximate limits of the proposed permit area
2. Longitude and latitude lines must cross at or near the center of the proposed permit area
3. A north arrow must be shown
4. A map scale.
5. District(s).
6. County(s).

**NPDES ISSUANCE/REISSUANCE WITH 401 STATE CERTIFICATION
ADVERTISEMENT (MR-34-BC) INSTRUCTIONS****General Instructions**

This advertisement form is to be used if you wish to advertise only the issuance or reissuance application for an Article 11/WVNPDES permit with the 401 State Certification.

The ad must be published one time with a thirty (30) calendar day comment period for the NPDES application and a fifteen (15) calendar day comment period for the 401 State Certification. The ad and proof of notification must be submitted to WVDEP in accordance with the WV/NPDES Rules for Coal Mining Facilities Title 47, Series 30, Section 10.2.c, which states:

“Proof of Publication. The applicant shall be responsible for publication of a legal advertisement in a qualified newspaper of general circulation in the location of the proposed permit area. Before the expiration of the WVNPDES notice period in 10.2.a.2.A of these rules, the applicant shall send the director a copy of the advertisement and proof of publishing along with an affidavit certifying that the notice, and a fact sheet, if required, was sent to all persons listed in Sections 10.2.d.1.A and 10.2.1.B of these rules. A WVNPDES permit may not be issued until such an affidavit is received.”

Each ad must include a location map depicting the proposed permit area before it will be considered complete. Listed below are the instructions for filling in each blank in the MR-34-BC ad form and the map requirements. Each map requirement and blank must be addressed, and if completed improperly the applicant may be required to re-advertise.

Filling In The Blank Instructions

The instructions are listed sequentially as the blanks are found in the MR-34-BC form.

Blank 1: Applicants name and business street address. This should correspond to the address found in Module 1, Part I of the application.

Blank 2: WVNPDES Number. This is the number assigned to your issuance application for a new NPDES permit by WVDEP, or your NPDES permit number for a re-issuance application.

Blank 3: WVDEP Regional Office street address. This is the address of the WVDEP regional office where the application can be found for review.

Blank 4: Type of industrial activity covered. Some examples would be: surface mine, tippel, deep mine, refuse pile, preparation plant, haulroad or any combination there of.

Blank 5: Seam. List the seam(s) being mined, loaded or processed. If the activity is a haulroad the sentence should be ended at the end of the activities listed in “Blank 4”.

Blank 6: States General Permit No. from the Corps. Enter the General Permit No. The U. S. Army Corps of Engineers gave the State that covers this type of application.

Blank 7: General Description of the General Permit. Provide the description of your General Permit authorization as stated in the Corps of Engineers regulations, 33 CFR 330.5.)

Blank 8: Receiving Stream(s). List the immediate receiving stream(s) that the discharged drainage enter and the succeeding streams down to the major sub basin (Blank 9).

Blank 9: Major Sub Basin. This will be the same name(s) as shown at the beginning of Module 1 for the USGS/SCS Hydrologic Region(s) of the application.

Blank 10: Distance. This is the distance to the nearest post office from the approximate center of the operation.

Blank 11: Direction. This is the compass direction from the operation to the nearest post office.

Blank 12: Nearest Post Office. This should be the same as shown in Module 1, Part II.

Blank 13 & 14: District & County. Enter the district(s) (13) of the county(s), and the county(s) (14) the operation is located in.

Blank 15, 16 & 17: Longitude. Enter the Degrees ° (15), Minutes '(16), and Seconds "(17) at the approximate center of the operation.

Blank 18, 19 & 20: Latitude. Enter the Degrees ° (18), Minutes '(19), and Seconds "(20) at the approximate center of the operation.

Blank 21: End of comment period. Enter the date of the day thirty (30) calendar days after the date the ad ran in the paper.

Blank 22: WVDEP regional offices phone No. Enter the Phone number of the WVDEP regional office where the application was submitted.

Blank 23: WVNPDES No. Enter the same number as in "Blank 2" of this ad.

LOCATION MAP

Each ad must include a clear and accurate location map of a scale and detail found in the West Virginia General Highway Map. The map size must be at a minimum four (4) inches by four (4) inches with the following shown on the map:

1. Clearly define the approximate limits of the proposed permit area.
2. Longitude and latitude lines must cross at or near the center of the proposed permit area.
3. A north arrow must be shown.
4. A map scale.
5. District(s).
6. County(s)



DIVISION OF ENVIRONMENTAL PROTECTION

CECIL H. UNDERWOOD
GOVERNOR

10 McJunkin Road
Nitro, WV 25143-2506

JOHN E. CAFFREY
DIRECTOR

NPDES/ARTICLE 11 WATER POLLUTION CONTROL PERMIT
MR-5 APPLICATION, GENERAL INSTRUCTIONS

(Revised 12/97)

1. The application consists of thirteen (13) modules and a copy of the instructions. These modules are:

- Module 1 - General Information
Module 2 - Monitoring Information
Module 3 - Adjacent Surface and Ground Water
Module 4 - Mineral Information
Module 5 - Barrier Information
Module 6 - Preparation, Stockpiling, Handling and Disposal
Module 7 - Effluent Treatment
Module 8 - Abandonment Plan
Module 9 - Sewage Material Disposal Facility
Module 10 - Underground Disposal
Module 11 - Modification
Module 12 - Transfer Modification
Module 13 - Remining
Module 14 - Groundwater Protection Plan (GPP)

2. Include all modules shown in Column 2 for each activity in Column 1 for which the application is requesting coverage.

Table with 2 columns: COLUMN 1 (Application Activity) and COLUMN 2 (Required Modules). Rows include ALL NEW APPLICATIONS, MODIFICATIONS, TRANSFER MODIFICATIONS, and ALL REISSUANCES with corresponding module numbers.

3. You must submit the following number of copies of the application to the appropriate WVDEP regional office for review, depending on the size of the facility or the type of application:

- Not a major facility and an NPDES only application ----- 1 original and 3 copies
Major facility and a NPDES only application ----- 1 original and 4 copies
All joint Article 3 or 4 / NPDES applications ----- 1 original and 5 copies

ALL WATER QUALITY ANALYSIS MUST BE PERFORMED IN ACCORDANCE WITH EPA TESTING PROCEDURES, 40 CFR, PART 136 AND METALS, ACIDITY AND ALKALINITY MUST BE REPORTED IN TOTAL CONCENTRATIONS.

THE APPLICANT MUST SUBMIT A JOINT ARTICLE 3 or 4 / NPDES PERMIT APPLICATION BEFORE THEY CAN REFERENCE ANY MATERIALS AS BEING FOUND IN THE ARTICLE 3 or 4 APPLICATION. ALL MATERIALS REFERENCED MUST BE IN THE JOINT ARTICLE 3 or 4/NPDES APPLICATION, NOT IN PREVIOUSLY SUBMITTED APPLICATIONS

MR-5 INSTRUCTIONS MODULE 1

THE APPLICANT MUST SUBMIT A JOINT ARTICLE 3 or 4 / NPDES PERMIT APPLICATION BEFORE THEY CAN REFERENCE ANY MATERIALS AS BEING FOUND IN THE ARTICLE 3 or 4 APPLICATION. ALL MATERIALS REFERENCED MUST BE IN THE JOINT ARTICLE 3 or 4/NPDES APPLICATION SUBMITTED, NOT IN PREVIOUSLY SUBMITTED APPLICATIONS

Module 1: General Information

This Module is to be completed and submitted with all applications for new permits or reissuance of permits. Excerpts from this module may be required to be addressed in modifications or transfers also if they are effected by those applications.

Heading Information

Box 1 Enter WVDEP regional office number.

Box 2 Enter initial date the application is submitted and the dates of each successive submission with corrections.

Application Type, Fees & Hydrologic Region

Row 1: Mark an "X" in all boxes that describe what is requested with this application. Include the Reissuance number and the transfers number if applicable. These numbers represent how many times the NPDES permit has been reissued or transferred since it was originally issued.

Row 2: Provide the "Required reissuance filling date" in the space provided (this is 120 calendar days prior to the expiration date found on page one of the latest issuance of the permit), or mark "NA" if the app. is for a new permit.

Row 3: This row is used to show the required fees for NPDES permits that cover facilities requiring Article 3 permits. If this is an application for a new permit or untimely reissuance (not received in the WVDEP regional office 120 or more calendar days before the expiration date) mark the \$500.00 box. If it is a timely reissuance app. mark the \$100.00 box.

Row 4: This row is used to show the required fees for NPDES permits that cover facilities that do not require Article 3 permits. Provide the last date the annual NPDES fees were paid in the first space provided (if this is an application for a new permit enter "N/A"). Provide the calculated application fee required for this application and include the fee schedule worksheet at the end of this module.

Only certified or cashier checks, and money orders made payable to "West Virginia Division of Environmental Protection" will be accepted for the filing fees required. If the FULL amount of the filing fee required is not submitted upon receipt of the application it will not be logged in or reviewed until the full fee payment is made.

Row 5: This row is used to show the hydrologic region of the facility used by the "WV Watershed Management Project". In the first blank enter the eight (8) digit code, and in the second enter the name of the "Hydrologic Region". These "WV Watershed Management Project" codes and names are available at WVDEP regional offices.

Part I: Applicant Owner (Operator) Information

A. The applicant shall be the entity that owns the Article 3 or 4 permit(s) or other operations to be covered by this application. This is the name the permit will be issued to. Fill in the Applicant's (owner's) information in the spaces provided (*if Mailing Address is P.O. address include Street Address also*).

B. Mark an "X" in the box that describes the type of ownership of the APPLICANT.

PART II: Facility Information

A. Enter the name of the mine(s) or complex.

Enter the mailing address as in Part I-A (if the address is the same as in Part I-A just enter "SEE PART I-A").

Enter all counties in which the facility is located.

Enter the nearest post office based on straight-line distance from the center of the surface disturbance.

On the two lines under "Physical Location" enter a description of how to get to the facility and where it is located. Start at the nearest town (*must be found on the county road map or USGS topographic map*) to the access road entrance, then use the route number(s) from the nearest town with a compass direction and distance until the entrance to the facilities access road is reached. In addition state the name of the hollow, stream or mountain on which the facility is located. If the permit covers a complex of several mines/sites then the directions should be to the main field office for the complex. (Example: From Ciro, Rt.4 S. 1.2 miles to Rt. 4/20 E. 5 miles to access rd. The site is located up Bowyer Creek on Trace Ridge)

PART II: Facility Information (continued)

Facility Contact must be an employee of the applicant, and must be thoroughly familiar with the operation of the facility, such as chief engineer, plant manager, superintendent, etc., but not a consultant. Include the title and phone number of the Facility Contact also.

B. Mark an "X" in the box that describes the type of facility the permit is covering. If both types of sources exist mark both and include an explanation labeled as "Attachment I-II-B".

C. In the first column (Permitting Action Requested) mark an "X" in the box that describes the type of application being processed. In the second column (Operations Covered) enter every type of operation this application is covering. Break down the operations into types and enter in the appropriate sub-column as follows:

"Operate" Enter all types of active operations that apply.

"Remine" Enter the type of abandoned operation(s) under the CWA Sec. 301(p) that apply.

"Abandon" Enter the type of operation(s) that have been abandoned and/or you request to abandon with this application.

D. Mark an "X" in the all the boxes that describe the type of activities that will be conducted on any of the operations listed in Part "C".

Part III: Reissuance of Existing Permits

A. If this is an application for a new NPDES permit mark an "X" in the "N/A" box. If this is a reissuance application include a history of all changes to the permit that have been submitted to WVDEP since it was last reissued (or originally issued). Be sure to include any changes to the permit requested in this application and to label it as "Attachment 1-III-A".

Use the following format:

| <u>PERMIT HISTORY</u> | | ATTACHMENT 1-III-A |
|-------------------------------------------------------------------------------------------------------------|--------------------|--------------------|
| Modification # 1 | Approved: 10/23/94 | |
| Add U-3046-92 with bathhouse; Add outlets 008,009, 101 | | |
| Modification # 2 | Withdrawn: 1/15/95 | |
| Abandon U-3046-92; delete outlets 009,101; move outlet 008; Add use of ammonia and pH to 10.5 at outlet 005 | | |
| Modification # 3 | Approved: 10/23/94 | |
| Abandon U-3046-92; delete outlets 009,101; move outlet 008 | | |
| Transfer # 1 | Approved: 10/23/94 | |
| From: Little Coal Co. To: Big Coal Co. | | |
| <u>CHANGES REQUESTED WITH THIS APPLICATION</u> | | |
| Modification # 4, Transfer # 2 | Pending | |
| From: Big Coal Co. To: Bigger Coal Co.; Post mining limits for 001 - 005; delete 006, 007 | | |

Part IV: SIC Code

A. Mark all codes that apply to the operation(s) at the facility.

PART V: Environmental Permits

A. Enter the permit/ID number, date of issuance and expiration date of all environmental permits required for the operation of this facility in the table provided. Address all of the preprinted permits at a minimum by entering complete data or entering "N/A" in the "Permit or ID Number" column.

If the applicant is accepting responsibility for some (or all) of the discharge from any operations (a) not owned by the applicant, or (b) not fully covered by this application, then enter the appropriate identification number followed by "/R" and the dates. (Example: S-40021-94/R, Q-1024-86/R, Quincy Siding /R) Likewise if someone else is accepting responsibility for some of the discharge from operations of the applicant that are covered by this application, then enter that NPDES permit number followed by "/R" (Example: WV1010345/R) and the dates. If either of these situations exist a "Module 1R" signed by the party responsible for the final outlet must be included with the application.

Part VI: Map (Exhibit 1-VI-A)

A. Submit a topographic map, labeled "Exhibit A", with a minimum contour accuracy of that shown on the latest available 7.5 min. quadrangle maps published by the U. S. Geologic Survey. The "Proposal", "Drainage" or "Subsidence Survey" map submitted for the Article 3 permit application may be used to show this information, but only if it is submitted in a joint application and is of sufficient scale to clearly show all the NPDES and Article 3 requirements. If the size of the operation requires multiple maps be submitted, label the maps as 1 of 3, 2 of 3 etc. and use match lines. The map must show all manmade structures and be of a reasonable scale that can clearly shows the requirements outlined below.

Part VI: Map (Exhibit 1-VI-A) (continued)

1. Clearly show the individual boundary limits of every operation to be covered, and adjacent operations. Label each with their Article 3 or 4 permit number. Color operational areas using the color code shown in "A-8" below.
2. Show all physical (*sediment control*), chemical, sewage, biological and passive treatment systems that treat discharge from this facility. If any flow/discharge from this facility is treated and/or discharged through an outlet of another facility then show that outlet on the map and include the NPDES Permit number also. Label each treatment system to correspond to the construction plans and the "Exhibit 2-II-A" flow chart.
3. Show all intake points, outlets (discharge points), and all internal, ground water or in-stream monitoring points. Label each with the appropriate symbol in orange and numbered accordingly (if an outlet is permitted under a different facility include NPDES permit number):

- (a) Intakes (water supplies) - use "I" followed by a two digit number EX: "I05"
- (b) Normal Outlets or Monitoring points - use a three digit number from 001 to 099
- (c) Sewage Outlets or Monitoring Points - use a three digit number from 100 to 199
- (d) Underground Injection Outlets or Monitoring Points - use a three digit number from 200 to 299
- (e) Passive Treatment Outlets or Monitoring Points - use a three digit number from 300 to 399
- (f) Ground Water Monitoring Points - use "G" followed by a two digit number EX: "G05"
- (g) In-stream Monitoring Points - use a "U" for upstream or a "D" for downstream followed by the stream's initials (if it is an unnamed tributary of a stream the first initial is to be a "U"), and then a number if needed for multiple points on the same stream. EXAMPLE: The most upstream point on Clear Creek may be "UCC1"; a downstream point on an unnamed tributary of Clear Creek may be "DUCC2".

4. Label and show all streams, creeks, rivers, lakes or other surface bodies of water within the boundary of the facility and 1,000 ft. beyond.
5. Show all seeps, springs or other ground water discharge points (natural or man made).
6. Show all types of water wells (drinking, domestic use, ground water monitoring), and any type of production, injection or abandoned commercial wells.
7. Delineate all wellhead protection areas.
8. Delineate all wetlands known to the applicant.
9. Include a legend with the map using the following symbols and/or color codes, as well as those symbols used by the USGS on their 7.5 Min. quadrangle maps (If this is to be a GPP map also, then insure all GPP symbols are also shown):

| <u>ITEM ON MAP</u> | <u>SYMBOL</u> | <u>COLOR CODE</u> |
|-----------------------------|--------------------------------------------------|----------------------------|
| Outlet | Δ 002 | Solid ORANGE triangle |
| Instream Monitoring Points | ⊗ DUCC2 | Solid ORANGE circle with X |
| Internal Monitoring Point | Δ 003 | Empty BLACK triangle |
| Intake (Water Supply) Point | II I05 | Empty BLACK box |
| Wetlands | (Dotted line around USGS Marsh or Swamp Symbol) | |
| Proposed or Disturbed Areas | | YELLOW |
| Regraded & Seeded Areas | | GREEN |
| Drainage Structures | | BLUE |
| Adjacent Operations | | PURPLE |

10. Delineate all wetlands known by the applicant to exist prior to any disturbance by the applicant.
11. Provide a title block for each map or supplemental map that is to be used to show the requirements for the "Exhibit 1-VI-A" map to include:
 - (a) The title "EXHIBIT A" if using supplemental maps, title as "Exhibit 1-VI-A, Map 1 of 3 (or 2 of 3, etc.)". If "EXHIBIT 1-VI-A" map is also GPP Map, Drainage Map, or Proposal Map insure all titles are shown.
 - (b) The facility name (to match what was used in Module 1, Part II, Sec. A),
 - (c) The applicant's name,
 - (d) The counties and districts the facility is located in,
 - (e) The map scale,
 - (f) The NPDES permit No.,
 - (g) The Article 3 or 4 permit Number(s) covered by the NPDES No.
 - (h) The date the map was completed
 - (i) Type of NPDES application with number (EXAMPLES: "PROPOSED NEW NPDES PERMIT", "NPDES REISSUANCE # 2" or "NPDES MODIFICATION # 3").

Part VI: Map (Exhibit 1-VI-A) (continued)

- 12. Provide a location map with the same details and scale as that of the 1 inch to 1 mile scale DOH county road map. It must be a minimum of 4 inches by 4 inches in size and show:
 - (a) The location of the facility,
 - (b) The center of the facility depicted by latitude and longitude lines crossing at the center with the coordinates on those lines.
- 13. Provide a North arrow on the map for orientation along with the general strike and dip of the regional strata.
- 14. If this map is to be the Groundwater Protection Map locate all items shown in "Table 14-I-A" on the map and label them by their ID# shown in that table.

PART VII: Transfers and additional Responsibilities

- A. This part addresses discharging through another facility, accepting discharge from another facility or transferring the responsibility of the "Ground Water Protection Plan" with this application.
 - 1. If proposing to either (a) have flow effected by this facility discharged through a different facility (NPDES permit) or (b) have flow effected by a different facility discharged through this facility (NPDES permit) then include a signed and notarized "Module 1R"(Responsibility for Discharge from Others). If a "Module 1R" has been previously submitted (and the conditions have not changed) then it is not required to resubmit another one. A copy of "Module 1R" with original signatures must be submitted in each of the NPDES permits that are effected by it.
 - 2. If this application is transferring the ownership of the NPDES permit the responsibility for the "Ground Water Protection Plan" must be addressed. If the responsibility is changing include a "MR-5GT" transfer form with the application.

PART VIII: Applicant Certification

A. The application must be certified in accordance with title 47, Series 30, Section 4.7.1 of the WV NPDES regulations, and the signature must be dated and notarized. If the application is corrected or changed after initial submission it must include an updated certification when resubmitted for review. Authorized signatures for each type of applicant ownership include:

| <u>OWNERSHIP TYPE</u> | <u>AUTHORIZED SIGNATURES</u> |
|-----------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Corporation | President, Secretary, Treasurer, Vice-President, or any other person performing similar policy or decision-making functions for the corporation, or Manager of facilities employing more than 250 persons or have gross annual sales or expenditures exceeding \$25,000,000 (in 2nd Qrt. 1980 dollars), if authority to sign documents has been granted to the manager by the corporation. |
| Partnership | General Partner |
| Sole Proprietorship | Proprietor |

For signatures other than principle officers, partners, or sole proprietors appropriate documentation granting or verifying such signatory authority must be included with the application.

MR-5 INSTRUCTIONS MODULE 1R

THE APPLICANT MUST SUBMIT A JOINT ARTICLE 3 or 4 / NPDES PERMIT APPLICATION BEFORE THEY CAN REFERENCE ANY MATERIALS AS BEING FOUND IN THE ARTICLE 3 or 4 APPLICATION. ALL MATERIALS REFERENCED MUST BE IN THE JOINT ARTICLE 3 or 4/NPDES APPLICATION SUBMITTED, NOT IN PREVIOUSLY SUBMITTED APPLICATIONS

Module 1R: Responsibility for Discharge From Others

This Module is to be used to show the responsibility for (1) flows from the applicant's facility that are not discharged through the applicants NPDES outlets, or (2) a NPDES permit holder that allows flows from operations other than those owned and/or operated by them, to be discharged through their permitted NPDES outlets.

If there is a change in ownership of a NPDES permit by either the "Responsible Party" or the party contributing flow an updated "Module 1R" must be submitted to reflect the changes.

NPDES PERMIT # BOX

If a "Module 1R" is required each NPDES permit that it pertains to must have a copy of the module as part of the file. Use the NPDES permit number for which the "Module 1R" is being submitted.

Heading Information

Box 1 Enter WVDEP regional office number.

Box 2 Enter initial date the application is submitted and the dates of each successive submission with corrections.

Part I: Responsible Party Information

A. The information required here is for the party that has the NPDES permitted outlet through which the effected flow discharges to the waters of the state. Fill in the information for the "Responsible Party" in the spaces provided (if "Mailing Address" is a P.O. address include "Street Address" also).

B. The contact person must be an employee of the "Responsible Party", and must be thoroughly familiar with the operation of the facility, such as chief engineer, plant manager, superintendent, etc. Their title and phone number must also be shown.

Part II: Associated Permits

A. Show the name of the entity and their operations (Permits) that contribute flow to the Responsible Party's NPDES permitted outlet(s). Use a separate row to show each different contributing entity and their operations. Show both the NPDES permit number and the outlet number(s) of the "Responsible Party" for each contributing party.

Part III: Certification of Responsible Party

A. The "Module 1R" must be certified by the party taking responsibility for the flows through their outlet. The application must be certified in accordance with title 47, Series 30, Section 4.7.1 of the WV NPDES regulations, with the signature dated and notarized. If the application is corrected or changed after initial submission it must include an updated certification when resubmitted for review. Authorized signatures for each type of applicant ownership include:

OWNERSHIP TYPE

AUTHORIZED SIGNATURES

Corporation

President, Secretary, Treasure, Vice-President, or any other person performing similar policy or decision-making functions for the corporation, or Manager of facilities employing more than 250 persons or have gross annual sales or expenditures exceeding \$25,000,000 (in 2nd Qrt. 1980 dollars), if authority to sign documents has been granted to the manager by the corporation.

Partnership

General Partner

Sole Proprietorship

Proprietor

For signatures other than principle officers, partners, or sole proprietors appropriate documentation granting or verifying such signatory authority must be included with the application.

MR-5 INSTRUCTIONS MODULE 2

THE APPLICANT MUST SUBMIT A JOINT ARTICLE 3 or 4 / NPDES PERMIT APPLICATION BEFORE THEY CAN REFERENCE ANY MATERIALS AS BEING FOUND IN THE ARTICLE 3 or 4 APPLICATION. ALL MATERIALS REFERENCED MUST BE IN THE JOINT ARTICLE 3 or 4/NPDES APPLICATION SUBMITTED, NOT IN PREVIOUSLY SUBMITTED APPLICATIONS

Module 2: Monitoring Information

This Module is to be completed and submitted with all applications for new permits or reissuance of permits. Excerpts from this module may be required to be addressed in modifications or transfers also if they are effected by those applications.

NPDES PERMIT # BOX

Use the NPDES permit number for which the "Module 2" is being submitted.

Part I: Location and Watershed Data

A. List all outlets and/or monitoring stations for the facility that are to be covered by this application. For each outlet or monitoring station include the following information:

| <u>STATION TYPE</u> | <u>INFORMATION NEEDED</u> |
|---------------------------------|-------------------------------------------------------------------------------------------------------|
| Outlet | ID #, Latitude & Longitude (to nearest second) |
| Internal Monitoring Point | Same as "Outlet" unless it is an injection well/point then include Surface and Bottom Elevations also |
| In-Stream Monitoring Station | Same as "Outlet" PLUS - Surface Elevation |
| Ground Water Monitoring Station | Same as "Outlet" PLUS - Surface unless it is a well, then include Bottom Elevation also |

If additional space is needed to show all points mark the box provided and include "Attachment 2-I-A". The attachment is to be in the same format as the table provided.

B. Show the following information on each line:

1. Outlet No.(s) - List all outlets, of the group of outlets, that discharge into a particular receiving stream.
2. Complete Stream Listing - Provide the complete drainage pattern, from the immediate receiving stream to the major drainage basin, for each group of outlets that discharge into each particular receiving stream. The major basins of West Virginia are the Guyandotte, Kanawha, Monongahela, Ohio, Potomac and Tug Fork/Big Sandy Rivers.
3. Stream Code - Provide the "WV Watershed Management Project" numeric stream code for the receiving stream (or the most up-stream code listed in the drainage pattern). Stream codes can be obtained from WVDEP regional offices in either printed or disk form.

C. In the chart provided list all the in-stream outlets of the facility that have contributing drainage areas of 200 acres or more. This chart is for outlets that are located in the receiving stream only, not on-bench outlets. If additional space is needed to show all points mark the box provided and include "Attachment 2-I-C". The attachment is to be in the same format as the table provided.

Part II: Flows, Sources of Pollution, and Treatment Technologies

A. Provide a flow chart, labeled "Exhibit 2-II-A", showing flow onto/into, through and off of the facility. The chart should start from the source of the flow and continue through the downstream monitoring station showing all areas that may effect the final discharge. It should also show at what point the operation or treatment effects the flow. If multiple sheets are used to show the information for the facility, use match lines for clarity. This chart is to include at a minimum the following:

1. All sources of intake water to include: storm (rain) water, any pumped water (from streams, wells, mines, etc.), any free flowing waters (from seeps, springs, mines, streams, etc.), flows from adjacent facilities/operations entering the facility or the receiving stream prior to the down stream monitoring station.
2. All types of operations and any other facilities operations that affect the final discharge. Show the types of operations (refuse, surface mine, deep mine, preparation plant, etc.) the flow passes through. Identify each operation by permit number (Article 3 for this facility and Article 3 or NPDES for other facilities). If the operation is reclaimed or abandoned note that also.
3. All types of treatment units identified by type and name (Sediment & Ammonia / Pond 1, Sewage/ Pond 4, Sediment & Caustic Soda/ Sed. Ditch 3, etc.) used by this facility. If a treatment unit of another facility is used to treat flow from an Article 3 permit of this facility it must also be shown.

Part II: Flows, Sources of Pollution, and Treatment Technologies (Continued)

4. All outlets, internal monitoring points and in-stream monitoring stations that flow from this facility passes through. If flow from this facility passes through an outlet, internal monitoring point or in-stream monitoring station of another facility, it must also be shown. For any permits contributing flows to or receiving flows from this application (permit) include the Article 3 or 4 permit number as well as the NPDES permit number and the outlet number.

5. Show a water balance (*using CFS*) from the intake to the downstream monitoring station. The amounts should be those calculated and used for design of the treatment structures.

B. In the table provided show the following for each outlet and internal monitoring point:

1. Type and activity status of the operations (*Deep | Abandon, Strip | Active, Refuse | Reclaimed, etc.*) contributing to the discharge.

2. The designed discharge of the outlet or internal monitoring point in CFS.

3. All treatment system names or IDs (*Pond 1, Sed. Ditch 5A, etc.*) and treatment codes (*K1, U2, etc. found in Table XIV-1 of these instructions*) for the various treatment(s) received by the flow on the way to the discharge point.

If additional space is needed to show all points mark the box provided and include "Attachment 2-II-B". The attachment is to be in the same format as the table provided.

C. If any flows (other than storm water runoff, leaks, or spills) contributing to any outlet are intermittent or seasonal address them here (If not mark the "No" box and go to Part III.). This would include things like wet weather seeps or springs and non-continuous pumped discharges. By each outlet in column 1 show (a) the contributing operation such as seep or pumped deep mine water, (b) the duration of flow in a day that can be expected when discharging (in Hr/Day), (c) the frequency of the flow per year (in Days / Yr.), and (d) the amount of flow to be expected per year (in Million Gal/Yr.).

Part III: Required Compliance

A. If required by federal, state or local authority to implement changes at this facility, and they may affect the discharge from the facility, address it here (If not mark the "No" box and go to Part IV.). Include the following information about the requirements:

Column 1 - Identify the agency that is requiring it and what it is (example: WVDEP consent agreement, EPA compliance order, etc.)

Column 2 - List the outlets effected by the requirements (example: 005, 101, 302, etc.)

Column 3 - Show the source that generated the requirements (example: U-5-75, mine bathhouse, etc.)

Column 4 - Briefly describe the requirements/project (example: complete contemporaneous reclamation, redesign treatment to bring discharge into compliance, etc.)

Column 5 - Enter the required compliance date of the agreement.

Column 6 - Enter the projected compliance date.

Part IV: Intake and Effluent Characteristics

The date sampled, the date analyzed and the name and address of the lab that performed the analysis, must be shown in the appropriate place on each table of this section.

A. TABLE A, B and C - Submit a set of Tables A, B and C for each constructed outlet that represents the type of treated discharge to be expected from each outlet. When an applicant has two or more outlets with substantially identical effluents the director may allow the applicant to test only one outfall and report that the quantitative data also applies to the substantially identical outlet. If a "Representative Outlet" is used, the group of outlets it represents must be shown in the space provided at the top of the table, and provide justification for the outlet to represent the group at the bottom of "Table A". If this application is for a new NPDES permit that does not have any outlets constructed mark the "NA" box. Tables A, B and C can be found at the end of this module and additional instructions are at the bottom of the tables. The sample taken for the Tables A, B and C analysis must be taken within the year preceding the submission of this application.

B. TABLE D - In "Table D" include each outlet and ground water monitoring station showing the raw water that comprises the discharge from the outlet (or station) prior to any treatment (physical, passive, chemical, etc.). The sample taken for the "Table D" analysis must be taken within the year preceding the submission of this application. Table D can be found at the end of this module and additional instructions are at the bottom of the table.

C. TABLE E - For each outlet (or group of outlets) there is to be a downstream and (in most cases) an upstream monitoring point in the receiving stream. Include the following information for these stations:

1. The upstream and downstream stations for the outlet(s) represented by each "Table E" must be shown in the spaces provided at the top of the table.

Part IV: Intake and Effluent Characteristics (continued)

2. The information in "Table E" will show the receiving stream conditions prior to the construction or modification of the facility. The analyses reported in "Table E" must be either the average value of data collected over a period reflecting seasonal variations (*minimum six consecutive months*), or for a seven consecutive day flow during drought stream conditions that would occur with a frequency of every ten years (7Q10 flow). Mark which type of flow the analyses represents in the space provided.

3. In the space provided show the in-stream monitoring station ID # with its average value for each parameter listed using the analyses taken over the sampling period.

4. For each sample taken show the station ID number and the's corresponding (a) time of sampling, (b) date of sampling, (c) date of analysis and (d) the name and address of the laboratory performing the analysis.

5. In the space provided at the bottom of the table list each outlet that this set of in-stream monitoring stations represents on the receiving stream. Across from each outlet show the acres of contributing drainage area of the receiving stream down to where the discharge of the outlet enters the receiving stream.

D. If it is believed that any pollutants in Appendix C or E of the WVNPDES Regulations 47CSR30 may be discharged from any outlet of this facility mark the "Yes" box, if not mark the "No" box and go to Part IV-E. If the "Yes" box is marked, list the pollutant and its possible source in the space provided. Also submit a narrative, labeled as "Attachment 2-IV-D") describing the reasons the pollutant is believed to be present and include any analytical data possessed on the pollutant.

E. If all analyses required in Module 2 were done in accordance with 40 CFR (Code of Federal Regulations) Part 136 mark the "Yes" box and go to Part IV-F. If not mark the "No" box and list each pollutant not analyzed as such along with the method used in its analysis.

F. If the toxic metals, cyanide and phenols reported under "Table C" were analyzed with a precision to the nearest microgram (1 microgram = 0.001 milligram) per liter mark the "Yes" box and go to Part V. If not mark the "No" box and list each pollutant not analyzed as such along with the method and detection limits used in its analysis.

G. Provide the day(s) of the week(s) of the month(s) that the applicant wishes to conduct the required compliance monitoring of the WVNPDES permit. These will be the required sampling day(s) set in the WVNPDES permit.

Part V: Potential Discharges not Covered by Analysis

A. If not mark the "No" box and go to Part VI. If "Yes" mark that box and include the information required labeled "Attachment 2-V-A".

Part VI: Biological Toxicity Testing Data

A. If not mark the "No" box and go to Part VI. If "Yes" mark that box and include the information required labeled "Attachment 2-VI-A".

Part VII: Benthic Survey

A. If not mark the "No" box and go to Part VI. If "Yes" mark that box and include the information required labeled "Attachment 2-VII-A".

Part VIII: Discharges into Non-complying Waters

A. This section addresses discharges into waters that are not currently meeting water quality standards set for the receiving stream. If the discharge is not going to a non-complying receiving stream mark the "No" box and go to Part IX. If the applicant is proposing to discharge into a non-complying receiving stream you must ask the following questions.

1. Will the receiving stream still NOT meet the water quality standards even after the applicant's discharge is treated to the required technology based limits and discharged into the receiving stream?

2. Has the State performed a waste load allocation for the pollutants the applicant is proposing to discharge into the non-complying receiving stream?

If you answered yes to both of the questions above then mark the "Yes" box and include the required documentation. If the proper documentation is not provided the outlets discharging to the non-complying receiving stream (and possibly the whole application) could be denied. An application under the CWA Sec. 301(p) for remaining limits would constitute the requirements of the Environmental Quality Board.

Part IX: Variances

A. If a variance from USEPA is being requested for the technology based effluent limits, mark the "Yes" box and comply with the requirements of the NPDES regulations, Title 47, Series 30, Sections 4.5.6. or 4.5.7 including it as "Attachment 2-IX-A". If not mark the "No" box.

TABLE XIV-1 TREATMENT CODES

PHYSICAL TREATMENT PROCESSES

| | | | |
|---------|-------------------------------|---------|------------------------------------|
| 1-A ... | Ammonia Stripping | 1-M ... | Grit Removal |
| 1-B ... | Dialysis | 1-N ... | Microstraining |
| 1-C ... | Diatomaceous Earth Filtration | 1-O ... | Mixing |
| 1-D ... | Distillation | 1-P ... | Moving Bed Filters |
| 1-E ... | Electrodialysis | 1-Q ... | Multimedia Filtration |
| 1-F ... | Evaporation | 1-R ... | Rapid Sand Filtration |
| 1-G ... | Flocculation | 1-S ... | Reverse Osmosis (Hyper-Filtration) |
| 1-H ... | Flotation | 1-T ... | Screening |
| 1-I ... | Foam Fractionation | 1-U ... | Sedimentation (Settling) |
| 1-J ... | Freezing | 1-V ... | Slow Sand Filtration |
| 1-K ... | Gas-Phase Separation | 1-W ... | Solvent Extraction |
| 1-L ... | Grinding (Comminutors) | 1-X ... | Sorption |

CHEMICAL TREATMENT PROCESSES

| | | | |
|---------|-------------------------|---------|---------------------------|
| 2-A ... | Carbon Adsorption | 2-G ... | Disinfection (Ozone) |
| 2-B ... | Chemical Oxidation | 2-H ... | Disinfection (Other) |
| 2-C ... | Chemical Precipitation | 2-I ... | Electrochemical Treatment |
| 2-D ... | Coagulation | 2-J ... | Ion Exchange |
| 2-E ... | Dechlorination | 2-K ... | Neutralization |
| 2-F ... | Disinfection (Chlorine) | 2-L ... | Reduction |

BIOLOGICAL TREATMENT PROCESSES

| | | | |
|---------|------------------------|---------|---------------------------|
| 3-A ... | Carbon Adsorption | 3-E ... | Disinfection (Ozone) |
| 3-B ... | Chemical Oxidation | 3-F ... | Disinfection (Other) |
| 3-C ... | Chemical Precipitation | 3-G ... | Electrochemical Treatment |
| 3-D ... | Coagulation | 3-H ... | Ion Exchange |

OTHER PROCESSES

| | | | |
|---------|---------------------------------|---------|-----------------------------------|
| 4-A ... | Discharge to Surface Water | 4-C ... | Reuse/Recycle of Treated Effluent |
| 4-B ... | Ocean Discharge Through Outfall | 4-D ... | Underground Injection |

SLUDGE TREATMENT AND DISPOSAL PROCESSES

| | | | |
|---------|-----------------------|---------|---------------------|
| 5-A ... | Aerobic Digestion | 5-M ... | Heat Drying |
| 5-B ... | Anaerobic Digestion | 5-N ... | Heat Treatment |
| 5-C ... | Belt Filtration | 5-O ... | Incineration |
| 5-D ... | Centrifugation | 5-P ... | Land Application |
| 5-E ... | Chemical Conditioning | 5-Q ... | Landfill |
| 5-F ... | Chlorine Treatment | 5-R ... | Pressure Filtration |
| 5-G ... | Composting | 5-S ... | Pyrolysis |
| 5-H ... | Drying Beds | 5-T ... | Sludge Lagoons |
| 5-I ... | Elutriation | 5-U ... | Vacuum Filtration |
| 5-J ... | Flotation Thickening | 5-V ... | Vibration |
| 5-K ... | Freezing | 5-W ... | Wet Oxidation |
| 5-L ... | Gravity Thickening | | |

MR-5 INSTRUCTIONS MODULE 3

THE APPLICANT MUST SUBMIT A JOINT ARTICLE 3 or 4 / NPDES PERMIT APPLICATION BEFORE THEY CAN REFERENCE ANY MATERIALS AS BEING FOUND IN THE ARTICLE 3 or 4 APPLICATION. ALL MATERIALS REFERENCED MUST BE IN THE JOINT ARTICLE 3 or 4/NPDES APPLICATION SUBMITTED, NOT IN PREVIOUSLY SUBMITTED APPLICATIONS

Module 3: Adjacent Surface and Ground Water

This Module is to be completed and submitted with all applications for new permits. Excerpts from this module may be required to be addressed in modifications or transfers also if they are effected by those applications.

NPDES PERMIT # BOX

Use the NPDES permit number for which the "Module 3" is being submitted.

Part I: Operations In Same Seam

A. If any type of mining operation is in the same seam and within 1,000 feet of the proposed permitted area, then mark the "Yes" box and address A-1. The discharge or pooled water of the adjacent mine does not have to be within the 1,000 ft distance for a sample to be collected from it. If the adjacent operation is a deep mine, a Module 5 must be included showing the barriers to be used between the proposed operation and the adjacent operation. If there are no adjacent operations, mark the "No" box and go to Part II.

Part II: Operations Above or Below

A. If there is any type of deep mine above or below the facility and within 1,000 ft horizontally, mark the "Yes" box and address A-1. If not, mark the "No" box and go to Part III.

Part III: Adjacent Operation's Raw Water Analyses

A. All sampling required in Part I & II above should be raw water samples and shown in this table. On each line include the following site information: (a) ID # to match that on the "Exhibit 1-VI-A" map, (b) seam names as given by the US Geologic Survey, (c) If the site is active enter Y for yes or N for no, (d-k) enter the analysis for the parameter shown using the units shown.

Part IV: Water Supplies

A. List the name and address of the owners of the first private water supply found down stream of the facility in each watershed. List the name and address of all public water supplies that are within five miles down stream of the facility's most down stream discharge point. Show private and public water supplies on the "Exhibit 1-VI-A" map and give the latitude, longitude and elevation in the space provided.

Part V: Ground Water

A. Submit analysis of any seeps, springs or wells within the facility and one thousand feet beyond the proposed facility boundary. Provide the site ID #, latitude, longitude and surface elevation of each point along with the results of the analysis for the parameters listed in the units shown.

If this is a joint application, and this information can be found in the Art. 3 or 4 section of the application, mark the appropriate box and reference the section of the Art. 3 or 4 form the information can be found in (Ex.: MR-4 Part II-J-4B). Then resubmission of information that is already submitted elsewhere in the application will not be required.

Part VI: Aquifer Uses

A. Give a description of the ground water usage in the aquifers within one thousand feet of the perimeter of the proposed facility. Also describe the water table characteristics in this area.

If this is a joint application, and this information can be found in the Art. 3 or 4 section of the application, mark the appropriate box and reference the section of the Art. 3 or 4 form the information can be found in (Ex.: MR-4 Part II-J-4B). Then resubmission of information that is already submitted elsewhere in the application will not be required.

MR-5 INSTRUCTIONS MODULE 4

THE APPLICANT MUST SUBMIT A JOINT ARTICLE 3 or 4 / NPDES PERMIT APPLICATION BEFORE THEY CAN REFERENCE ANY MATERIALS AS BEING FOUND IN THE ARTICLE 3 or 4 APPLICATION. ALL MATERIALS REFERENCED MUST BE IN THE JOINT ARTICLE 3 or 4/NPDES APPLICATION SUBMITTED, NOT IN PREVIOUSLY SUBMITTED APPLICATIONS

Module 4: Mineral Information

This Module is to be completed and submitted with all applications for new permits. Excerpts from this module may be required to be addressed in modifications or transfers also if the are effected by those applications.

NPDES PERMIT # BOX

Use the NPDES permit number for which the "Module 4" is being submitted.

Part I: Mined / Processed Mineral Bed(s)

A. List all seams of coal as well as any coal refuse that may be mined, processed, cleaned, stored, handled, loaded, disposed of at, generated by, etc. at this facility. In the first column enter the US Geologic Survey Seam Name for the seam of coal or for the seam of coal from which the refuse was generated. In the next column enter coal or refuse depending on what it is. In the next four columns enter the percent of sulfur in the coal seam by type.

If this is a joint application, and this information can be found in the Art. 3 or 4 section of the application, mark the appropriate box and reference the section of the Art. 3 or 4 form the information can be found in (Ex.: MR-4, Part II.I.1). The resubmission of the information in "Table 4-II-A" will not be required if already submitted elsewhere in the application.

Part II: Acid -Base Analysis

A. Use "Table 4-II-A" to show an acid base analysis for each layer of overburden that will be encountered from startup to the release of the facility. The maximum interval between samples in any one layer of overburden will be five feet in consistent sandstone strata, and three feet in consistent shale strata. The immediate roof and floor of any seam being mined must be analyzed as well as all the strata ten feet below the bottom seam to be mined.

If requesting a waiver of the overburden analysis, mark the appropriate box and include justification for a waiver as "Attachment 4-II-A"

If this is a joint application, and this information can be found in the Art. 3 or 4 section of the application, mark the appropriate box and reference the section of the Art. 3 or 4 form the information can be found in (Ex.: MR-4, Part II.I.7 to 12). The resubmission of the information in "Table 4-II-A" will not be required if already submitted elsewhere in the application.

Part III: Amendments & Additives

If no additives or amendments are proposed at the facility mark the "N/A" box.

A. For any type of additive being blended with, or used to replace, fill material or refuse a narrative describing the additive must be submitted. At a minimum the narrative needs to cover the following:

1. What it is and where it comes from (Ex.: Coal Ash from John Amos Power Plant, Putnam Co., WV)
2. Give a chemical breakdown and properties of the additive to include any chemical reaction anticipated when added to or mixed with the mine materials.
3. Why the additive is being used and what the desired results are at the facility.
4. How, when and where will it be applied at the facility and what amount will be used.
5. All possible degradation of the hydrologic regime that could be caused by the additive and measures that will be taken to prevent them from happening.

If this is a joint application, and this information can be found in the Art. 3 or 4 section of the application, mark the appropriate box and reference the section of the Art. 3 or 4 form the information can be found in (Ex.: MR-4, Part II.I.3). The resubmission of the information in "Table 4-II-A" will not be required if already submitted elsewhere in the application.

B. If any material is to be disposed of in underground works then Modules 5 and 6 must also be completed and submitted with this application.

MR-5 INSTRUCTIONS MODULE 5

THE APPLICANT MUST SUBMIT A JOINT ARTICLE 3 or 4 / NPDES PERMIT APPLICATION BEFORE THEY CAN REFERENCE ANY MATERIALS AS BEING FOUND IN THE ARTICLE 3 or 4 APPLICATION. ALL MATERIALS REFERENCED MUST BE IN THE JOINT ARTICLE 3 or 4/NPDES APPLICATION SUBMITTED, NOT IN PREVIOUSLY SUBMITTED APPLICATIONS

Module 5: Barrier Information

This Module is to be completed and submitted with new permit applications only if either of the following conditions exist: (1) the proposed facility involves deep mines, injection into deep mines or auguring operations; (2) if there are deep mine or auger operations above, below or adjacent to the proposed facility. Excerpts from this module may be required to be addressed in modifications or transfers also if they are effected by those applications.

NPDES PERMIT # BOX

Use the NPDES permit number for which the "Module 5" is being submitted.

Part I: Barriers

A. If the 15° angle of critical deformation of any deep mine lies under any portion of the facility then the workings of that deep mine must be shown on the "Exhibit 1-VI-A or 8-II-A" map. If "Yes" enter the Exhibit where the works can be found.

B. This question is for facilities that involve deep mine operations, auger operations or operations that inject materials underground. If this facility has no such operations mark the "NA" box and go to "C". If the facility has these types of operations, then the area within the 15° angle of critical deformation of the underground works (proposed or existing) must be surveyed for the following with the results shown on the "Exhibit 8-II-A" map:

1. mining operations (active, inactive, forfeited, abandoned)
2. wells (any type of injection well, water wells, gas or oil wells)
3. water bodies or courses (intermittent or perennial streams, rivers, reservoirs, lakes)

If this is a joint application, and this information can be found in the Art. 3 or 4 section of the application, mark the appropriate box and reference the section of the Art. 3 or 4 form the information can be found in (Ex.: MR-4 Part III-S-1). Then resubmission of information that is already submitted elsewhere in the application will not be required.

C. This question is for facilities that have deep mines above, below or adjacent to their facility. If there are none mark the "NO" box. If there are, then address each column of the table for each deep mine. Insure the Name or ID# used in column one matches the one(s) used on any maps (Exhibit 1-VI-A or 8-II-A) or other modules submitted with this application.

D. This question addresses the possible effects on the partings due to subsidence between the facility and the surface or any underlying underground mining. Provide a narrative describing the types, thickness and the effects on strata that overlie or underlie the proposed facility and how the fracturing from it will effect the flow of surface and/or ground water into or out of the underground operations in question? Even if it is not proposed to subside address, the pillar design using sound engineering practices and the strengths taken from the bed/seam to be mined, and the types of separating strata.

If this is a joint application, and this information can be found in the Art. 3 or 4 section of the application, mark the appropriate box and reference the section of the Art. 3 or 4 form the information can be found in (Ex.: MR-4 Part III-N-5). Then resubmission of information that is already submitted elsewhere in the application will not be required.

E. This question addresses interior and outcrop barrier design. Include designs for barriers to prevent blowouts and/or seepage from the underground works to other underground operations or the surface. Include the equation(s) used to calculate the barriers as well as any strength properties of the strata that were used in the calculations. Show all barriers on either the "Exhibit 1-VI-A or 8-II-A" map.

If this is a joint application, and this information can be found in the Art. 3 or 4 section of the application, mark the appropriate box and reference the section of the Art. 3 or 4 form the information can be found in (Ex.: MR-4 Part III-S-4). Then resubmission of information that is already submitted elsewhere in the application will not be required.

F. This question addresses the flow of waters into or out of the proposed facility. Address any waters from surrounding mines or watercourses that will migrate into the proposed underground facility and/or if any waters from the proposed underground facility will migrate into the surrounding mines or watercourses. Include the qualities and quantities of the waters and their projected effect on the final discharge. If no migration of waters to or from the proposed facility is expected, explain why.

MR-5 INSTRUCTIONS MODULE 6

THE APPLICANT MUST SUBMIT A JOINT ARTICLE 3 or 4 / NPDES PERMIT APPLICATION BEFORE THEY CAN REFERENCE ANY MATERIALS AS BEING FOUND IN THE ARTICLE 3 or 4 APPLICATION. ALL MATERIALS REFERENCED MUST BE IN THE JOINT ARTICLE 3 or 4/NPDES APPLICATION SUBMITTED, NOT IN PREVIOUSLY SUBMITTED APPLICATIONS

Module 6: Preparation, Stockpiling, Handling & Disposal

This Module is only submitted with new permit applications if the facility involves any of the following operations: (1) Preparation / Cleaning plants, (2) Tipples and/or Loadouts, (3) Refuse disposal. Excerpts from this module may be required to be addressed in modifications or transfers if they are affected by those applications.

NPDES PERMIT # BOX

Use the NPDES permit number for which the "Module 6" is being submitted.

Part I: Facility Operations

A. This question addresses the different types of operations that are proposed at the facility. Mark all boxes that represent the operations at the facility.

Part II: Cleaning/Washing Operations

(If there are no cleaning or washing operations at this facility mark the "NA" box and go to Part IV)

A. This question addresses the different types of agents or materials added to the cleaning circuit. Provide a list of all additives introduced into the plant or handling circuits (cleaning, refuse, recovery, conveyors, etc.), as well as their composition, rates of application, method of application and any recovery procedures for them that may be used. At a minimum address the pH adjusters, heavy media, refuse amendments, flocculants and any type of anti-freezing agents that are proposed to be added to the plant or handling system. Discuss how these materials will be monitored to insure they do not adversely affect the hydrologic balance by being discharged through the effluent or into the groundwater.

B. This question is to insure there is enough slurry containment available for an emergency shutdown or required maintenance of the plant. The emergency containment structures must be dedicated solely as emergency structures and can not be used as sediment control structure also. WVDEP requires the volume of emergency containment to be one hundred ten percent (110%) of the plant's total slurry volume (thickener, lines, etc.). If the 110% slurry volume is not provided then the smaller volume must be justified in the space provided.

C. This question concerns the use of thermal dryers and their byproducts. If any type of thermal dryers are proposed or use at this facility then mark the "Yes" box, if not then the "No" box. If "Yes" is marked then describe the following: (1) type of dryer(s) used, (2) any byproducts produced by the dryer (such as ash) and their chemical composition, (3) where and how the byproduct will be disposed of.

Part III: Plot Plan & Flow Diagram

A. This question addresses the layout of the plant and the associated buildings and/or areas. The operations shown in Part I & III must be clearly plotted on a map labeled "Exhibit 6-III-A". They can be shown on the "Exhibit 1-VI-A" map only if all of the required information is clear and legible on the map. If "Exhibit 1-VI-A" is used to show the requirements of "Exhibit 6-III-A" then insure the map is labeled as "Exhibit 6-III-A" also. If a separate "Exhibit 6-III-A" is made it must be labeled as such, drawn to scale, and have a North arrow, a title block and a legend. All "Exhibit 6-III-A" maps must include the following:

1. Location of the different units such as crusher house, cleaning units, thickeners, dryers, coal piles (*raw & clean*), pressure/vacuum filters, temporary refuse piles, slurry lines, haulroad, etc.
2. Location of all laboratory or testing operations.
3. Location of all water sprays for dust and/or truck washes.
4. Location of all treatment ponds, dams, sediment ditches, treatment plant, intake water, etc.
5. Location of all structures used to channel effluent (*berms, ditches, culverts, etc.*)
6. Designed flow directions using contour lines and/or flow arrows.

B. This question addresses the components and capacities of the different units at the facility. Use a flow diagram to show the components, their capacities (in TPH & GPM) and their relationship to each other. Insure the source of the intake/make-up water is shown listing the seasonal variation (both max. and min. flow), and the amount to be used by the facility.

Part IV: Maintenance & Disposal

- A.** This question addresses any materials that may be disposed of at the facility that are not routinely found at mining facilities such as ash from power plants, trash/garbage, wood chips, etc. If you answer this "Yes" then you must include "Module 4" and address the material in Part III of that module.
- B.** This question addresses any underground works that may be underlying the disposal area (refuse or overburden). If you answer this "Yes" then you must include "Module 5" and address the disposal site in that module.
- C.** This question addresses any material generated at, or brought onto, the facility and disposed of in underground works. If you answer this "Yes" then you must include "Module 10" and address the disposal site in that module.
- D.** This question addresses the monitoring and maintenance of any slurry lines that are used at this facility. If "Yes" then address the type of slurry transported and the way these lines will be monitored and maintained to insure failure of these lines will not cause large scale environment harm before the failure is detected.
- E.** This question addresses the materials used or encountered in operations involving dust control, routine washdown/maintenance, and pretreatment of transportation equipment. Briefly describe the materials, when, where and how they are used, and their handling and disposal. Insure pretreatment of transportation equipment (spraying oils in railcars or antifreeze on belts to ease dumping etc.), and how the excess or over-spray of these are controlled during application.

MR-5 INSTRUCTIONS MODULE 7

THE APPLICANT MUST SUBMIT A JOINT ARTICLE 3 or 4 / NPDES PERMIT APPLICATION BEFORE THEY CAN REFERENCE ANY MATERIALS AS BEING FOUND IN THE ARTICLE 3 or 4 APPLICATION. ALL MATERIALS REFERENCED MUST BE IN THE JOINT ARTICLE 3 or 4/NPDES APPLICATION SUBMITTED, NOT IN PREVIOUSLY SUBMITTED APPLICATIONS

Module 7: Effluent Treatment

This Module is to be completed and submitted with all applications for new permits. Excerpts from this module may be required to be addressed in reissuance, modifications or transfers also if they are effected by those applications.

NPDES PERMIT # BOX

Use the NPDES permit number for which the "Module 7" is being submitted.

Part I: Physical Treatment

A. This question addresses all design and maintenance aspects of the physical treatment (or handling) systems of the wastewater or effluent from the facility. Provide physical (sediment) treatment/control for all areas where the surface is disturbed. This may run from immediate seeding and mulching of small areas to diversion ditches and large sediment ponds for larger areas. On "Exhibit 1-VI-A" clearly show ALL areas where the surface will be disturbed and how the runoff from those areas will be physically controlled to ensure the effluent discharged from the facility will meet the effluent limits. For each physical treatment unit provide the following information:

(If this is a joint application and all of the required information is with the Article 3 or 4 section, mark the 2nd Box and fill in where it can be found (Ex. MR-4 Part III.I.7 and III.W.1), otherwise include the information as "Attachment 2-II-C")

1. The controlled drainage area description of the unit/structure matching that shown on the "Exhibit 1-VI-A" map.
2. Design calculations for sizing of the unit, to include the total and disturbed acres to be controlled, velocities, entrance and exit channels, types of material to be used, flow calculations.
3. Construction specifications to include how the area is to be prepared, the type of construction materials needed, how those materials are to be utilized, seeding and mulching, and how the certification of completion and proper construction will be performed.
4. Construction plans to include a plan, cross section, and profile view of each unit/structure with all dimensions. Each view will show the normal pool elevation and the elevation at which sediment buildup will be cleaned out.
5. Describe how and at what frequency routine inspections and maintenance will be conducted.
6. Describe the capacity at which the unit/structure will be cleaned, any weather conditions that would restrict the cleaning, and the disposal of the dippings / cleanings.

Part II: Chemical and Biological Treatment

A. This question addresses the potential of additional treatment (other than physical) required for any discharge from the facility to meet effluent limits. This includes but is not limited to chemical reagents, passive treatment systems, biological treatment systems, sewage treatment systems, etc. If any type of treatment other than physical (sediment control) is proposed or used at this facility then mark the "Yes" box and submit the additional required information.

B. This section addresses the type chemical and/or biological treatment that is proposed or in use at the facility. Submit a narrative and drawings explaining how the chemical and/or biological treatment system(s) will be used in conjunction with any physical treatment system to meet effluent limits. Address each item listed (1-9) within the narrative, and if sewage treatment is proposed then include "Module 9" with the application.

C. This question addresses what actions would be taken should unexpected pollution problems arise if no chemical or biological treatment is planned. Explain how WVDEP will be notified in the event of a violation of the effluent limits and what temporary actions will be taken until more permanent treatment is established. Include verbiage similar to the following in the narrative to comply with the 47CSR30 requirements:

"The WVDEP regional office with jurisdiction over the facility will be notified within 24 hours of any violation of any pollutant for which the applicant is assigned a daily maximum effluent limit for. Written notification containing a description of the noncompliance and its cause, the period of noncompliance (dates & times), remedial actions taken and steps taken to prevent reoccurrence of the noncompliance shall be submitted to the WVDEP regional office with jurisdiction over the facility within five (5) calendar days of when the noncompliance began. If at the time of submission the noncompliance is not corrected then remedial measures to be taken will be submitted with an anticipated compliance date"

MR-5 INSTRUCTIONS MODULE 8

THE APPLICANT MUST SUBMIT A JOINT ARTICLE 3 or 4 / NPDES PERMIT APPLICATION BEFORE THEY CAN REFERENCE ANY MATERIALS AS BEING FOUND IN THE ARTICLE 3 or 4 APPLICATION. ALL MATERIALS REFERENCED MUST BE IN THE JOINT ARTICLE 3 or 4/NPDES APPLICATION SUBMITTED, NOT IN PREVIOUSLY SUBMITTED APPLICATIONS

Module 8: Abandonment Plan

This Module is to be completed and submitted with all applications for new permits. Excerpts from this module may be required to be addressed in a reissuance, modification or transfer also if they are effected by those applications.

NPDES PERMIT # BOX

Use the NPDES permit number for which the "Module 8" is being submitted.

Part I: General Abandonment Information

A. This question is to show the type of abandonment application being submitted. Mark the box or boxes that represent the type of application submitted. The following are descriptions of what each box represents and when that type of abandonment application should be submitted.

The first box : Pertains to all new NPDES permits and would be marked when submitting the original plan to abandon the facility (or a modification to one) for approval. This type of application would be submitted with the original application for an NPDES permit or any modification application that would change the approved application.

The second box : Pertains to NPDES permits that cover discharges from any WVSMCRA (Article 3) permits. This would be marked if submitting an application to actually abandon a facility, or an operation (like one of three Art. 3 permits) of a facility covered by one WVNPDES permit. If the facility has more than one WVSMCRA permit and all the permits are not applying for Phase II at the same time, abandonment the particular Art. 3 or 4 permit under the WVNPDES permit should be applied for. If requesting abandonment of any operation that involves areas permitted under the CWA Sec. 301(p) (Remining) include Module 10 with the abandonment application.

Deep Mine Operations: The application to abandon a deep mines must be submitted one hundred eighty (180) days prior to sealing the mine and will require two years of raw water data from the mine with the submittal.

All Other Operations (Surface): The application for the abandonment of all other types of WVSMCRA operations or facilities such as preparation plants, tipples, refuse piles, surface mines, haulroads etc., are to be submitted with the WVSMCRA Phase II bond release application.

The third box : Pertains to NPDES permits that cover discharges from any site that is not a WVSMCRA (Article 3) permit and would be marked if submitting an application to actually abandon a the facility.

B. This question addresses the types of operations at the facility. If there are no active deep mines or deep mines having material disposed of in them involved with this facility, then mark the "NA" box at the top of "Part II" and go to "Part III". If deep mines are involved with this facility complete "Part II".

Part II: Deep Mine Abandonment

A. This question describes requirements of "Exhibit 8-II-A", the "Mine Development Map". The map must be labeled and to scale with the scale of the size that clearly shows all of the information required. The map must also extend one thousand (1,000) feet beyond the limits of any mining. The Article 3 or 4 "Subsidence Survey" map may be used as the "Exhibit 8-II-A" map if all the required information can be clearly shown. If the "Subsidence Survey" map is used as "Exhibit 8-II-A", mark the box and reference the section of the application it is found in (Ex.: MR-4 Part III-S-1), and insure it is labeled as "Exhibit 8-II-A". The following at a minimum must be clearly shown on the map:

1. Structural seam contour lines at ten (10) ft. intervals. This can be predicted from borehole and/or outcrop data in the original application but as mining progresses the contours should be adjusted to reflect the actual conditions in the mine for any future submittal of the map.
2. Surface elevation contours at interval not less than the latest USGS 7.5 Minute quadrangle.
3. Any geologic faults or weak planes within the mining area.
4. Any and all types of wells within 1,000 ft. of the mining area and any protection zones associated with them. Use different symbols or colors on the map and in the legend to show the types of wells (gas/oil, injection, water, etc.).
5. The final mining limits (projected or actual), and the current limits of mining (for active deep mines).
6. The outer edges of all barriers (inner limits being the mining limits) such as the outcrop of the seam being mined, highwall of mined seam, end of auger works for mined seam, mining limits for other deep mines, etc.

Part II: Deep Mine Abandonment (continued)

7. Predicted final impounded water level within the mine.
 8. Areas of containment for mines having materials being disposed of in them.
 9. Location of all boreholes, shafts, entries, punch-outs, breakthroughs or any other possible discharge point to the surface or other mines.
 10. Location of all proposed or actual seals or sectionalization dams. If proposed label as proposed.
 11. North arrow; general strike and dip direction of the mine seam; with the average percent dip.
 12. Legend and title block with the map scale.
 13. All overlying, adjacent and underlying deep mine operations within 1,000 ft horizontally of the mining limits showing: (a) outlines, (b) status (active, inactive, abandoned), (c) the final impounded water level within the mine, (d) all discharge points, entries, and/or boreholes. If the proposed operation will discharge through an overlying, adjacent or underlying mine, the final discharge point must be shown. If this involves several other deep mines or can not clearly be shown, then a supplemental map can be used to show the mines above and below the seam being mined or deposited into, but the mines in the seam must be shown on "Exhibit 8-II-A". The supplemental map must be of the same scale as the "Exhibit 8-II-A" map with match lines to allow for easy overlay alignment with "Exhibit 8-II-A".
- B.** This question addresses the amount of water expected to be discharged from the mine over the life of the facility. In the first column enter the current average pumped, gravity flow, and total discharge from the mine (NA if mine is not started). In the second column enter the projected average over the next five years of the pumped, gravity flow, and total discharge from the mine. In the third column enter the predicted average pumped, gravity flow, and total discharge from the mine after abandonment and the pooled water in the mine reaches it's predicted final elevation. All entries are to be in Cubic Feet per Second.
- C.** This question addresses how the discharge flows in "B" above were calculated. Include any "Rules of Thumb" that were used and if it was based on other mines, list them.
- D.** This question addresses how the mine water will be discharged to the surface. Mark all boxes that apply. If the "Adjacent Works" box is marked, then indicate the status of the adjacent works.
- E.** This question addresses the quality of the mine water and its possible effects on the surface or groundwater of the area. Submit in narrative form the information requested and label it "Attachment 8-II-E".
- F.** This question addresses the type and number of different permanent seals to be used at the mine. Provide construction specification for each type of seal that will be or has been used at the mine. Some of the types of seals to include would be entries (drift, slope, or shaft), borehole, corehole, seals between mines, etc. For each seal provide design details to include the type and placement of materials, as well as construction specifications with drawings containing cross sectional and profile views. Include the number of seal by type to be installed, and if the seal will be a wet or dry seal. Locate each seal on the "Exhibit 8-II-A" map. If this information is in another section of the application mark the box and reference the section (Ex.: MR-4 Part III-O-7).
- G.** This question addresses the geology above the mine. Include at least one geologic cross section along a line parallel to the dip of the seam the deep mine is in. The line of cross-section must be shown on "Exhibit 8-II-A". The cross section must include the following:
1. All coal seam(s) and all strata from twenty feet below the lowest seam mined (or used) up to the surface.
 2. The USGS name and thickness of each strata and coal seam. Thickness can be shown by drawing to scale.
 3. The final likely level of water in the mine(s) on abandonment.
 4. The likely extent of fracturing in the overburden due to mining and or subsidence.

Part III: Surface Operation Abandonment

- A.** This question addresses the information required for an abandonment plan for surface operations at the facility. In a narrative form provide a description of how the operation will be conducted, backfilled, regraded and revegetated to eliminate or minimize any adverse effects on hydrological regime. Include any information and drawings required to adequately support the plan. Label "Attachment 8-III-A". At a minimum include the following:
1. Provide a plan for removing, burying, blending, segregating, and/or treating acid /toxic material encountered.
 2. Include ample cross-sections (*to scale*) to represent the area disturbed by the operation depicting the surface configuration prior to operations, during operations and at abandonment. The cross-sections shall be shown on the "Plot Plan" and identify (*at a minimum*) (a) All materials requiring special handling (*iron or acid producing materials etc.*); (b) Regrading and topsoiling material storage or borrow areas; (c) Limits of proposed disturbed areas.
 3. Provide a plot plan (*to scale*) showing regraded drainage pattern and all treatment structures.
- If this information is in another section of the application mark the box and reference the section (Ex.: MR-4 Part III-O-1, 2, 3, 6, 8 & 9).

MR-5 INSTRUCTIONS MODULE 9

THE APPLICANT MUST SUBMIT A JOINT ARTICLE 3 or 4 / NPDES PERMIT APPLICATION BEFORE THEY CAN REFERENCE ANY MATERIALS AS BEING FOUND IN THE ARTICLE 3 or 4 APPLICATION. ALL MATERIALS REFERENCED MUST BE IN THE JOINT ARTICLE 3 or 4/NPDES APPLICATION SUBMITTED, NOT IN PREVIOUSLY SUBMITTED APPLICATIONS

Module 9: Sewage Material Disposal Facility

This Module is to be completed and submitted with the following types of WVNPDES permit applications:

1. Any application requesting coverage of a new sewage disposal systems, or
2. Any application requesting coverage of an existing sewage disposal systems for the first time, or
3. Any application requesting changes to the approved sewage system.

Module 9WL must also be included when requesting new coverage or reissuance of coverage of any sewage treatment system that has a discharge point.

NEW SEWAGE FACILITIES

1. All proposed NEW sewage treatment systems with a discharge to the surface must complete Part A of Module 9WL and submit it to WVDEP for the assignment of waste load allocation of the discharge point. Part B of Module 9WL will be completed by WVDEP showing the waste load allocation of the discharge point, then the Module 9WL will be returned to the applicant.
2. The applicant must then submit eight (8) completed copies of Module 9 and 9WL (this acts as the application to the Dept. of Health) to:

W. V. Department of Health and Human Services
Environmental Engineering Division
815 Quarrier Street, Suite 418
Charleston, West Virginia 25301

The Dept. of Health will review Modules 9 and 9WL for completeness within five (5) days. If corrections are needed the applicant will be required to make those corrections prior to any further review being done by the Dept. of Health. If the application (Mod. 9 & 9WL) is found to be complete four (4) copies will be mailed to WVDEP for concurrent reviewing of the application by both WVDEP and the Dept. of Health.

3. When Modules 9 & 9WL are submitted to the Dept. of Health the rest of the WVNPDES application (missing only the Mod. 9 & 9WL) should be submitted to the appropriate WVDEP regional office for review. When the four (4) copies are received from the Dept. of Health they will be inserted into the WVNPDES application making it a complete WVNPDES application. WVDEP will not delay the review of the application waiting on the Dept. of Health to check for completeness.
4. The Dept. of Health will perform its review of the Modules within sixty (60) days from the receipt of a complete application. A copy of the "Bureau of public Health Permit" will be sent to WVDEP by the Dept. of Health upon completion of their review.
5. During the Dept. of Health's review WVDEP will also be reviewing the entire NPDES permit application and requesting any corrections that may be required. The draft NPDES permit can not be run nor the advertisement run until the permit is received from the Dept. of Health.

REISSUANCE OF SEWAGE FACILITIES

When submitting an application for the reissuance of an outlet for sewage facilities insure Part A of Module 9WL is submitted with the application. Module 9 is not required with a WVNPDES reissuance unless changes to the approved sewage facility are being requested in the reissuance application.

NPDES Permit # Box

Use the NPDES permit number for which the "Module 9" is being submitted.

Heading Information

Mark the appropriate box (New or Existing) that represents the type of sewage facility this application is for. If the application is for constructing proposed new facility mark the first box. If the sewage facility is existing and the application is for the modification of the facility, or for covering an un-permitted facility, then mark the second box.

Part I: Facility Information

- A. Enter the name of the mine(s) or complex.
 Enter the facility's mailing address and phone number. If Address is a P.O. box include a Street Address.
 Enter all counties in which the facility is located.
 Enter the nearest post office based on straight-line distance from the center of the surface disturbance.
 On the two lines under "Physical Location" enter a description of how to get to the facility and where it is located.
 Start at the nearest town (*must be found on the county road map or USGS topographic map*) to the access road entrance, then use the route number(s) from the nearest town with a compass direction and distance until the entrance to the facilities access road is reached. In addition state the name of the hollow, stream or mountain on which the facility is located. If the permit covers a complex of several mines/sites then the directions should be to the main field office for the complex. (Example: From Ciro, Rt.4 S. 1.2 miles to Rt. 4/20 E. 5 miles to access rd. The site is located up Bowyer Creek on Trace Ridge)
- Facility Contact must be an employee of the applicant, and must be thoroughly familiar with the operation of the facility, such as chief engineer, plant manager, superintendent, etc., but not a consultant. Include the title and phone number of the Facility Contact also.

Part II: Applicant (Owner)/Operator Information

- A. The applicant (owner) shall be the entity that owns the Article 3 or 4 permit(s) or other operations to be covered by this application. This is the name the permit will be issued to. Fill in the Applicant's (owner's) information in the spaces provided (*if Mailing Address is P.O. address include Street Address also*).
- If the applicant (owner) is different than the operator then "Module 1R" or other notarized documentation that shows the responsibility and liabilities of the operator and the applicant (owner) must be provided.**
- B. The operator is the entity that will actually operate the sewage treatment system. If the operator is the same entity as the applicant (owner) enter "SAME" in the "Name of Operator" blank, if not provide the operator's information in the spaces provided.
- C. Mark an "X" in the box that describes the type of ownership of the APPLICANT (owner).

Part III: Applicant Request

- A. This section simply states what is being requested, by the applicant, concerning NPDES for sewage disposal. If this is an application to construct a new sewage facility or modify an existing one, or cover an existing facility, then mark the box also.

Part IV: Environmental Permits

This information is the same as what is requested in Module 1 but, since Module 9 must be submitted to and approved by the health department as their application, and because the health department requires the permit information be provide, it must be repeated here in Module 9 for facilities having sewage treatment.

- A. Enter the permit/ID number, date of issuance and expiration date of all environmental permits required for the operation of this facility in the table provided. Address all of the preprinted permits at a minimum by entering complete data or entering "N/A" in the "Permit or ID Number" column.
- If the applicant is accepting responsibility for some or all of the discharge from an Article 3 or 4 permit or other operations that (a) is not owned by the applicant, (b) is not fully covered by this application, then enter the appropriate identification number followed by "/R" (*Example: S-40021-94/R, Q-1024-86/R, Quincy Siding /R*) and the dates. Likewise if someone else is accepting responsibility for some of the discharge from operations of the applicant that are covered by this application, then enter that NPDES permit number followed by "/R" (*Example: WV1010345/R*) and the dates. If either of these situations exist a "Module 1R" signed by the party responsible for the final outlet must be included at the end of Module 1 of the application.

PART V: Applicant Certification

A. The application must be certified in accordance with title 47, Series 30, Section 4.7.1 of the WV NPDES regulations, and the signature must be dated and notarized. If the application is corrected or changed after initial submission it must include an updated certification when resubmitted for review. Authorized signatures for each type of applicant ownership include:

| <u>OWNERSHIP TYPE</u> | <u>AUTHORIZED SIGNATURES</u> |
|-----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Corporation | President, Secretary, Treasure, Vice-President, or any other person performing similar policy or decision-making functions for the corporation, or Manager of facilities employing more than 250 persons or having gross annual sales or expenditures exceeding \$25,000,000 (in 2nd Qrt. 1980 dollars), if authority to sign documents has been granted to the manager by the corporation. |
| Partnership | General Partner |
| Sole Proprietorship | Proprietor |

For signatures other than principle officers, partners, or sole proprietors appropriate documentation granting or verifying such signatory authority must be included with the application.

Parts VII to X of Module 9 and Part A of Module 9WL must be completed for each sewage system at the facility.

Part VI: Description of Discharge

A. This question addresses the location and some of the potential pollutants of the outlet.

1. **Discharge Outlet No.** - Enter the number assigned to the discharge outlet of the system. All sewage discharge outlets or monitoring points will use a three digit number beginning with the number one (1). **Discharge Point Name** - Enter the name of the sewage discharge point's name (Example: "Mine #3 Bathhouse", or "Eagle Preparation Plant Bathhouse and Laboratory").

2. Show the latitude and longitude to the nearest second of the sewage discharge point. If the sewage discharge system discharges into a drainage structure that is part of the sewage/treatment system then the outlet of the drainage structure would be the discharge point. If a system discharges into a drainage structure that is not part of the sewage/treatment system then the point where the system discharges into the drainage structure is the discharge point. (If the drainage structure is not part of the sewage/treatment system then the systems discharge will be an outlet, and the effluent limits must be met at that point.

3. List the receiving stream of the sewage discharge and continue the list to the next three downstream tributaries.

4. Enter the distance in miles (to the nearest tenth) from where the sewage system's discharge enters the receiving stream, to the mouth of that receiving stream.

5. If the sewage discharge could contain any of the substances listed in the question mark the "Yes" box, if not, mark the "No" box.

Part VII: Facility Description

A. This question addresses the buildings and number of persons the system is designed to handle. In the first row mark each box that applies. If any other buildings/activities the sewage system services mark the "Other" box and enter what it is (Coal Lab, Prep. Plant Offices and Showers, etc.). In the second row enter the number of persons, buildings and acres the system is designed to cover in the spaces provided.

Part VIII: Description of Sewage Disposal System

A. This question addresses the materials that make up the sewage collection system. List the type, size (diameter), length, joint type and ground cover along each row of the table provided. Prioritize the list first by type of pipe the by size of pipe. Below the table enter the number of manholes, cleanouts and lift stations in the spaces provided (if zero enter "0", do not leave blank).

B. This question addresses what is used to treat the raw sewage and the sizes of those units.

1. Mark the box that describes the system. If "Other" is marked specify the type in the space provided.

2. Enter the "Existing" flow the system handles (if none exists enter "NA"), and the maximum "Designed" flow.

3. List any type of pretreatment used. If none enter "NA".

4. List any type of disinfection used. If none enter "NA".

5. In the table provided enter the sizes of each unit of the sewage/treatment system. If any of the units listed are not used by the system either white out/cross out the unit or enter "NA" under size for that unit. If other units need to be added to the table do so in the spaces provided or in places where other units were taken out because of non-use.

Part VIII: Description of Sewage Disposal System (continued)

- C. This question addresses the overall view of the system and how it is connected to the serviced units, the treatment units, and the final discharge point. Provide a plan view, of a reasonable scale, showing the sewage system to include:
1. All units (buildings) being served. Label each unit (bathhouse, coal lab, prep. plant, etc.).
 2. All collection/connection lines labeled with diameter sizes.
 3. All manholes, cleanouts and/or lift stations.
 4. All treatment units of the system (aeration chambers, contact chambers, leach fields, stabilization ponds, polishing ponds, filter beds etc.) as they will be (or are) installed at the facility.
 5. Title block, scale and North arrow.

Part IX: Description of Operation and Maintenance

- A. This question addresses the certification of the actual person operating the sewage/treatment system. If the system is operated by a certified operator mark the "Yes" box and enter the classification of the operator in the space provide. If not mark the "No" box and go on to "B".
- B. Briefly describe the duties of the operator of the plant/system and how frequently it will be inspected.
- C. This question addresses the equipment used to maintain compliance of the system that is kept on hand at the facility.
- D. This question addresses the removal and disposal of excess sewage sludge. Briefly describe the procedure for removing, the storing, transporting and disposal of the sludge. Include the name and address of any landfill or disposal site used. If excess sludge removal is not applicable explain why.
- E. This question addresses the contingency plans for power failures. Describe what measures are in place, and will be taken, to insure the discharge will meet effluent limits during a power failure.

Part X: Modification of Existing Permit

This Part pertains only to applications to modify NPDES permits for sewage systems.

If this is not a modification application then mark the "NA" box and go to "Part VI"

- A. This question addresses why a modification is needed, what will be utilized as a replacement system while modification are made and the projected time schedule covering the work the required by the modification. In narrative form describe why the modification is being applied for and what will be used as a replacement system (if needed) during installation of the changes. Supply any drawings, water analysis etc. that may be needed to support the explanation. If a compliance schedule is needed to implement the modifications then include the timetable of events with this narrative. Label this narrative as "Attachment 9-V-A".

Municipal/Package Sewage Treatment Discharge Load Allocation

INSTRUCTIONS

1. If more space is needed to answer fully any questions on this application, use separate sheet. Identify each answer with the number of corresponding question.
2. As a rule, the treatment requirements are dependent on the flow and other characteristics of the immediate receiving stream. In certain cases it may be cost-effective to pipe the effluent to another stream with less stringent requirements.
3. The U.S.G.S. Topographic maps are available at most bookstores within the state, or they may be obtained by writing to: Eastern Region-Map Distribution, United States Geological Survey, 1200 South Eads Street, Arlington, Virginia 22202.
4. If the immediate receiving stream is an unnamed tributary, indicate it as such. If no stream is available, explain where the effluent will be disposed.
5. The drainage area of the watershed above the discharge point is extremely important and should be measured as precisely as possible. Incorrect values of drainage area will lead to an erroneous allocation and possible permit revocation at a later date.
6. The design criteria to calculate the flow/person/day can be obtained from pamphlet EG-6, "Permit Procedure and Design Requirements for Small Sewage and Water Systems", Division of Sanitary Engineering, West Virginia Department of Health, Charleston, West Virginia. If the design criteria used is different from the one specified by the Department of Health, attached an explanation for the difference.

CONDITIONS

In establishing the above allocations, the engineer and/or applicant is cautioned that:

- I. The allocation is based on current conditions and should be reaffirmed after a lapse of six (6) months.
- II. The allocation does not relieve discharger(s) from meeting the Water Quality Standards established for the receiving waters.
- III. Advance approval is not intended for treatment facilities as a result of this allocation.
- IV. Application for appropriate permits is required and compliance with all applicable State Laws, rules and regulations pertaining to wastewater collection and treatment facilities is mandatory.
- V. Should the review of the application for a package plant discharge indicate that the area may be serviceable by a proposed municipal or PSD system, the above allocation may be considered temporary and valid only until the connection to the public facility is feasible.

MR-5 INSTRUCTIONS

MODULE 10

THE APPLICANT MUST SUBMIT A JOINT ARTICLE 3 or 4 / NPDES PERMIT APPLICATION BEFORE THEY CAN REFERENCE ANY MATERIALS AS BEING FOUND IN THE ARTICLE 3 or 4 APPLICATION. ALL MATERIALS REFERENCED MUST BE IN THE JOINT ARTICLE 3 or 4/NPDES APPLICATION SUBMITTED, NOT IN PREVIOUSLY SUBMITTED APPLICATIONS

Module 10: Underground Disposal

This Module is only need be completed and submitted with applications involving any type of Underground disposal of material. Excerpts from this module may be required to be addressed in modifications or transfers also if they are effected by those applications.

NPDES PERMIT # BOX

Use the NPDES permit number for which the "Module 10" is being submitted.

Part I: Material Type & Location

A. This question addresses any underground works that will have materials deposited in them at or from this facility. In each column provide the information requested on the underground mine(s). At a minimum provide:

1. The type of material to be deposited,
2. Mine name and all known identification numbers,
3. The mines operational status (and date of abandonment if known).

Part II: Approvals

A. This question addresses the safety requirements under the Office of Miner's Health, Safety and Training for disposal or material into an underground mine. If the underground works are totally abandoned and no personnel will be entering the mine (only equipment and discharge) then approval is not be needed. If the mine is not totally abandoned or if any personnel will be entering the mine for any reason then approval will be required. Contact the Office of Miner's Health, Safety and Training and discuss the operation with them and then mark the appropriate box.

B. These questions address others that may be affected by any underground disposal. (1) This question addresses the active/inactive permittee(s) of the mine(s) being disposed into (if there are none mark the "N/A" box). (2) This question addresses the mineral owner(s) of the mine(s) being disposed into. (3) This question addresses the surface owner(s) where any discharge, from the mine(s) being disposed into, may occur. If the "Yes" box is marked provide proof of approval by the permittee or owning entities. If the "No" is marked provide proof of notification of the owners via registered mail. The owners shown must correspond to the owners shown on the "Exhibit 1-VI-A or 8-II-A" map.

C. This question addresses the need for valid Underground Injection Control (UIC) permits before material is injected underground. An application must have been submitted for approval to WVDEP for a UIC permit before the NPDES permit can be approved. If the "No" box is marked provide the date (MM/DD/YY) the UIC permit was applied for. If covered by a valid UIC permit issued by the WVDEP insure the permit No., issuance date and the expiration date are properly listed in Module 1, part IV.

Part III: Map Requirements

A. This addresses a map showing how the materials will be injected and contained within the deep mine works. Provide a map of a scale that can clearly show the requirements listed. The entire deep mine must be shown on the map as well as all possible points in the mine where the material or effluent may enter or discharge. The strike, dip, coal contours etc. are to be used to show the flow of the effluent through the mine.

Part IV: Maintenance

A. This question addresses the maintenance and monitoring procedures of the disposal system. Address the surface maintenance and monitoring procedures to be used to insure the material being disposed of underground will not pollute the surface and ground waters. Address things like monitoring and emergency shut off of slurry lines due to a rupture, the monitoring of the effluent from the mine, containment for ruptured pump lines, etc.

Part V: Effects of Disposal

- A.** This question addresses if the underground works discharge to the waters of the state. If there is a discharge samples should be taken to show the water quality prior to materials being disposed of. Samples of discharges prior to any disposal should be addressed in "Module 3, Part III" and the coordinates should be shown in "Module 2, Part I".
- B.** This question addresses the effect the disposal will have on the groundwater. Describe the quality of the mine water after the material is disposed of in the mine and what effect that will have on the groundwater.

MR-5 INSTRUCTIONS MODULE 11

THE APPLICANT MUST SUBMIT A JOINT ARTICLE 3 or 4 / NPDES PERMIT APPLICATION BEFORE THEY CAN REFERENCE ANY MATERIALS AS BEING FOUND IN THE ARTICLE 3 or 4 APPLICATION. ALL MATERIALS REFERENCED MUST BE IN THE JOINT ARTICLE 3 or 4/NPDES APPLICATION SUBMITTED, NOT IN PREVIOUSLY SUBMITTED APPLICATIONS

Module 11: Modifications

This module is to be completed and submitted for applications requesting modification to valid NPDES permits. This module is not used when modifications are submitted with a reissuance application or for transfer modifications. Excerpts from other modules may be (and usually are) required to be addressed/included with this module for modifications if the information in them is effected by the modification being requested.

Top of Page

Box 1, NPDES Permit # Enter the valid WVNPDES permit number for which the modification is being requested.

Box 2, Modification # Enter the number of modification applications this application will make to the WVNPDES permit since it was originally issued to the original permittee. Changes/modifications submitted with reissuance and transfer modifications would not be counted for this number, but modification applications submitted and then later withdrawn or denied would be counted. If not sure, check with the NPDES permit writer at the regional WVDEP office.

Heading Information

Row 1, Box 1 Enter WVDEP regional office number.

Row 1, Box 2 Enter initial date the application is submitted, and also include any additional dates after the initial submittal that the application is resubmitted for review by WVDEP.

Row 2, Box 1 Enter the issuance or last reissuance date of the NPDES permit.

Row 2, Box 2 Enter the required reissuance filing date for the NPDES permit (It is required to be received in the WVDEP regional office 120 or more calendar days before the expiration date).

Part I: Applicant Information

A. The applicant must be the entity that is shown on the face of the valid NPDES permit that was last issued. Fill in the Applicant's information in the spaces provided (if Mailing Address is P.O. address include Street Address also).

Part II: Modification Category

A. Mark the appropriate box(es) that represent the type of modification(s) being requested in this application. For each box marked complete the section of the regulations that covers the type of modification being requested. For example if a modification to delete an outlet were submitted, mark the first box and enter a "6" in the blank, if submitting a modification to add a deep mine outlet mark the second box and enter a "1" in the blank, likewise if both were to be done mark both boxes and enter the appropriate numbers in the blanks.

Minor Mod. If the proposed modification is only to transfer the ownership/liability of the WVNPDES permit then use Module 12 only and not Module 11.

Major Mod. If the requested modification is in the "Major Mod." category include a Class I Legal Ad with a location map. The location map must be of a scale no greater than 1 inch equaling 1 mile, and a minimum of four (4) inches by four (4) inches in size. See MR.-5, Advertisement Instructions.

Part III: Description

A. In general terms describe what is being requested in this modification application. Example: Move outlets 002, 006, 008 & 011; Add outlets 015 & 016; Add Art. 3 permit U-3001-97; Acquire post mining limits for outlets 001 & 003; Abandon Art. 3 permit S-10-85 & UO-645; Delete coverage of Art. 3 permit S-2-85; Delete outlets 004 & 005

Part IV: Required Additional Information

A. This question addresses the support information for the modifications being requested. If adding a new operation to the permit insure that all required modules for that operation are submitted, or if those modules were submitted in a previous application insure any changes or additions to those modules are submitted with this application. Review the modules in the NPDES permit application and if this modification effects any of those questions in any of the modules address those changes by module, part and section. For example if outlet 003 were to move, Module 1 Part VI-A (The Exhibit 1-VI-A Map), Module 2 Part I-A (Lat., Long, Elev.), and Module 7 Part I-A (Drainage structure design) would all be effected. This should be addressed in the following format:

START OF EXAMPLE

ATTACHMENT 11-IV-A

Module 1

Part VI: Map or Drawing

A. See revised Exhibit 1-VI-A Map

Module 2

Part I: Location and Watershed Data

A. the new coordinates for outlet 003 are as follows:

| Station Type | Station No. | Latitude | | | Longitude | | | Mile Point | Elevation | |
|--------------|-------------|----------|------|------|-----------|------|------|------------|-----------|--------|
| | | Deg. | Min. | Sec. | Deg. | Min. | Sec. | | Surface | Bottom |
| Outlet | 003 | 37 | 38 | 50 | 81 | 14 | 11 | N/A | 1875 | N/A |

Module 7

Part I: Physical Treatment

A. See Article 3 permit S-3001-97, Revision # 2, Pond #3 construction specifications and plans.

OR

A. See the attached construction specifications and plans for Pond #3, originally submitted with Revision # 2 to Article 3 permit # S-3001-97.

(If the application is a joint Art 3 or 4 /NPDES application information in the Art 3/4 section can be referenced. If the application is not a joint application then the construction specifications and plans must be included in the application)

END OF EXAMPLE

Part V: Applicant Certification

A. The application must be certified in accordance with title 47, Series 30, Section 4.7.1 of the WV NPDES regulations, and the signature must be dated and notarized. If the application is corrected or changed after initial submission it must include an updated certification when resubmitted for review. Authorized signatures for each type of applicant ownership include:

OWNERSHIP TYPE

Corporation

Partnership

Sole Proprietorship

AUTHORIZED SIGNATURES

President, Secretary, Treasure, Vice-President, or any other person performing similar policy or decision-making functions for the corporation, or Manager of facilities employing more than 250 persons or have gross annual sales or expenditures exceeding \$25,000,000 (in 2nd Qrt. 1980 dollars), if authority to sign documents has been granted to the manager by the corporation.

General Partner

Proprietor

For signatures other than principle officers, partners, or sole proprietors appropriate documentation granting or verifying such signatory authority must be included with the application.

MR-5 INSTRUCTIONS MODULE 12

THE APPLICANT MUST SUBMIT A JOINT ARTICLE 3 OR 4 / NPDES PERMIT APPLICATION BEFORE THEY CAN REFERENCE ANY MATERIALS AS BEING FOUND IN THE ARTICLE 3 OR 4 APPLICATION. ALL MATERIALS REFERENCED MUST BE IN THE JOINT ARTICLE 3 OR 4/NPDES APPLICATION SUBMITTED, NOT IN PREVIOUSLY SUBMITTED APPLICATIONS

Module 12: Transfer Modification Form

This module is to be completed and submitted for applications requesting transfer of ownership and liability of valid NPDES permits. This module is not used when transfer of ownership is submitted with a reissuance application. Other modules may be required to be addressed/included with this module if the transfer being requested effects the information in them.

Top of Page

Box 1, NPDES Permit # Enter the valid WVNPDES permit number for which the modification is being requested.

Heading Information

Row 1, Box 1 Enter WVDEP regional office number.

Row 1, Box 2 Enter initial date the application is submitted, and also include any additional dates after the initial submittal that the application is resubmitted for review by WVDEP.

Row 2, Box 1 Enter the issuance or last reissuance date of the NPDES permit.

Row 2, Box 2 Enter the required reissuance filing date for the NPDES permit (It is required to be received in the WVDEP regional office 120 or more calendar days before the expiration date).

Row 3, Transfer Number Enter the number of ownership transfer applications that this application will make for the WVNPDES permit since the original issuance. Transfers of ownership done at reissuance are to be counted for this number, as well as transfer applications submitted and then later withdrawn or denied would be counted. If not sure check with the NPDES permit writer at the regional WVDEP office.

Part I: Applicant (Transferee) Information

A. The applicant shall be the entity that is requesting the NPDES permit be transferred into their name and should be the same entity that owns, or is applying to own, the Article 3 or 4 permit(s) or other operations to be covered by this application. This is the new name the NPDES permit will be issued in. Fill in the Applicant's information in the spaces provided (*if Mailing Address is P.O. address include Street Address also*).

B. Mark an "X" in the box that describes the type of ownership of the APPLICANT.

Part II: Current Owner (Transferor) Information

A. The current owner is the entity that the NPDES permit is currently issued in, and is wanting the NPDES permit transferred out of their name. Fill in the current owner's information in the spaces provided (*if Mailing Address is P.O. address include Street Address also*).

B. Mark an "X" in the box that describes the type of ownership of the APPLICANT.

Part III: Transfers and Additional Responsibilities

A. These questions address the designation of responsibility for: (a) flows onto or through this permit from other permits, (b) discharges off of this permit and through other permits, and (c) discharges from Art. 3 or 4 permits that do not have the same owner/operator as this permit, and (d) the Groundwater Protection Plan (GPP).

Part III: Transfers and Additional Responsibilities (cont.)

1. Include a Module 1R with this application if any of the following situations exist with the Art. 3 permit(s), other contributing operations or this NPDES permit.

- (a) flow off of this NPDES permit or any of its associated Article 3 or 4 permits is propose to contribute flow onto another NPDES permit for final discharge to a receiving stream,
- (b) flow from another NPDES permit, or any Article 3 or 4 permits not associated with this NPDES permit, is propose to contribute to an outlet of this NPDES permit,
- (c) propose to allow Article 3 or 4 permits (or other operations) that are not permitted (or owned) by the applicant to contribute flow to any outlet associate with this NPDES permit.

2. If the applicant intends to use the Groundwater Protection Plan (GPP) that the current permittee is using they need to insure the commitment of funds and liability for the plan is transferred to the applicant. This should be done in the same application as the NPDES transfer by completing a "MR-5GT" Groundwater Protection Plan transfer form. If the applicant does not intend to adopt the current GPP with the NPDES transfer then the applicant must submit a GPP to the regional office before the NPDES transfer will be approved.

PART IV: Facility Information

A. Enter the name of the mine(s) or complex.

Enter the mailing address as in Part I-A (if the address is the same as in Part I-A just enter "SEE PART I-A").

Enter all counties in which the facility is located.

Enter the nearest post office based on straight-line distance from the center of the surface disturbance.

On the two lines under "Physical Location" enter a description of how to get to the facility and where it is located. Start at the nearest town (*must be found on the county road map or USGS topographic map*) to the access road entrance, then use the route number(s) from the nearest town with a compass direction and distance until the entrance to the facilities access road is reached. In addition state the name of the hollow, stream or mountain on which the facility is located. If the permit covers a complex of several mines/sites then the directions should be to the main mine field office for the complex. (Example: From Ciro, Rt.4 S. 1.2 miles to Rt. 4/20 E. 5 miles to access rd. The site is located up Bowyer Creek on Trace Ridge)

Facility Contact must be an employee of the applicant, and must be thoroughly familiar with the operation of the facility, such as chief engineer, plant manager, superintendent, etc., but not a consultant. Include the title and phone number of the Facility Contact also.

PART V: Environmental Permits

A. Enter the permit/ID number, date of issuance and expiration date of all environmental permits required for the operation of this facility in the table provided. Address all of the preprinted permits at a minimum by entering complete data or entering "N/A" in the "Permit or ID Number" column.

If the applicant is accepting responsibility for some or all of the discharge from an Article 3 or 4 permit or other operations that (a) is not owned by the applicant, (b) is not fully covered by this application, then enter the appropriate identification number followed by "/R" (Example: S-40021-94/R, Q-1024-86/R, Quincy Siding /R) and the dates. Likewise if someone else is accepting responsibility for some of the discharge from operations of the applicant that are covered by this application, then enter that NPDES permit number followed by "/R" (Example: WV1010345/R) and the dates. If either of these situations exist a "Module 1R" signed by the party responsible for the final outlet must be included with the application.

Part VI: Certifications of Transfer

A. This part of the application shows who is transferring the NPDES permit, who is accepting the terms and liabilities of the permit and the effective date of the transfer.

1. In the first space provided enter the NPDES permit number being transferred.
2. In the second space provide enter the name of the current/existing permittee.
3. In the third space provided enter the name of the applicant.
4. In the forth space provided enter the date both parties agree the transfer of liability will become effective (upon approval by WVDEP). If a specific date is not required, then enter "N/A" in the space and the effective date of the transfer will be the date the transfer is approved by WVDEP.

Part VI: Certifications of Transfer (cont.)

6. Both the applicant and the current permittee in accordance with Title 47, Series 30, Section 4.7.1 of the WV NPDES regulations must certify the application, and the signatures must be dated and notarized. If the application is corrected or changed after initial submission it must include an updated certification when resubmitted for review.

Authorized signatures for each type of applicant ownership include:

OWNERSHIP TYPE

AUTHORIZED SIGNATURES

Corporation

President, Secretary, Treasure, Vice-President, or any other person performing similar policy or decision-making functions for the corporation, or Manager of facilities employing more than 250 persons or have gross annual sales or expenditures exceeding \$25,000,000 (in 2nd Qrt. 1980 dollars), if authority to sign documents has been granted to the manager by the corporation.

Partnership

General Partner

Sole Proprietorship

Proprietor

For signatures other than principle officers, partners, or sole proprietors appropriate documentation granting or verifying such signatory authority must be included with the application.

MR-5 INSTRUCTIONS MODULE 13

THE APPLICANT MUST SUBMIT A JOINT ARTICLE 3 or 4 / NPDES PERMIT APPLICATION BEFORE THEY CAN REFERENCE ANY MATERIALS AS BEING FOUND IN THE ARTICLE 3 or 4 APPLICATION. ALL MATERIALS REFERENCED MUST BE IN THE JOINT ARTICLE 3 or 4/NPDES APPLICATION SUBMITTED, NOT IN PREVIOUSLY SUBMITTED APPLICATIONS

Module 13: Remining

This Module is to be completed and submitted with all applications requesting initial coverage or abandonment for any type of remining outlets under the CWA Sec. 301(p). Excerpts from this module may be required to be addressed in reissuances, modifications or transfers also if they are affected by those applications.

NPDES PERMIT # BOX

Use the NPDES permit number for which the "Module 13" is being submitted.

Part I: Baseline Sampling Data

A. This question addresses data on the actual discharges generated from areas that meet the requirements of CWA Sec. 301(p) (mined prior to August 3, 1977) for remining. For each discharge point that currently exists in the remining area samples must be taken and analyzed. Sample points should be established at convenient locations as near to the source as possible. Where flows from multiple discharges converge at convenient sampling points, sampling and analysis of their composite discharge may be appropriate. The sampling must occur over a period of twelve (12) consecutive months, at a minimum, with samples being taken twice monthly at regular intervals. The samples must be analyzed, at a minimum, for the following parameters: Flow (in GPM), Total Iron (in mg/l), Total Manganese (in mg/l), Total Hot Acidity as CaCO₃ (in mg/l), Alkalinity as CaCO₃ (in mg/l), pH (in std. units), Sulfates as SO₄ (in mg/l), Total Aluminum (in mg/l), Dissolved Solids (in mg/l) and Specific Conductance (in μhos/cm). A minimum of twenty-four consecutive semi-monthly baseline samples and their analyses are required for each discharge to calculate re-mining limits and loading limits for release. Provide a separate "Table 13-I-A" for each pre-existing discharge from the remining area.

Table 13-I-A Provide a separate "Table 13-I-A" for each pre-existing discharge point sampled. In the spaces provided at the top of the table provide the month and the year the sampling started and ended. Under the "Date" in the "Month" column enter the three letter abbreviation of the month for the two days samples were taken that month. Enter all other information for each sample across the table starting with the day of the month in the "Day" column, followed across the table by the results of the analysis for that sample. If more than twelve months of samples are submitted either extend the table at the bottom or use additional tables for the same point. If more than one table is used for the same point insure the dates at the top included the entire sampling period, not just what is shown on the table, and the "Additional tables used for this site" box is marked at the top.

B. This question addresses data on the streams that receive the discharges addressed in section "A" above. An up-stream and a down-stream monitoring station must be established on the immediate receiving stream for each sampling point established in section "A" above. The two in-stream monitoring stations should be established as close to where the receiving stream and the discharge converge as possible but not so close as to allow influence of the up-stream station or not allow proper mixing prior to the down-stream station. The sampling must occur over a period of twelve (12) consecutive months, at a minimum, with samples being taken twice monthly at regular intervals and on the same days as the contributing discharge points. The samples must be analyzed, at a minimum, for the following parameters: Flow (in GPM), Total Iron (in mg/l), Total Manganese (in mg/l), Total Hot Acidity as CaCO₃ (in mg/l), Alkalinity as CaCO₃ (in mg/l), pH (in std. units), Sulfates as SO₄ (in mg/l), Total Aluminum (in mg/l), Dissolved Solids (in mg/l) and Specific Conductance (in μhos/cm). A minimum of twenty four consecutive semi-monthly baseline samples and their analyses are required for each discharge to calculate re-mining limits and loading limits for release. This information for each in-stream monitoring point is to be provided on a "Table 13-I-B".

Table 13-I-B Provide a separate "Table 13-I-B" for each up-stream and each down-stream monitoring point established on the receiving streams. In the spaces provided at the top of the table provide the month and the year the sampling provide started and ended. Under the "Date" in the "Month" column enter the three letter abbreviation of the month for the two days samples were taken that month. Enter all other information for each sample across the table starting with the day of the month in the "Day" column, followed across the table by the results of the analysis for that sample. If more than twelve months of samples are submitted either extend the table at the bottom or use additional tables for the same point. If more than one table is used for the same point insure the dates at the top included the entire sampling period, not just what is shown on the table, and the "Additional tables used for this site" box is marked at the top.

Part I: Baseline Sampling Data (Continued)

C. This question addresses the loading shown by the data collected on both the discharge points in section "A" and the in-stream monitoring stations in section "B" above. For each "Table 13-I-A or B" provide a separate "Table 13-I-C" showing the loading at the sampling point for the following parameters: Total Iron (in lbs/day), Total Manganese (in lbs/day), Total Hot Acidity as CaCO₃ (in lbs/day). The equation to be used for calculating loading will be as follows:
 (GPM) X (mg/l) X (.01202) = (lb/day)

"Flow (in GPM) times Concentration (in mg/l) times Conversion Factor (.01202) equals Pounds Per Day".

Table 13-I-C Provide a separate "Table 13-I-C" for each pre-existing discharge point, each up-stream monitoring station and each down-stream monitoring station. In other words for each "Table 13-I-A" and/or "Table 13-I-B" submitted complete a "Table 13-I-C". In the spaces provided at the top of the table provide the month and the year the sampling provided started and ended. The analysis provided for each site must be separated into two groups, the samples taken in the Winter/Spring Season (Nov - Apr), and the ones taken in the Summer /Fall Season (May - Oct). Once the samples are grouped by season the loading in pounds per day must be calculated for each sample. Then, after calculating, separate the loading the information by parameter and put in descending order based on the loading of that parameter only for that season only. For each parameter of each sample enter the month and day of the sample, the flow and the calculated pounds per day of the sample across the table in the columns provided for that parameter. If more than twelve months of samples are submitted, either extend the table at the bottom of each season as necessary or use additional tables for the same point. If more than one table is used for the same point insure, (1) the dates at the top included the entire sampling period not just what is shown on the table, (2) that seasonal samples are listed together in descending order, (3) the "Additional tables used for this site" box is marked at the top.

Part II: Qualification Information

A. This question asks to provide a demonstration that the proposed remining site is located on a site on which coal mining was conducted prior to August 3, 1977. This type proof may be established different ways is VER in the Article 3 permits. Some of the ways to provide this proof are, but not limited to, the following:

1. USGS Topographic Maps that show the mining area disturbed prior to 1977
2. Legal documents (UMW contracts, court cases, injunctions, etc.)
3. Officially filed maps and/or paperwork filed with state or federal agencies

Part III: Abatement plans

A. Briefly describe in narrative form the different types of abatement actions considered at the remining site, and why the action proposed was chosen above the others.

B. Provide the details of the remining plan chosen and why upon completion of the remining this plan will result in an improvement of water quality in the receiving stream.

Part IV: Daily Max. and Monthly Average Limits

A. Using the data provided in "Part I-C", calculate the "Daily Max." and "Monthly Average" Best Professional Judgment (BPJ) loading limits for total iron, manganese, and hot total acidity for each remining outlet proposed. The "Daily Max." is used for year round compliance and derived by using all of the data collected for a particular parameter for that site. There are two "Monthly Averages" used for compliance based on seasonal data, and are derived by using data collected only during that particular season. Use the following to calculate the "Daily Max." and "Monthly Average" limits.

Daily Max Limit The daily max limit applies to hot total acidity and total iron and manganese loading rates (lbs/day) and is derived by arranging the values for each parameter in descending order from highest to lowest, and discarding the two highest values. The remaining highest value then becomes the "Daily Max Limit" for that parameter. If more than 24 samples are taken, the top five percent of the values are discarded with the next highest value becoming the "Daily Max Limit". Through this process the "Daily Max Limit" will include 90% to 95% of the values for each parameter.

EXAMPLE I: 24 samples for manganese were taken and analyzed (use all data for all three parameters, for each site). First arrange the analysis results in descending order, discard the highest two values, 38.65 and 36.04 (1Jul and 15Aug), leaving 35.17 lbs/day (15Jul) as the "Daily Max."

| | | | | | | | | | | | | |
|----------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|
| MONTH | 1Jul | 15Aug | 15Jul | 1Mar | 15Nov | 15Mar | 1Jan | 1Dec | 15Dec | 1Oct | 15Sep | 1Aug |
| ANALYSIS | 38.65 | 36.04 | 35.17 | 34.22 | 33.78 | 28.45 | 27.70 | 26.60 | 24.43 | 24.32 | 22.22 | 21.19 |
| MONTH | 15May | 1Jun | 1May | 1Nov | 15Apr | 1Apr | 15Jun | 15Oct | 15Jan | 1Sep | 1Feb | 15Feb |
| ANALYSIS | 20.80 | 19.44 | 18.56 | 17.84 | 17.66 | 17.09 | 16.21 | 16.11 | 15.78 | 14.95 | 14.69 | 10.99 |

Part IV: Daily Max. and Monthly Average Limits (Continued)

A. Daily Max

EXAMPLE II: 28 samples for manganese were taken and analyzed (use all data for all three parameters, for each site). First arrange the analysis results in descending order, discard the highest five percent ($28 \times 0.05 = 1.4$ always round up to next whole number = 2) 38.65 and 36.04 (1Jul and 15Aug), leaving 35.17 lbs/day (15Jul) as the "Daily Max."

| | | | | | | | | | | | | |
|----------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|
| MONTH | 1Jul | 15Aug | 15Jul | 1Mar | 15Nov | 15Mar | 1Jan | 1Dec | 15Dec | 1Oct | 15Sep | 1Aug |
| ANALYSIS | 38.65 | 36.04 | 35.17 | 34.22 | 33.78 | 28.45 | 27.70 | 26.60 | 24.43 | 24.32 | 22.22 | 21.19 |
| MONTH | 15May | 1Jun | 15Feb | 1Nov | 15Apr | 1Mar | 15Jun | 15Oct | 15Jan | 1Sep | 1Feb | 15Feb |
| ANALYSIS | 20.80 | 19.44 | 19.36 | 18.56 | 17.84 | 17.76 | 17.66 | 17.09 | 17.08 | 16.21 | 16.11 | 16.04 |
| MONTH | 1Jan | 15Jan | 1Feb | 1Apr | | | | | | | | |
| ANALYSIS | 15.78 | 14.95 | 14.69 | 10.99 | | | | | | | | |

Monthly Average Limit Due to seasonal variability in flows and concentrations the monthly average limit will consist of two values - one for the summer/fall season (May to October) and one for the winter/ spring season (November to April). The "Monthly Average Limit" for hot total acidity an total iron and manganese is established for each season as follows: The median of the loading rates (lbs/day) of acidity, iron, and manganese is derived by arranging the analytical data for each parameter in order of descending value (highest to lowest), and thereby ranking the values from one to the highest number of samples collected and analyzed. The median is determined by selecting the midpoint of the ranking. Where even numbers of values are encountered, the two central values are averaged. The monthly average limit is the median plus ten percent ($Med. + (Med. \times 0.1)$)

EXAMPLE I: 12 samples for manganese were taken and analyzed in the Winter/Spring season (Nov. to Apr.) First arrange the analysis results in descending order (for all three parameters parameter, for each site, for each season). Find the median, then compute the Monthly Average using the equation "Monthly Av. = $(Med. + (Med. \times 0.1))$ ".

| | | | | | | | | | | | | |
|----------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|
| MONTH | 1Nov | 15Apr | 1Apr | 1Mar | 15Nov | 15Mar | 1Jan | 1Dec | 15Dec | 15Jan | 1Feb | 15Feb |
| ANALYSIS | 28.45 | 27.70 | 26.60 | 24.43 | 24.32 | 22.22 | 19.44 | 18.56 | 17.84 | 17.66 | 17.09 | 16.21 |

$$\text{Median} = (15Mar + 1Jan) \div 2 = (22.22 + 19.44) \div 2 = 20.83$$

$$\text{Monthly Average Limit} = (20.83 + (20.83 \times 0.1)) = (20.83 + 2.08) = \underline{22.91 \text{ lbs/day}}$$

EXAMPLE II: 24 samples for manganese were taken and analyzed in the Winter/Spring season (Nov. to Apr.) First arrange the analysis results in descending order (for all three parameters, for each site, for each season). Find the median, then compute the Monthly Average using the equation "Monthly Av. = $(Med. + (Med. \times 0.1))$ ".

| | | | | | | | | | | | | |
|----------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|
| MONTH | 1Nov | 15Apr | 15Nov | 1Mar | 15Nov | 15Mar | 1Jan | 1Dec | 15Dec | 15Feb | 15Dec | 1Dec |
| ANALYSIS | 28.45 | 27.70 | 27.66 | 26.98 | 26.60 | 25.43 | 25.01 | 24.67 | 24.32 | 22.22 | 22.18 | 21.50 |
| MONTH | 1Jan | 1Feb | 15Jan | 1Nov | 15Apr | 1Apr | 15Mar | 1Apr | 15Jan | 1Mar | 1Feb | 15Feb |
| ANALYSIS | 19.44 | 18.56 | 18.30 | 17.99 | 17.84 | 17.66 | 17.54 | 17.09 | 16.39 | 16.21 | 14.67 | 10.93 |

$$\text{Median} = (1Dec + 1Jan) \div 2 = (21.50 + 19.44) \div 2 = 20.47$$

$$\text{Monthly Average Limit} = (20.47 + (20.47 \times 0.1)) = (20.47 + 2.05) = \underline{22.52 \text{ lbs/day}}$$

Part V: Trend Line Monitoring Limit

A This question addresses the monitoring limits for hot acidity of the raw water (waters not chemically treated) generated from the remaining area during mining. This limit triggers a need to possibly revise the abatement plan that is currently being followed. The "Trend Line Monitoring Limit" will apply to loading rates of hot acidity only and will be the mean (average) of the cumulative baseline sampling data from the watershed of each drainage control discharge point. In short add all the loads from the pre-existing discharges contributing to an outlet and divide by the number of days they were sampled. All pre-existing discharge points contributing to the same outlet must have been sampled on the same day, and only the days where all contributing pre-existing discharges were sampled may be used to calculate the "Trend Line Monitoring Limit".

Part VI: Bond Release Limit

A This question addresses the amount of loading the reclaimed remaining operation can contribute to the receiving stream and still obtain bond release. The "Bond Release Limit" is derived by calculating the cumulative loading rate in tons per year of hot acidity, iron and manganese from each concentration value and flow rate in the baseline data for the entire remaining area. The cumulative loading rates for each parameter are summed and divided by the number of samples analyzed. This number is multiplied by 365 to establish the annual cumulative baseline loading rate for each parameter.

Part VII: Receiving Stream Information

A This question addresses part of the requirements of the Environmental Quality Board has for granting a variance of effluent limits. Provide the following :

- 1) the name of the receiving stream,
- 2) the location (county, district, and start & end mile pts.) of the section of the receiving stream that will be affected by the remaining operation
- 3) the alphanumeric code given by WVDNR for the receiving stream and briefly discussed in Title 46, Series 1, Section 7.1 (the codes can be requested with the instructions in either hard copy or on disk from DEP)
- 4) the designated use of the receiving stream as defined by Title 46, Series 1, Section 6. (most streams have more than one use category; include all that apply with a minimum of categories B & C)

Part VIII: Water Quality Variance

A This question addresses the current water quality of the receiving stream(s). Based on the in-stream monitoring data provided in "Part I-B" provide the minimum, the average and the maximum numeric water quality for the receiving stream. Include these three values for each parameter (iron, manganese, and pH), for each receiving stream effected by the remaining operation. The data used for the values should be from the downstream monitoring station that best represents the section of the stream that will be effected.

B This question addresses the alternative water quality standards being requested from the Environmental Quality Board for the receiving stream. Enter the water quality standards (limits) that is felt are needed to remine the area and obtain bond release from the site. Remember these are in-stream water quality standards being requested to receive a wavier from the board for, not effluent limits from an outlet (unless it is an in-stream outlet).

C. In the space provided give a brief description of how the proposed water quality standards (limits) requested in "Part VIII; Section B" above were arrived at. If the applicant used modeling to determine the standards then provide a description of the model used and how the results were interpreted. If additional space is needed label the attachment as "Attachment 13-VIII-B"

MR-5 INSTRUCTIONS MODULE 14

THE APPLICANT MUST SUBMIT A JOINT ARTICLE 3 or 4/ NPDES PERMIT APPLICATION BEFORE THEY CAN REFERENCE ANY MATERIALS AS BEING FOUND IN THE ARTICLE 3 or 4 APPLICATION. ALL MATERIALS REFERENCED MUST BE IN THE JOINT ARTICLE 3 or 4/NPDES APPLICATION SUBMITTED, NOT IN PREVIOUSLY SUBMITTED APPLICATIONS

Module 14: Article 12 - Groundwater Protection Plan

This Module is to be completed and submitted with all applications for new, or the reissuance of, NPDES permits. It is also required from any entity that may enter upon, or conduct work at, the facility that is not covered by another GPP for the facility. Excerpts from this module may be required to be addressed in modifications or transfers also if they are effected by those applications.

GENERAL INSTRUCTIONS:

1. DEP realizes that a GPP will change as the facility changes, but requires the GPP to be updated at the site as the changes occur. Formal approval will only be required at issuance, reissuance or upon the request of the director.

2. All sites with a single container capable of holding 660 gallons or more (that are not exempt as mobile containers) must have secondary containment of one hundred twenty-five (125) percent. If several smaller containers add up to 660 gallons or more secondary containment is not required.

3. Exempt containers are mobile containers mounted on rubber tired vehicles.

NPDES PERMIT # BOX

Use the NPDES permit number for which the "Module 14" is being submitted.

Part I: Applicant Owner (Operator) Information

A. The applicant shall be the entity that is to commit the resources to insuring the GPP is complied with. This is the name the permit will be issued to. Fill in the Applicant's information in the spaces provided (*if Mailing Address is P.O. address include Street Address also*).

Part II: Facility Information

A. Enter the name of the mine(s) or complex.
Enter the mailing address as in Part I-A (if the address is the same as in Part I-A just enter "SEE PART I-A").
Enter all counties in which the facility is located.
Enter the nearest post office based on straight-line distance from the center of the surface disturbance.
On the two lines under "Physical Location" enter a description of how to get to the facility and where it is located. Start at the nearest town (*must be found on the county road map or USGS topographic map*) to the access road entrance, then use the route number(s) from the nearest town with a compass direction and distance until the entrance to the facilities access road is reached. In addition state the name of the hollow, stream or mountain on which the facility is located. If the permit covers a complex of several mines/sites then the directions should be to the main mine field office for the complex. (Example: From Ciro, Rt.4 S. 1.2 miles to Rt. 4/20 E. 5 miles to access rd. The site is located up Bowyer Creek on Trace Ridge)

Enter the Article 3 and 4 permits this GPP will cover.

Enter the Article 11 permits this GPP will cover.

Facility Contact must be an employee of the applicant, and must be thoroughly familiar with the operation of the facility, not a consultant. This person will be the one to insure the GPP is followed (spill coordinator). Include the title and phone number of the Facility Contact also.

Part III: Inventory of Manmade Potential Contaminants

A. This question is to insure the applicant addresses all manmade potential groundwater contaminants in the Groundwater Protection Plan (GPP). In "Table 14-III-A" list all potential groundwater contaminants, by container and operation, that are or will be found at the facility. For example there may be five different areas where equipment is refueled with diesel fuel, each site should be addressed separately. There may be a 350 gal tank at the scale house, a 1,000 gal tank at the staging area, another rubber tired refueler at the shop and two more on skids up on the strip bench, each needs to be addressed. For each site or operation where the contaminant will be found include the following information:

1. State if the operation/activity involved in is exempt or not and give a brief description of the potential contaminant/site (*Ex: Exempt: Stockton bench rubber tired refueler diesel tank; or Non-exempt: Heating oil tank for office building; etc.*).
2. The specific type of potential contaminant (*Ex: Diesel Fuel, Ammonium Nitrate, Caustic Soda*),
3. The type of container or storage system use at the site and their volume (*Ex: 750 gal single wall steel tank on skids; 10 - 55 gal. steel drums; etc.*),
4. The existing protective controls for the contaminant/site (*Ex: 110 cuft of secondary containment by earthen dike lined with clay, containment barrels with oil absorbent materials for minor spills during fueling*),
5. Any proposed protective controls with a projected installation date (*Ex: A secondary containment of 114 cuft consisting of a concrete pad with block walls, sealed against leakage, is to be installed by 1 August, 1997*)

Part IV: Spill Response Plan

A. This section addresses the actions the applicant will take to minimize any damage from leaks/spills of contaminants at the facility. Each type of contaminant (i.e.: diesel fuel, ammonium nitrate, caustic soda, etc.) on the facility should be addressed by each different type of containment system and by the potential size of leaks/spills that could occur. There may in reality be several parts to the "Spill Response Plans" in the GPP for a facility based on the different types of potential contaminants that could be found on the facility and what it takes to clean up a spill from it. The following items must be addressed at a minimum:

1. The types of immediate action that will be taken by the person finding the leak/spill to prevent further contamination? This is to included things like who they contact, the actions taken to stop any further leakage/spillage, the materials that will be on hand at the site for clean up, emergency numbers they should contact, how the clean up material will be handled, any safety precautions that should be followed when dealing with the contaminant, as well as any other information that would be helpful.
2. The person to whom all leaks/spills are reported to and is responsible for insuring the GPP is followed (spill coordinator). This person will insure the GPP is updated as the contaminants change at the facility, and is to be thoroughly familiar with all aspects the spill prevention plan. Use a position or title like foreman or superintendent instead of a name.
3. Discuss the procedures the spill coordinator will follow when contacted about a leak/spill. Give procedures and or duties of the spill coordinator for each type of potential leak/spill at the facility.
4. The actions to be taken should the spill be beyond the capability of the site personnel. Provide what personnel/agencies will additionally be contacted in the case of such a situation (i.e.: public emergency services, qualified contract clean up assistance, etc.).
5. Address how and where the contaminated materials collected from leaks/spills and during routine maintenance will be disposed of. If a private contractor is to be used give the name, address and phone number of the company if known. If the private contractor is not known describe the place the contaminants will be stored, the method of storage, the limits of space, the method for obtaining contract.

Part V: Training and Inspections

A. Provide procedures that will be followed to insure all personnel that work at the facility are trained in how to respond to a leak/spill. Include procedures for contract workers and/or visitors as well.

B. Provide procedures for inspections and routine maintenance of the container and for the systems using the potential contaminants at the facility. Inspections must be conducted at a minimum of every six (6) months, and "Table 14-II-A" of the GPP (at a minimum) must be updated to include any changes prior to those changes being installed.

Part VI: Monitoring Wells

A. This question addresses the location, depth and identity of monitoring sites to insure compliance with the GPP. The information requested here should be listed in Module 2, Part I-A unless this GPP is a separate from a NPDES permit such as a contractor under a MR-19. Either in the space provided, or in Module 2, list the station number, the longitude & latitude (to the nearest second), the surface & bottom elevations of the well for each site.

Part VII: Contaminants & Monitoring Wells Map

A. Submit a map showing all the sites identified in Part III-A and Part VI-A. The map shall be of the same scale as the Exhibit 1-VI-A map in Module 1. Mark the first box if all the required information can be clearly shown on the Exhibit 1-VI-A map, if not mark the second box and submit another map showing the sites. If a second map is to be used the following must be adhered to:

1. Same scale as the "Exhibit 1-VI-A" NPDES map
2. The outline of each article 3 and/or 4 permit to be covered by this GPP will be individually shown and identified by permit number.
3. All groundwater-monitoring stations must be shown with their corresponding station number.
4. All manmade potential contaminants (except exempt mobile containers) must be shown with their ID#.
5. All exempt mobile containers must be addressed as to their general area of use on the map.
6. A title block, legend, scale and north arrow must be shown.
7. Title the map "GPP MAP" and also label it as "Exhibit 14-VII-A" just under the title.
8. If multiple maps are used include match lines on the maps.

PART VIII: Applicant Certification

A. The application must be certified in accordance with title 47, Series 30, Section 4.7.1 of the WV NPDES regulations, and the signature must be dated and notarized. If the application is corrected or changed after initial submission it must include an updated certification when resubmitted for review. Authorized signatures for each type of applicant ownership include:

| <u>OWNERSHIP TYPE</u> | <u>AUTHORIZED SIGNATURES</u> |
|-----------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Corporation | President, Secretary, Treasurer, Vice-President, or any other person performing similar policy or decision-making functions for the corporation, or Manager of facilities employing more than 250 persons or have gross annual sales or expenditures exceeding \$25,000,000 (in 2nd Qrt. 1980 dollars), if authority to sign documents has been granted to the manager by the corporation. |
| Partnership | General Partner |
| Sole Proprietorship | Proprietor |

For signatures other than principle officers, partners, or sole proprietors appropriate documentation granting or verifying such signatory authority must be included with the application.

MR-5GT INSTRUCTIONS

Article 12 Ground Water Protection Plan Transfer

Heading Information

Box 1 Enter WVDEP regional office number.

Box 2 Enter initial date the application is submitted and the dates of each successive submission with corrections.

Part I: Transferee Information

A. Fill in the information for the transferee (the receiving party) in the spaces provided (if "Mailing Address" is a P.O. address include "Street Address" also).

Part II: Transferor Information

A. Fill in the information for the transferor (the transferring party) in the spaces provided (if "Mailing Address" is a P.O. address include "Street Address" also).

Part III: Associated Permits

A. List all NPDES and Article 3 or 4 permits that the Ground Water Protection Plan (GPP) that is being transferred covers. If additional room is needed enter "See Attachment III-A" and label the attachment as such.

Part IV: Spill Coordinator

A. Type or print the name and title of the person who will be the spill coordinator for the facility after the transfer.

Part V: Certification of Transferee

A. The party taking responsibility for the GPP must certify The "MR-5GT". The application must be certified in accordance with title 47, Series 30, Section 4.7.1 of the WV NPDES regulations, and the signature dated notarized. If the application is corrected or changed after initial submission it must include an updated certification when resubmitted for review. Authorized signatures for each type of transferee include:

OWNERSHIP TYPE

AUTHORIZED SIGNATURES

Corporation

President, Secretary, Treasure, Vice-President, or any other person performing similar policy or decision-making functions for the corporation, or Manager of facilities employing more than 250 persons or have gross annual sales or expenditures exceeding \$25,000,000 (in 2nd Qrt. 1980 dollars), if authority to sign documents has been granted to the manager by the corporation.

Partnership

General Partner

Sole Proprietorship

Proprietor

For signatures other than principle officers, partners, or sole proprietors appropriate documentation granting or verifying such signatory authority must be included with the application.



DIVISION OF ENVIRONMENTAL PROTECTION

CECIL H. UNDERWOOD
GOVERNOR

10 McJunkin Road
Nitro, WV 25143-2506

JOHN E. CAFFREY
DIRECTOR

NPDES/ARTICLE 11 WATER POLLUTION CONTROL PERMIT
MR-5 APPLICATION, GENERAL INSTRUCTIONS
(Revised 12/97)

1. The application consists of thirteen (13) modules and a copy of the instructions. These modules are:

- Module 1 - General Information
Module 2 - Monitoring Information
Module 3 - Adjacent Surface and Ground Water
Module 4 - Mineral Information
Module 5 - Barrier Information
Module 6 - Preparation, Stockpiling, Handling and Disposal
Module 7 - Effluent Treatment
Module 8 - Abandonment Plan
Module 9 - Sewage Material Disposal Facility
Module 10 - Underground Disposal
Module 11 - Modification
Module 12 - Transfer Modification
Module 13 - Remining
Module 14 - Groundwater Protection Plan (GPP)

2. Include all modules shown in Column 2 for each activity in Column 1 for which the application is requesting coverage.

Table with 2 columns: COLUMN 1 (Application Activity) and COLUMN 2 (Required Modules). Rows include categories like ALL NEW APPLICATIONS, MODIFICATIONS, TRANSFER MODIFICATIONS, and ALL REISSUANCES with specific activities and corresponding module numbers.

3. You must submit the following number of copies of the application to the appropriate WVDEP regional office for review, depending on the size of the facility or the type of application:

- Not a major facility and an NPDES only application ----- 1 original and 3 copies
Major facility and a NPDES only application ----- 1 original and 4 copies
All joint Article 3 or 4 / NPDES applications ----- 1 original and 5 copies

ALL WATER QUALITY ANALYSIS MUST BE PERFORMED IN ACCORDANCE WITH EPA TESTING PROCEDURES, 40 CFR, PART 136 AND METALS, ACIDITY AND ALKALINITY MUST BE REPORTED IN TOTAL CONCENTRATIONS.

THE APPLICANT MUST SUBMIT A JOINT ARTICLE 3 or 4 / NPDES PERMIT APPLICATION BEFORE THEY CAN REFERENCE ANY MATERIALS AS BEING FOUND IN THE ARTICLE 3 or 4 APPLICATION. ALL MATERIALS REFERENCED MUST BE IN THE JOINT ARTICLE 3 or 4 / NPDES APPLICATION, NOT IN PREVIOUSLY SUBMITTED APPLICATIONS

Application for NPDES/ARTICLE 11 WATER POLLUTION CONTROL PERMIT STATE OF WEST VIRGINIA

NPDES Permit # WV

Module 1: General Information

WVDEP Region # _____

Date(s) Submitted _____

Application Type, Fees & Hydrologic Region

Type of Permitting Action(s) Requested *(Mark all that apply and enter appropriate numbers in the spaces provided)*

New Reissue # _____ Transfer # _____ Abandon Modification # _____

(If a transfer or a modification is included with reissuance enter reissuance # and the transfer # and/or the modification #)

Filing Fee: Required reissuance filing date: _____ *(120 days prior to expiration date)*

(Art. 3) \$500.00 \$100.00
(New or Untimely) (Timely Reissuance)

(Other) Annual Fees Paid: _____ Application Fee: _____
(Enter the last date annual fees were paid) (Attach fee schedule worksheet)

USGS/SCS Hydrologic Region(s) Receiving Effluent.

_____ *(8 digit code)*

_____ *(Name of Hydrologic Region)*

Part I: Applicant Owner (Operator) Information

A. Applicant Name: _____

Mailing Address: _____ *(If P.O. Box show street address also)*

Street Address: _____

Town _____ State _____ Zip _____ Telephone No. _____

B. Category of applicant *(Check appropriate category; if "other" specify type)*

Federal State Private Public Other _____

Part II: Facility Information

A. Facility Name: _____

Mailing Address: _____ *(If P.O. Box show street address also)*

Street Address: _____

Town _____ State _____ Zip _____ Phone No. _____

Physical Location of Facility: County _____ Nearest P.O. _____

Facility Contact: _____ *(Name and Title)* *(Phone)*

B. The facility and discharges therefrom fall under the selected category below:

- New Source - Facility covered under 40 CFR Part 434, including an abandoned mine for which remining commenced after September 19, 1977 or which is determined to constitute a major alteration. *(See Title 47, Series 30, Section 2.29.)*
- Existing Source - A coal mine, preparation plan, and all refuse or waste there from: (a) from where there is or may be a discharge or pollutants which commenced prior to September 19, 1977; and (b) which is not a new source. *(See Title 47, Series 30, Section 2.20.)*

C. In the table below show the type of permitting action being requested and the type(s) of operations to be covered in this application. Enter each operation in the appropriate category column.

| Permitting Action Requested <i>(Mark the one that applies)</i> | Operations Covered : <i>(choose from items 1 through 11 below)</i> | | |
|-----------------------------------------------------------------------------------------|-----------------------------------------------------------------------|-------------------------------|---------|
| | Operate | Remine | Abandon |
| <input type="checkbox"/> Issue New Permit <input type="checkbox"/> Reissue Permit | | | |
| <i>(Enter corresponding operation numbers under appropriate category column above.)</i> | | | |
| 1 Deep Mine | 2 Surface Mine | 3 Preparation/Cleaning Plant | |
| 4 Loadout Facility | 5 Refuse Area | 6 Underground Disposal System | |
| 7 Haulroad | 8 Office or Shop Area | 9 Bath House / Sewage | |
| 10 _____ <i>(other; describe)</i> | 11 _____ <i>(other; describe)</i> | | |

E. Mark all activities below that this application is requesting coverage for.

- Sewage Treatment
- Chemical Treatment
- Underground Disposal System
- Physical Treatment
- Passive Treatment
- Remining [under CWA Sec. 301(p)]
- Ash Disposal
- Other _____
(describe activity)

Part III: Reissuance of Existing Permits

N/A

A. Provide a narrative describing all permitting actions taken since the last issuance of this permit up to and including this reissuance application. Briefly describe each modification or transfer request submitted *(by number)* and the date they were approved, withdrawn, or denied *(to include any changes requested in this application)*. Label it as "Attachment 1-III-A"

Part IV: SIC Code

A. Mark all SIC code(s) below that this facility falls under.

- 1221 Coal Mining
- 1423 Granite
- 1442 Construction Sand & Gravel
- 1422 Limestone
- 1429 Stone
- 1446 Industrial Sand
- other _____
(describe activity)
- other _____
(describe activity)

Part V: Environmental Permits

| A. List the following information for all existing or required environmental permits for this facility. <i>(If effluent from this facility is treated under another NPDES permit list that permit with an asterisk)</i> | | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|---------------------|-------------|-----------------|
| ISSUING AGENCY AND ADDRESS | TYPE OF PERMIT | PERMIT OR ID NUMBER | DATE ISSUED | EXPIRATION DATE |
| WV DEP Office of Water Resources | NPDES/Art 11 | | | |
| WV DEP Office of Water Resources | UIC | | | |
| WV DEP Office of Waste Management | | | | |
| WV DEP Office of Air Quality | Article 5 | | | |
| WV Health Department | Sewage | | | |
| WV Public Land Corporation | | | | |
| US Army Corps of Engineers | | | | |
| WV DEP Office of Mining & Reclamation | Art. 4 | | | |
| WV DEP Office of Mining & Reclamation (List all) | SMCRA/Art 3 | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Part VI: Map

- A. A topographic map drawn to a reasonable scale and extending at least one thousand feet (1,000') beyond the limits of the facility that identifies and/or shows: *(Label "Exhibit 1-VI-A")*
(Read and follow all instructions concerning map requirements and preparation)
1. Limits of each and every operation *(permit)* to be covered, and adjacent operations.
 2. All physical *(sediment control)*, chemical, sewage, biological and passive treatment systems.
 3. All intake or discharge points and any internal, ground water or in-stream monitoring stations.
 4. All streams, creeks, rivers, lakes or other surface bodies of water.
 5. All seeps, springs or other ground water discharge points.
 6. All drinking, domestic use or ground water monitoring wells and any production, injection or abandoned commercial wells.
 7. Delineate all wellhead protection areas.
 8. Delineate all wetlands known to be affected by this facility.
 9. Legend, title block, location map and North arrow.
 10. If Module 14 is included in this application, then locate all items shown in "Table 14-I-A" of the Groundwater Protection Plan (GPP) on the map and label them by the ID# shown in that table.
- This information may be shown on the mine site topographic map, submitted with DEP's Article 3 (MR-4) mining application, if it can clearly show all of the required information and is submitted in a joint application.*

Part VII: Transfers and Additional Responsibilities

A. If proposing any of the following *(with this application)* include the appropriate attachments:

- To allow effluent from operations, owned by persons or organizations other than the applicant, to be discharged through any outlet proposed (or covered) by this application, **or** to allow flow from operations proposed (or covered) by this application to be discharged through an outlet of a different NPDES permit.
 No Yes *(If YES, include Module IR)* N/A *(previously submitted)*
- To transfer the Groundwater Protection Plan. No Yes *(If YES, include MR-5GT)*

Part VIII: Applicant Certification

A. I certify under penalty of law that this application and all attachments were prepared under the 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.

(Typed or Printed Name and Title of Official) *(Signature in accordance with Title 47, Series 30, Section 4.7.1)*

Taken, subscribed and sworn to before me the undersigned authority on _____ in
 _____ county of _____

(Commission expiration date)

(Signature of Notary Public) *(Seal)*

Application for NPDES/ARTICLE 11 WATER POLLUTION CONTROL PERMIT

STATE OF WEST VIRGINIA

NPDES Permit # WV _____

Module 1R: Responsibility for Discharge from Others

WVDEP Region # _____

Date Submitted _____

Part I: Responsible Party Information

A. Name: _____
 Mailing Address: _____ (If P.O. Box show street address also)
 Street Address: _____
 City: _____, State: _____, Zip: _____, Phone No.: _____

B. The contact person for the responsible party is:
 _____ (Name and Title) _____ (Phone No.)

Part II: Associated Permits

A. In the table below list the following: (List all associated permits in the same row)
 1. The company name and Article 3 permit number of the areas contributing flow to the responsible parties NPDES permit. (Not Art. 3 permits covered in responsible party's NPDES permit)
 2. The WV/NPDES Permit number and the outlet number(s) of the responsible party that receives the flow. (The flow from the Art. 3 permit listed to the left in the same row.)

| Contributing Permits | | Receiving NPDES Permit | |
|----------------------|------------------|------------------------|------------|
| Company Name | Article 3 No.(s) | WV NPDES No. | Outlet No. |
| | | | |
| | | | |
| | | | |

Part III: Certification of Responsible Party

A. As an authorized representative of the responsible party for the permittee of the final discharge point I accept the responsibility and liabilities for untreated and/or treated discharges that are received from the above mentioned contributing permits. I further understand that the responsibilities and liabilities for the final discharge point will be that of the responsible party until such time as they are released of those responsibilities in writing by the West Virginia Division of Environmental Protection.

 (Typed or Printed Name and Title of Official) (Signature of Owner, Partner or Principal Officer)
 Taken, subscribed and sworn to before me the undersigned authority on _____ in
 _____ county of _____

 (Commission expiration date)

 (Signature of Notary Public) (Seal)

C. Except for storm water runoff, leaks, or spills, are any of the discharges described in Item 2-II-B. intermittent or seasonal? (*non-continuous pumped discharges, wet weather springs, etc.*)
 No Yes (*If Yes complete the following table*)

| Outlet Number | Contributing Operations | Duration (Hours / Day) | Frequency (Days / Year) | Flow (MGal / Yr.) |
|---------------|-------------------------|------------------------|-------------------------|-------------------|
| | | | | |
| | | | | |
| | | | | |

Part III: Required Compliance

A. Do any Federal, State or Local authorities require the meeting or any implementation of a schedule for the construction, upgrading or operation of wastewater treatment equipment or practices or any other environmental programs that may affect the discharges described in this application? (*This includes, but is not limited to, permit conditions, compliance schedules, stipulations, court orders, and grant or loan conditions*)
 No Yes (*If Yes complete the following table*)

| Identification of Condition, Agreement, etc. | Affected Outlets | | Brief Description of Project | Final Compliance Date | |
|----------------------------------------------|------------------|---------------------|------------------------------|-----------------------|-----------|
| | No. | Source of Discharge | | Required | Projected |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Part IV: Intake and Effluent Characteristics

A. Submit one complete set of Tables 2-IV-A, 2-IV-B and 2-IV-C (*found at the end of this module*) for the effluent (*treated discharge*) from each outlet¹.
 NA; (*New Permit, Outlets not constructed yet.*)

B. Submit "Table 2-IV-D" (*found at the end of this module*) showing a raw water (*influent prior to any type of treatment*) analyses for all outlets¹, and all ground water monitoring stations for the following parameters: Flow, pH, Total Iron, Total Manganese, Total Aluminum, Acidity mg/l as CaCO₃, Alkalinity mg/l as CaCO₃ and Sulfates as SO₄.
 NA (*New Permit; No Outlets or Ground Water Monitoring Stations exist yet*)

¹ When an applicant has two or more outlets with substantially identical effluents the director may allow the applicant to test only one outfall and report that the quantitative data also applies to the substantially identical outlet. If a "Representative Outlet" is used the other outlets it represents must be shown in the space provided at the top of the table.

C. Submit "Table 2-IV-E" (found at the end of this module) for each set of new in-stream monitoring stations. The analysis in "Table 2-IV-E" must be submitted for each stream receiving effluent from the facility. The analyses reported must be either the average value of data collected over a period reflecting seasonal variations (minimum six months), or for a seven consecutive day flow during drought stream conditions that would occur with a frequency of every ten years (7Q10 flow).
 (If this application is for a new NPDES permit, discharge into a new receiving stream or new section of the stream not currently covered by this permit then "Table E" must be completed)

NA (Existing permit; no new streams or section of streams affected)

D. Is it known, or is there reason to believe, any pollutants listed in Appendix C or E of the NPDES Regulations 47CSR30 are discharged, or may be discharged, from any outlet?

No Yes; Complete table below

(If YES; list below every pollutant believed present, briefly describe the reasons believed to be present, and report any analytical data possessed as "Attachment 2-IV-D")

| POLLUTANT | SOURCE | POLLUTANT | SOURCE |
|-----------|--------|-----------|--------|
| | | | |
| | | | |

E. Were the analyses required in "Module 2" for all pollutants performed in accordance with 40 CFR, Part 136?

Yes No (List the pollutant, and describe method used for analysis below.)

| POLLUTANT | DESCRIPTION OF METHOD |
|-----------|-----------------------|
| | |
| | |
| | |

F. Were the toxic metals, cyanide and phenols reported under Table 2-IV-C analyzed with a precision to the nearest microgram per liter?

Yes No (List below the pollutant, method and detection limit used for analysis.)

| POLLUTANT | DESCRIPTION OF METHOD |
|-----------|-----------------------|
| | |
| | |
| | |

G. Provide the days the applicant will collect the required compliance monitoring samples for the proposed WVPNDES permit.

| FREQUENCY | DAY(S) OF WEEK | WEEK(S) OF MONTH | MONTH OF YEAR |
|--------------|----------------|------------------|---------------|
| Semi Monthly | | | ALL |
| Monthly | | | ALL |
| Quarterly | | | |
| Yearly | | | |

Part V: Potential Discharges not Covered by Analysis

A. Is any pollutant listed in "Table 2-IV-C" a substance or a component of a substance which is now, or is expect over the next five (5) years, to be used or manufactured as an intermediate or final product or byproduct? *(If Yes, list all such pollutants and possible sources as "Attachment 2-V-A".)*

No Yes; See "Attachment 2-V-A"

Part VI: Biological Toxicity Testing Data

A. Has there been performed, or is there any knowledge of or reason to believe that any biological test for acute or chronic toxicity has been made on any discharges or on a receiving water in relation to a proposed discharge within the last three (3) years? *(If yes, submit copies of test results and a description of the reason for test for the outfall or stream on which the test was performed as "Attachment 2-VI-A".)*

No Yes; See "Attachment 2-VI-A"

Part VII: Benthic Survey

A. Has there been performed, or is there any knowledge or reason to believe that any Benthic Surveys have been done on a receiving water in relation to a proposed discharge within the last three (3) years? *(If yes, submit copies of results along with a description of the reason for the survey, the stream on which the test was performed and the location of each test site.)*

No Yes; See "Attachment 2-VII-A"

Part VIII: Discharges into Non-complying Waters

A. Is there a proposed discharge into a stream (or water segment) which either does not meet applicable water quality standards for the pollutant(s) to be discharged, or is not expected to meet those standards even after treating the discharge to the required technology based limits, and the State has performed a pollutant waste allocation for these pollutants?
If yes submit documentation that:

1. There are sufficient remaining pollutant load allocations to allow for the discharge; and
2. The existing discharges into that segment are subject to compliance schedules designed to bring the segment into compliance with applicable water quality standards; **OR**
3. The applicant qualifies for an alternate water quality based effluent limitation by making an adequate demonstration to the Director pursuant to the Environmental Quality Board's Administrative Regulations, 46 CSR1.

No Yes; See "Attachment 2-VIII-A"

Part IX: Variances

A. Is a variance from effluent limitations requested? *(If Yes, Comply with NPDES regulations, Title 47, Series 30, Sections 4.5.6. or 4.5.7.)*

No Yes; See "Attachment 2-IX-A"

TABLE 2-IV-A

OUTLET NO. _____

Representing Outlets: _____

Date Sampled _____

Date Analyzed _____

Analysis performed by: Name _____
 Address _____

| POLLUTANT | EFFLUENT | | | | NO. OF ANALYSES |
|--------------------------------------|---------------------|------|-------------------------|------|-----------------|
| | MAXIMUM DAILY VALUE | | LONG-TERM AVERAGE VALUE | | |
| | CONCENTRATION | MASS | CONCENTRATION | MASS | |
| Biochemical Oxygen Demand (BOD-5day) | | | | | |
| Chemical Oxygen Demand (COD) | | | | | |
| Total Organic Carbon (TOC) | | | | | |
| Fecal Coliform | | | | | |
| Total Residual Chlorine (if used) | | | | | |
| Ammonia (as N) | | | | | |
| Total Suspended Solids (TSS) | | | | | |
| Oil & Grease | | | | | |
| pH | | | | | |
| Flow (CFS) | | | | | |
| Temperature (Deg. C) (Summer) | | | | | |
| Temperature (Deg. C) (Winter) | | | | | |

Representative Outlet Justification: _____

TABLE 2-IV-A INSTRUCTIONS

1. Provide the results of at least one analysis for every pollutant in this table (except as noted in item 3 below) in accordance with 4.5.2.f.1 of the NPDES Regulations 47CSR30.
2. Complete one table for each outfall. When an applicant has two or more outlets with substantially identical effluents the director may allow the applicant to test only one outfall and report that the quantitative data also applies to the substantially identical outlet. If a "Representative Outlet" is used the group of outlets it represents must be shown in the space provided at the top of the table. Justification for using the "Representative Outlet" for the group must also be provided at the bottom of the table.
3. If sewage or bathhouse waste is not part of the effluent, Biochemical Oxygen Demand, COD, TOC, Fecal Coliform and Ammonia is waived.
4. If ammonia is used as a chemical reagent, then ammonia (as Nitrogen), temperature and field pH (at the time of sampling) must be included.
5. If Chlorine is used (in sewage treatment, chemical treatment, etc.) it must be analyzed for, if not it may be waived.
6. Include units used to report pollutant concentration and mass.

TABLE 2-IV-B

OUTLET NO.

Representing Outlets

Date Sampled

Date Analyzed

Analysis performed by: Name
 Address

| POLLUTANT AND CAS NO. (if available) | EFFLUENT | | | | | | |
|--------------------------------------------|--------------|--------|---------------------|------|----------------------|------|-----------------|
| | MARK 'X' IF: | | MAXIMUM DAILY VALUE | | LONG TERM AVG. VALUE | | NO. OF ANALYSES |
| | PRESENT | ABSENT | CONCENTRATION | MASS | CONCENTRATION | MASS | |
| Bromide (24959-67-9) | | | | | | | |
| Color | | | | | | | |
| Fluoride (1698-48-8) | | | | | | | |
| Nitrate-Nitrite (as N) | | | | | | | |
| Nitrogen, Total Organic (as N) | | | | | | | |
| Phosphorus, Total (as P) (7723-14-0) | | | | | | | |
| Sulfate (as SO ₄) (14808-79-8) | X | | | | | | |
| Sulfide (as S) | | | | | | | |
| Sulfite (as SO ₃) (14265-45-3) | | | | | | | |
| Surfactants | | | | | | | |
| Aluminum, Total (7429-90-5) | X | | | | | | |
| Barium, Total (7440-39-3) | | | | | | | |
| Boron, Total (7440-42-8) | | | | | | | |
| Cobalt, Total (7440-48-4) | | | | | | | |
| Iron, Total (7439-89-6) | X | | | | | | |
| Magnesium, Total (7439-95-4) | | | | | | | |
| Molybdenum, Total (7439-98-7) | | | | | | | |
| Manganese, Total (7439-96-5) | X | | | | | | |
| Tin, Total (7440-31-5) | | | | | | | |
| Titanium, Total (7440-32-6) | | | | | | | |
| Chloride | X | | | | | | |
| Hardness | X | | | | | | |
| RADIOACTIVITY | | | | | | | |
| Alpha, Total | | | | | | | |
| Beta, Total | | | | | | | |
| Radium, Total | | | | | | | |
| Radium 226, Total | | | | | | | |

TABLE 2-IV-B INSTRUCTIONS

1. For each pollutant listed mark an "X" in the "Present" column if it is known or have reason to believe it is present in the effluent or "Absent" column if believed absent.
2. Provide the results of at least one analysis for every pollutant listed that are believe to be present in the effluent in accordance with 4.5.2.f.3.B of the NPDES Regulations 47CSR30. At a minimum, analyses must be submitted for Sulfate, Aluminum, Iron, Manganese, and Chloride.
3. Complete one table for each outfall. When an applicant has two or more outlets with substantially identical effluents the director may allow the applicant to test only one outfall and report that the quantitative data also applies to the substantially identical outlet. If a "Representative Outlet" is used the other outlets it represents must be shown in the space provided at the top of the table.
4. Include units used to report pollutant concentration and mass.

TABLE 2-IV-C

OUTLET NO.

Representing Outlets:

Date Sampled

Date Analyzed

Analysis performed by: Name _____
 Address _____

| POLLUTANT AND CAS NO. (if available) | EFFLUENT | | | | NO. OF ANALYSES |
|-----------------------------------------|---------------------|------|-------------------------|------|--------------------|
| | MAXIMUM DAILY VALUE | | LONG-TERM AVERAGE VALUE | | |
| | CONCENTRATION | MASS | CONCENTRATION | MASS | |
| METALS, CYANIDE, AND TOTAL PHENOLS | | | | | |
| Antimony, Total (7440-36-0) | | | | | |
| Arsenic, Total (7440-38-2) | | | | | |
| Beryllium, Total (7440-41-7) | | | | | |
| Cadmium, Total (7440-43-9) | | | | | |
| Chromium, Total (7440-47-3) | | | | | |
| Copper, Total (7550-50-8) | | | | | |
| Lead, Total (7439-97-6) | | | | | |
| Mercury, Total (7439-97-6) | | | | | |
| Nickel, Total (7440-02-0) | | | | | |
| Selenium, Total (7782-49-2) | | | | | |
| Silver, Total (7440-22-4) | | | | | |
| Thallium, Total (7440-28-0) | | | | | |
| Zinc, Total (7440-66-6) | | | | | |
| Cyanide, Total (57-12-5) | | | | | |
| Phenols, Total | | | | | |

TABLE 2-IV-C INSTRUCTIONS

1. Provide the results of at least one analysis for every pollutant in this table in accordance with 4.5.2.f.2 of the NPDES Regulations 47CSR30.
2. Complete one table for each outfall. When an applicant has two or more outlets with substantially identical effluents the director may allow the applicant to test only one outfall and report that the quantitative data also applies to the substantially identical outlet. If a "Representative Outlet" is used the other outlets it represents must be shown in the space provided at the top of the table.
3. All Toxic Metals, Cyanide, and Phenols must be analyzed to the nearest microgram per liter. If not, complete required information in Mod. 2, IV-E.
4. Include units used to report pollutant concentration and mass.

TABLE 2-IV-D

| | |
|-----------------------------------|--|
| Analysis performed by: Name _____ | |
| Address _____ | |

Submit analyses for raw water (*influent prior to any type of treatment*) for all outlets and ground water monitoring stations for the following parameters: Flow (*water elevation for wells only*), pH, Total Iron, Total Manganese, Total Aluminum, Acidity mg/l as CaCO₃, Alkalinity mg/l as CaCO₃ and Sulfates as SO₄

| | | | | | | | | | | | | | | | | | |
|------------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| Outlet Number | | | | | | | | | | | | | | | | | |
| Date Sampled | | | | | | | | | | | | | | | | | |
| Time Sampled | | | | | | | | | | | | | | | | | |
| Date Analyzed | | | | | | | | | | | | | | | | | |
| Type of Sample | | | | | | | | | | | | | | | | | |
| Water Elev. (ft) | | | | | | | | | | | | | | | | | |
| Flow (cfs) | | | | | | | | | | | | | | | | | |
| pH (std. units) | | | | | | | | | | | | | | | | | |
| Fe (mg/l) | | | | | | | | | | | | | | | | | |
| Mn (mg/l) | | | | | | | | | | | | | | | | | |
| Al (mg/l) | | | | | | | | | | | | | | | | | |
| Acidity (mg/L) | | | | | | | | | | | | | | | | | |
| Alkalinity (mg/l) | | | | | | | | | | | | | | | | | |
| SO ₄ (mg/l) | | | | | | | | | | | | | | | | | |

TABLE 2-IV-D INSTRUCTIONS

- 1. Use raw water influent for all analyses in this table. "Raw Water" is the influent prior to any type of treatment (chemical, physical, biological, passive, etc.).
- 2. Show the flow amount in cubic feet per second (cfs). "Zero" (0) or "No flow" will not be accepted; samples must be taken during times of flow. For ground water monitoring wells show water elevation in well (flow would be NA unless artesian well)
- 3. Show the "Type of Sample" as follows:
 I = Influent
 P = Pooled water. For sediment ditches (channels), where there is no influent area that can be sampled, a pooled water sample may be used for the analysis.

TABLE 2-IV-E

(use separate page for each set of in-stream monitoring stations)

The analysis in "Table 2-IV-E" must be submitted for each stream receiving effluent from facility. The analyses reported must be either the average value of data collected over a period of time to reflect seasonal variations (minimum six months) or for a seven consecutive day drought flow during drought stream conditions that would occur with a frequency of every ten years (7Q10 flow).

| | |
|------------------|--------------------|
| Upstream Station | Downstream Station |
|------------------|--------------------|

Submit analyses for each set of in-stream monitoring stations for the following parameters: Flow, pH, Total Iron, Total Manganese, Total Aluminum, Acidity mg/l as CaCO₃, Alkalinity mg/l as CaCO₃ and Sulfates as SO₄

The analyses below are based on 7Q10 flow Average flows over _____ consecutive months.

| STA. ID Number | PARAMETERS | | | | | | | |
|----------------|------------|------------|-----------|-----------|-----------|--------------|-------------|------------------------|
| | Flow (cfs) | pH (units) | Fe (mg/l) | Mn (mg/l) | Al (mg/l) | Acid. (mg/l) | Alk. (mg/l) | SO ₄ (mg/l) |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

| Station ID # | Time Sampled | Date Sampled | Date Analyzed | Name and Address of Laboratory |
|--------------|--------------|--------------|---------------|--------------------------------|
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For each outlet discharging into this receiving stream between these two in-stream monitoring stations calculate the size of the watershed (in acres) upstream of the confluence of this stream and the effluent from the outlet. *(Measurements are to be taken from a USGS Topographical map; All outlets must be shown)*

| Outlet No. | Watershed (Acres) | Outlet No. | Watershed (Acres) | Outlet No. | Watershed (Acres) |
|------------|-------------------|------------|-------------------|------------|-------------------|
| | | | | | |
| | | | | | |
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Part IV: Water Supplies

A. Provide details of location, ownership, etc. of the first private water supply and all the public water supplies that use water from the receiving stream(s) and are located within five (5) miles downstream of the discharge points.

- None exist See "Attachment 3-IV-A" (Mark if additional sheets are needed)

Part V: Ground Water

A. Submit analysis of any seeps, springs or wells within one thousand feet (1,000') of the proposed facility for the parameters shown in the table below. Locate and label all these sampling points on "Exhibit 1-VI-A" of Module 1 and label the analysis table accordingly. (Fe = Total Iron; Mn = Total Manganese; Al = Total Aluminum; Acid = Acidity mg/l as CaCO₃; Alk. = Alkalinity mg/l as CaCO₃; SO₄ = Sulfates as SO₄)

- NA See "Attachment 3-V-A" See _____
 (Mark if additional sheets are needed) (Article 3/4 information must be in joint application)

| SITE | | | | PARAMETERS | | | | | | |
|--------|----------|-----------|-------|------------|-----------|-----------|-----------|--------------|-------------|------------------------|
| Number | Latitude | Longitude | Elev. | pH (units) | Fe (mg/l) | Mn (mg/l) | Al (mg/l) | Acid. (mg/l) | Alk. (mg/l) | SO ₄ (mg/l) |
| | | | | | | | | | | |
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Part VI: Aquifer Uses

A. Describe the present use of water in the aquifers and the water table within one thousand feet (1000') of the perimeter of the proposed facility.

- See _____ (Article 3/4 information must be in joint application)

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Module 4: Mineral Information

Part I: Mined / Processed Mineral Bed(s)

A. In the table below, show the sulfur properties of all mineral bed(s) (coal seam) and/or the refuse/waste produced (if applicable) for each bed/seam that will be mined / processed at this facility. (Indicate if analysis is raw material or refuse/waste in table)

See Attachment 4-I-A (mark if additional sheets are needed) See _____ (Article 3 / 4 information must be in joint application)

| U. S. Geologic Survey Mineral Bed / Coal Seam Name | Raw / Refuse | Pyrite (%) | Organic (%) | Sulfate (%) | Total (%) |
|-------------------------------------------------------|-----------------|---------------|----------------|----------------|--------------|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Part II: Acid -Base Analysis

A. Use "Table 4-II-A" to provide an acid-base analysis for all strata to be encountered during all phases of construction, operation and regrading of the facility to include the strata below the lowest bed/seam or elevation being mined/disturbed. (If multiple sites used include a Table "4-II-A" for each site)

See Attachment 4-II-A, Waiver Request (If overburden analysis waiver is requested) See _____ (Article 3 / 4 information must be in joint application)

Part III: Amendments & Additives

N/A

A. Include a narrative describing any amendments or materials not produced by this facility (such as Coal Ash, Sewage Sludge, Kiln Dust etc.), that are to be used by, or disposed of, at this facility. The narrative should address at a minimum: (1) its' source, (2) the chemical breakdown and properties of the material, (3) the purpose of its use(s), (4) the rates and methods of application and (5) any potential degradation of the ground or surface water that could result from its use.

See Attachment 4-III-A See _____ (Article 3 / 4 information must be in joint application)

B. Is any material in "Part III.A" to be disposed of in underground works?

No Yes (Include "Modules 5 and 6")

Table 4-II-A OVERBURDEN SAMPLE ANALYSIS

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| Company Name | Facility Name | | Laboratory Name | | Page | of | | | | | |
|------------------|-----------------------------------|-----------------------|-----------------------------------------------------------|----------|------------------|--------------------|---------------------|------------------------|----------------------------|--------------|-----------|
| Sample I. D. No. | Elevation Top of Stratum (ft/msl) | Unit Thickness (Feet) | Mineral Bed / Coal Seam (Use U. S. Geologic Survey Names) | Paste pH | Total Sulfur (%) | Pyritic Sulfur (%) | * Acidify Potential | * Neutralize Potential | * Net Excess or Deficiency | ** Fizz Rate | *** Color |
| | | | | | | | | | | | |
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* Units in tons of CaCO3 equivalent per 1000 tons of material ** Units: 0 = None 2 = Moderate 3 = Strong
 1 = Slight

*** Munsell Color Chart

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Module 5: Barrier Information

Part I Barriers

A. Does any portion of the proposed facility lie within the 15° angle of critical deformation of an underlying deep mine? (If YES show underlying deep mine on "Exhibit I-VI-A or 8-II-A")

No Yes, See "Exhibit _____."

B. Are there any mining operations (active, inactive or abandoned), wells (gas, oil water or injection) or streams (intermittent or perennial) within the 15° angle of critical deformation of the proposed operation?

NA No Yes; See "Exhibit 8-II-A" See _____

C. Are there any deep mines (active or abandoned) above, adjacent to or below the proposed operation that contain impounded water?

No Yes (If "YES" complete table below)

| Mine Name or ID Number | Approximate Elevation | Unknown | Partially Inundated | Totally Inundated |
|------------------------|-----------------------|---------|---------------------|-------------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |

D. What effects will subsidence have on the proposed or existing operations that overlie the mines addressed in "A and B" above? Describe the partings/barrier between the proposed operation and any adjacent, overlying and underlying mining. (If none justify the answer with pillar design or other geotechnical engineering data)

See "Attachment 5-I-D" See _____

E. Show calculations of barrier design to prevent blowouts or seepage affecting the facility or adjacent areas. Include maximum and minimum head and barrier thickness, strength properties of strata and equations used to calculate the barrier. (Show barriers on "Exhibit A or F")

See "Attachment 5-I-E" See _____

F. Based on the information provided above, will waters migrate to/from the proposed facility to/from adjacent surface or deep mine operations? If "Yes" describe the quantity and quality of the waters and their projected effect on the final discharge quality.

No Yes; See "Attachment 5-I-F"

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Module 6: Preparation, Stockpiling, Handling & Disposal

Part I: Facility Operations

A. Mark all types of operations proposed to be included at this facility: *(check appropriate categories)*

| | | |
|-----------------------------------------------------|---------------------------------------------------------|-------------------------------------------------------|
| <input type="checkbox"/> Coal Washing/Cleaning | <input type="checkbox"/> Blending Coals | <input type="checkbox"/> Sizing (Crushing/Screening) |
| <input type="checkbox"/> Raw Coal Stockpile | <input type="checkbox"/> Clean Coal Stockpile | <input type="checkbox"/> Temporary Refuse Stockpile |
| <input type="checkbox"/> Truck Loadout | <input type="checkbox"/> Rail Loadout | <input type="checkbox"/> Clean Coal Conveyed Off Site |
| <input type="checkbox"/> Barge Loadout | <input type="checkbox"/> Slurry Disposal Lines | <input type="checkbox"/> Refuse Conveyed Off Site |
| <input type="checkbox"/> Refuse Amendments Added | <input type="checkbox"/> Refuse Disposal Area | <input type="checkbox"/> Recycling Old Refuse Pile |
| <input type="checkbox"/> Underground Injection | <input type="checkbox"/> Coal Ash Disposal | <input type="checkbox"/> Pond Sludge Disposal |
| <input type="checkbox"/> Laboratory / Test Facility | <input type="checkbox"/> Other <i>(Specify)</i> : _____ | |

Part II: Cleaning /Washing Operations N/A

A. Provide names, composition and quantities of chemicals *(pH adjustment, flocculants, antifreeze etc.)*, oils, heavy media or other material used in the cleaning or refuse circuits:
(pH adjusters, refuse amendments, flocculants, heavy media and antifreeze must be addressed at a minimum)

B. Are there emergency containment structure(s) able to hold 110% or more of the plant's designed total slurry volume and dedicate solely for that purpose?

Yes No *(If "NO" justify below why less volume is designed)*

C. Is thermal drying practiced or proposed at this facility?

No Yes *(If "Yes" describe below the handling and disposal of the coal ash generated by it.)*

Part III: Plot Plan & Flow Diagram

- A.** Include a Plot Plan (Labeled as "Exhibit 6-III-A") of the operations in "Part I & II" showing: *(This can be included on the "Exhibit 1-VI-A" map if all information required can clearly be shown)*
1. Location of the different units such as crusher house, cleaning units, thickeners, dryers, coal piles (*raw & clean*), pressure/vacuum filters, temporary refuse piles, slurry lines, haulroad, etc.
 2. Location of any testing facilities or labs
 3. Location of all water sprays for dust and/or truck washes
 4. Location of all treatment ponds, dams, sediment ditches, treatment plant, intake water, etc.
 5. Location of all structures used to channel effluent (*berms, ditches, culverts, etc.*)
 6. Designed flow directions using contour lines and/or flow arrows.

- B.** Provide a flow diagram of the operations in "Parts I & II" showing the following:
1. Each unit such as belts (*coal & refuse,*), sprays, screens, crusher, coarse & fine cleaning units, thickeners, filters, dryers, intake water sources, water & slurry lines, water tanks, etc.
 2. Designed capacity of each unit and final product in tons per hour (TPH)
 3. Water flow to and from each unit in gallons per minute (GPM)
 4. Seasonal flow variation of the intake water source, and the amount to be used by the facility

Part IV: Maintenance & Disposal

- A.** Will materials other than those produced by this facility be disposed of at this facility (*Coal ash, etc.*)?
- No Yes (If "Yes" Include "Module 4")

- B.** Will there be underground workings below any area of disposal?
- No Yes (If "Yes" Include "Module 5")

- C.** Will there be underground workings be used for disposal at this facility?
- No Yes (If "Yes" Include "Module 10")

- D.** Will slurry lines be used to transport materials produced by this facility or that will be disposed of at this facility (*slurry, sludge, coal ash, etc.*)?
- No Yes (*If "Yes" Describe the maintenance and monitoring procedures for slurry lines*)
-
-
-
-

- E.** Addresses the materials used or encountered in operations involving dust control, routine washdown/maintenance, and pretreatment of transportation equipment. Describe the materials, when, where and how they are used, plus their handling and disposal.
-
-
-
-

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Module 7: Effluent Treatment

Part I: Physical Treatment

A. Provide construction specifications, calculations and drawings of each physical treatment unit including all dimensions, cross sections, profile, plan view, flow calculations, entrance and exit design, pool elevation, maintenance procedures, pond sludge (*removal, disposal, and placement*), etc.

See "Attachment 2-II-C" See _____

(Article 3 information must be in joint application)

Part II: Chemical Treatment

A. Based on information provided in "Modules 2, 3 & 4", the geologic history of the facility site, will additional treatment (*other than physical*) of the effluent be necessary to meet the effluent limits? (*This includes but is not limited to chemical reagents, passive treatment, biological treatment, sewage treatment etc.*)

No (*go to "C"*) Yes or Possibly

B. Submit drawings with explanation of the proposed additional treatment system(s). The following information shall be included:

1. Types of reagents to be used;
2. Type of dispenser, contact unit or median to be used. If commercial unit, indicate make, model;
3. Type of aeration and/or mixing system;
4. Construction specifications including sizes, dimensions, designed flows, maintenance and treated sludge removal and disposal;
5. Description of how the treatment system will be protected against floods, power failure, vandalism; and a contingency plan should protection fail;
6. Explanation and illustration of how the additional treatment system will be used in conjunction with the proposed physical treatment;
7. Demonstration that the design of the additional treatment combined with the physical treatment is adequate to meet the limits prescribed by state and federal laws;
8. Describe the effluent quality capable of being achieved from the disposal system with respect to pH, total iron, total manganese, acidity, alkalinity, aluminum, and total suspended solids, BOD, COD, TOC, and unionized ammonia;
9. If sewage treatment system is to be used include "Module 9" with this application.

C. If no chemical treatment is being planned, what action will be taken if any unexpected pollution problems should arise during the operation of this permit?
(Include immediate actions and remedial measures that will be taken to prevent further pollution)

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Module 8: Abandonment Plan

Part I: General Abandonment Information

A. This module is being submitted for compliance with: *(Mark appropriate boxes)*

Plan for Abandonment. (All NPDES Permits) 47CSR30 Section 4.5.2.k
The information required in a plan for abandonment pursuant to Section 4.5.4 of these regulations.

Permit to Abandon. (WVSCMRA Permits) 47CSR30 Section 4.4.2
Any person proposing to abandon a deep mine facility under W. Va. Code § 20-5A-5(b)(6) [now § 22-11-8(b)(6)] and Section 3.1.1.e of these regulations shall apply for an abandonment permit at least one hundred and eighty (180) days prior to the sealing of the deep mine. Any person proposing to abandon a surface mine facility under W. Va. Code § 20-5A-5(b)(6) [now § 22-11-8(b)(6)] and Section 3.1.1.e of these regulations shall apply for an abandonment permit with a request for Phase II bond release under WVSCMRA. (See instruction for "remining" sites)

Permit to Abandon. (Non WVSCMRA Permits)
Any person proposing to abandon a surface facility under W. Va. Code § 20-5A-5(b)(6) [now § 22-11-8(b)(6)] and Section 3.1.1.e of these regulation, that is not regulated under WVSCMRA, shall apply for an abandonment permit at least one hundred and eighty (180) days prior to the removal of the last point source discharge (outlet).

B. Does the facility involve only surface operations (*surface mines, preparation plants, loadouts, etc.*)?

No Yes *(If "Yes" go to Part III)*

Part II: Deep Mine Abandonment

N/A

A. Provide a Mine Development Map extending a minimum of 1,000 ft. beyond the limits of the proposed operation showing: *(Label "Exhibit 8-II-A")* See _____

1. Seam structural contours at 10 foot intervals with surface elevation contours at intervals not to exceed those on the latest USGS 7.5 minute quadrangle, and any fault or weak planes;
2. All wells and any protection zones around them (*gas, oil, injection, water, etc.*)
3. In different colors show the mine boundary; limits of mining (*dated*); thickness of barriers against the outcrop and/or any adjacent mining (*deep, surface or auger*);
4. Predicted final water elevation in the proposed mine, and area of containment for injections;
5. Show outline of all overlying, adjacent and underlying deep mine operations (*indicate if active, inactive or abandoned*), their water pool elevation and discharge points; (*if proposed operation discharges through adjacent mines final discharge point must be shown*)
6. Discharge locations of drainage to surface or adjacent mines (*show any dewatering pumps*)
7. Proposed location of all mine seals and sectionalization dams, if any;
8. All mine entries and boreholes with surface and seam elevations;
9. North line; general strike and dip direction of the mineral bed and average dip.

B. What is the current, estimated (*over next five years*) and upon abandonment the maximum daily flow rate (*in cu.ft. per sec.*) from the existing or proposed mine?

| | | | | | | |
|----------|---------|-----|-----------|-----|-----------|-----|
| Pumped: | Current | cfs | Estimated | cfs | Abandoned | cfs |
| Gravity: | Current | cfs | Estimated | cfs | Abandoned | cfs |
| Total: | Current | cfs | Estimated | cfs | Abandoned | cfs |

C. Explain how the estimated and abandoned flows were calculated.

D. Drainage will be through *(check appropriate categories)*:

Drift Slope Shaft Borehole(s) Adjacent Works (type) _____

(Active/Inactive/Abandon)

E. Submit in narrative form the following information: *(Label as "Attachment 8-II-E")*

- Describe the type of treatment the discharge will require (if any), or if treatment will not be required the reasons for assuming so.
- Address the possible effects on water quality *(surface and ground)* and plans to eliminate or minimize any adverse effects on the quality of these waters.
- Report the quality of water discharged from the mine during the past two years, and/or a prediction of expected discharge quality if a discharge occurs. *(For final abandonment only)*

F. Indicate the type and number of permanent seals proposed *(entries, boreholes, between mines etc.)*, their design details, drawings and materials to be used for construction. *(Label as "Attachment 8-II-F")*

See "Attachment 8-II-F" See _____

(The information must be in joint application)

G. Provide at least one representative cross-section along a line parallel to the dip of the mineral bed showing: *(Label as "Exhibit 8-II-G")*

- Coal seam(s) and all strata from twenty feet below the lowest seam mined up to the surface.
- The USGS name and thickness of each strata and coal seam.
- The final likely level of water in the mine(s) on abandonment.
- The likely extent of fracturing in the overburden due to mining.

(The line of cross-section must be shown on "Exhibit 8-II-A")

Part III: Surface Operation Abandonment

A. Provide a description of how the operation will be conducted, backfilled, regraded and revegetated to eliminate or minimize any adverse effects on hydrological regime. Include information and drawings required to adequately support the plan. At a minimum include the following:
(Label as "Attachment 8-III-A")

- Provide a plan for removing, burying, blending, segregating, and/or treating acid /toxic material encountered in the operation.
- Include ample cross-sections *(to scale)* to represent the area disturbed by the operation depicting the surface configuration prior to operations, during operations and at abandonment. The cross-sections shall be shown on the "Plot Plan" and identify *(at a minimum)* (a) All materials requiring special handling *(iron or acid producing materials etc.)*; (b) Regrading and topsoiling material storage or borrow areas; (c) Limits of proposed disturbed areas.
- Provide a plot plan *(to scale)* showing regraded drainage pattern and all treatment structures.

See "Attachment 8-III-A" See _____

(The information must be in joint application)

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Module 9: Sewage Material Disposal Facility

This application is for a new sewage facility. an existing sewage facility.

Part I: Facility Information

A. Facility Name: _____

Mailing Address: _____ *(If P.O. Box show*

Street Address: _____ *street address also)*

Town _____ State _____ Zip _____ Phone No. _____

Physical Location of Facility: County _____ Nearest P.O. _____

Facility Contact: _____ *(Name and Title)* _____ *(Phone)*

Part II: Owner/Operator Information

A. Name of Owner: _____

Mailing Address: _____ *(If P.O. Box show*

Street Address: _____ *street address also)*

City _____ State _____ Zip _____ Telephone No. _____

(If operator is different than the owner complete all of "B" below; otherwise write "SAME" in name blank)

B. Name of Operator: _____

Mailing Address: _____ *(If P.O. Box show*

Street Address: _____ *street address also)*

City _____ State _____ Zip _____ Telephone No. _____

C. Category of applicant *(Check appropriate category; if "other" specify type)*

Federal State Private Public Other _____

Part III: Applicant Request

A. The applicant is requesting a state NPDES permit to acquire, construct, install and operate a sewage, industrial waste, or other waste into the waters of the state, in accordance with Chapter 22, Article 11, Section 8. In addition we are requesting the following:

A certificate to construct a sewage disposal system or part thereof, in accordance with Chapter 16, Article 1, Section 9

Part IV: Existing Permits & Applications

A. List all existing environmental permits and applications by type, number, effective and expiration dates.

| Issuing Agency | Type of Permit/ Application | Permit/ Application No. | Effective Date YR/MO/DAY | Expiration Date YR/MO/DAY |
|----------------|--------------------------------|----------------------------|-----------------------------|------------------------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Part V: Applicant Certification

A. I certify under penalty of law that this application 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.

_____ (Typed or Printed Name and Title of Official) _____ (Signature in accordance with Title 47, Series 30, Section 4.7.1)

Taken, subscribed and sworn to before me the undersigned authority on _____ in
 _____ county of _____

_____ (Commission expiration date)

_____ (Signature of Notary Public) _____ (Seal)

Part VI: Description of Discharge

A. Provide the following information on the sewage discharge:

- Discharge Outlet No. _____ Discharge Point Name _____
- Latitude: _____ deg _____ min _____ sec Longitude: _____ deg _____ min _____ sec
- Receiving Stream: _____ tributary of _____
 tributary of _____ tributary of _____
- Distance to mouth of immediate receiving stream: _____ Miles (to the nearest tenth)
- Does discharge contain (or is it possible for discharge to contain) one or more of the following substances as a result of the operations, activities, or processes: Ammonia, Cyanide, Aluminum, Beryllium, Cadmium, Chromium, Copper, Lead, Mercury Nickel, Selenium, Zinc, Phenols, Oil and Grease and Chlorine (residual)? Yes No

Part VII: Facility Description

A. The sewage plant/facility services: *(Mark all boxes below that apply)*

Mine Bathhouse Mine Office Other *(specify)* _____

(Enter appropriate number in space provided below)

Number of Persons _____ Number of Buildings _____ Total Acres _____

Part VIII: Description of Sewage Disposal System

A. Provide the following information on the Collection System.

| Sewer Lines | | | | | Forced Mains | |
|-------------|-----------|-------------|------------|-------------------|--------------|-------------|
| Type (ASTM) | Size (in) | Length (ft) | Joint Type | Ground Cover (ft) | Size (in) | Length (ft) |
| | | | | | | |
| | | | | | | |
| | | | | | | |

Number of Manholes: _____ Number of Cleanouts: _____ Number of Lift Stations: _____

B. Treatment Plant

1. Mark the type of treatment system used. *(If "other" is marked specify type)*

Extended Aeration Stabilization Pond Package Plant Other _____

2. Flow: Existing (GPD) _____ Designed (GPD) _____

3. Type of Pretreatment _____

4. Type of Disinfection _____

5. Sizes *(Show any additional units used in spaces provided)*

| Unit | Size | Unit | Size |
|--------------------------|------|---------------------------|------|
| Aeration Chamber | | Polishing Pond (CuFt) | |
| Blower | | Chlorine Contact Chamber | |
| Clarifier Total (CuFt) | | Stabilization Pond (CuFt) | |
| Clarifier Surface (SqFt) | | Post Aeration Unit | |
| | | | |
| | | | |

C. Provide a plan view, of a reasonable scale, showing the sewage system to include:

- All units (buildings) being served. Label each unit (bathhouse, coal lab, prep. plant, etc.).
- All collection/connection lines labeled with diameter sizes.
- All manholes, cleanouts and/or lift stations.
- All treatment units of the system (aeration chambers, contact chambers, leach fields, stabilization ponds, polishing ponds, filter beds etc.) as they will be (or are) installed at the facility.
- Title block, scale and North arrow.

See "Attachment 9-VIII-C" See _____

(If Article 3/4 information is referenced it must be in joint application)

Part IX: Description of Operation and Maintenance

A. Will a certified operator run the facility? Yes *(If Yes, list certification)*
 Certified Operator Classification _____

B. Describe the duties of the operator to include frequency of inspection. _____

C. List sewage treatment plant operating and wastewater testing equipment to be used and their availability on site: _____

D. Describe method of excess sludge disposal. _____

E. Describe provisions for operational reliability for the plant during period of power failure: _____

Part X: Modification of Existing Permit

NA

A. The applicant must present a detailed description, including drawings, water analyses, etc. supporting the need for the modification. A schedule of compliance (completion of final plans, commencement and completion of construction, operational level date, etc.) beginning at the time of permit modification issuance must also be provided where applicable.

Municipal/Package Sewage Treatment Discharge Load Allocation

Outlet Number _____

Date _____

PART A - TO BE COMPLETED BY APPLICANT

Have any prior applications been made for this facility? No Yes. If yes, give dates of prior applications below.

I. Owner of the Wastewater system _____
 Address _____
 Form Submitted by _____ Phone # _____
 Mailing Address _____

II. Treatment Facilities location _____

III. Discharge point location (the discharge point refers to the exact location of the pipe outlet from the treatment facility):
 A. Name of the county where discharge point is located: _____

B. Name of U.S.G.S. 7.5 minute topographic map: _____
TOPO MAP OR COPY OF THE TOPO MAP SHOWING THE FACILITY LOCATION, EFFLUENT PIPELINE, AND DISCHARGE POINT MUST BE ATTACHED (See item 3, instructions)

C. Immediate receiving stream is _____ which is a tributary of _____ (see item 4, instructions)

D. Does the immediate stream have a continuous year round flow? No Yes

E. The discharge point on the immediate stream is _____ miles (to the nearest tenth) from the mouth of the immediate stream.

F. Within five miles downstream from the discharge point, does the receiving stream have a domestic water supply intake?
 No Yes: _____ an impoundment? No Yes

G. Latitude and Longitude of discharge point to the nearest second.
 Latitude: _____ Longitude: _____

H. If area of watershed above the discharge point to the immediate stream is less than 200 square miles, give measured drainage area from the U.S.G.S. Topographic map: _____ square miles (see item 5, instructions).

IV. Facility Description

A. Purpose of facility (mobile home park, motel, bathhouse, etc.) _____

B. Will this treatment plant handle sewage from towns/entities other than the owner listed above?
 No Yes. If yes, list all other towns/entities _____

C. Will this facility be used for industrial waste? No Yes. If yes, give % flow from industrial users _____

D. Design criteria (see item 6, instructions):

| | | | |
|-----------------------|----------------------|-------|----------------------|
| | <u>existing</u> | | <u>design</u> |
| No. of persons | _____ | _____ | _____ |
| Flow per person | _____ gal/day/person | _____ | _____ gal.day/person |
| Total wastewater flow | _____ gal/day | _____ | _____ gal/day |

V. A. Distance to the nearest public sewer _____

B. Street or other location of nearest public sewer _____

C. Give reason why the public sewer is not being used: (see item V, conditions) _____

THE INFORMATION USED FOR THIS MODULE CANNOT BE REFERENCED TO OTHER PORTIONS OF THIS APPLICATION

PART B - TO BE COMPLETED BY THE DIVISION OF ENVIRONMENTAL PROTECTION, OFFICE OF WATER RESOURCES

| | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|-------------|----------------------------|
| Date: _____ Design Pop: _____ Design Flow: _____ Segment _____ Trout: Yes _____ No _____ 7/Q/10 _____ cfs mgd graph: _____ sta: _____ Ratio _____ | Allowable Waste Load (30-day average) | | |
| | Parameter | conc.(mg/l) | lbs/day |
| | UBOD | | |
| | BOD5 | | |
| | NH ₃ | | |
| | TKN | | |
| | SS | | |
| | DO | | Bacteria Disinfection req. |
| TRC | | | |

INSTRUCTIONS

1. If more space is needed to answer fully any questions on this application, use separate sheet. Identify each answer with the number of corresponding question.
2. As a rule, the treatment requirements are dependent on the flow and other characteristics of the immediate receiving stream. In certain cases it may be cost-effective to pipe the effluent to another stream with less stringent requirements.
3. The U.S.G.S. Topographic maps are available at most bookstores within the state, or they may be obtained by writing to: Eastern Region-Map Distribution, United States Geological Survey, 1200 South Eads Street, Arlington, Virginia 22202.
4. If the immediate receiving stream is an unnamed tributary, indicate it as such. If no stream is available, explain where the effluent will be disposed.
5. The drainage area of the watershed above the discharge point is extremely important and should be measured as precisely as possible. Incorrect values of drainage area will lead to an erroneous allocation and possible permit revocation at a later date.
6. The design criteria to calculate the flow/person/day can be obtained from pamphlet EG-6, "Permit Procedure and Design Requirements for Small Sewage and Water Systems", Division of Sanitary Engineering, West Virginia Department of Health, Charleston, West Virginia. If the design criteria used is different from the one specified by the Department of Health, attached an explanation for the difference.

CONDITIONS

In establishing the above allocations, the engineer and/or applicant is cautioned that:

- I. The allocation is based on current conditions and should be reaffirmed after a lapse of six (6) months.
- II. The allocation does not relieve discharger(s) from meeting the Water Quality Standards established for the receiving waters.
- III. Advance approval is not intended for treatment facilities as a result of this allocation.
- IV. Application for appropriate permits is required and compliance with all applicable State Laws, rules and regulations pertaining to wastewater collection and treatment facilities is mandatory.
- V. Should the review of the application for a package plant discharge indicate that the area may be serviceable by a proposed municipal or PSD system, the above allocation may be considered temporary and valid only until the connection to the public facility is feasible.

Application for NPDES/ARTICLE 11 WATER POLLUTION CONTROL PERMIT

STATE OF WEST VIRGINIA

NPDES Permit # WV _____

Module 10: Underground Disposal

Part I: Material Type & Location

A. Provide the type of material (coal ash, waste water, sludge, coal slurry/refuse, etc.) that will be disposed of, the name(s) of the mine name and/or permit/ID number into which the material will be deposited as well as the mines status below:

| | | | |
|-----------------------|--|--|--|
| Type of Material | | | |
| Name | | | |
| Surface Mine Permit # | | | |
| AML Inventory Site # | | | |
| NPDES Permit # | | | |
| Active | | | |
| Inactive | | | |
| Abandoned | | | |
| Date of Abandonment | | | |

Part II: Approvals

A. Has the plan for disposal of wastewater, mine water, sludge or slurry into this mine been approved by the Office of Miner's Health, Safety and Training?

- No If No, provide details Yes If Yes, provide copy of approval

B. 1. Is the plan of disposal approved by the active/inactive underground mine permittee(s)?

- No Yes (If Yes, provide copy of approval) N/A (no permittee(s) exist)

2. Is the plan of disposal approved by the mineral owner(s)?

- No Yes (If Yes, provide copy of approval)

3. Is the plan of disposal approved by the surface owner(s)?

- No Yes (If Yes, provide copy of approval)

C. Does the facility have a valid Underground Injection Control (UIC) permit issued by WVDEP?

- No Applied for on _____ Yes (Provide permit No. and issuance date in Module 1, Part IV)

Part III: Map Requirements

A. Provide a map of the area material is to be disposed in, and/or injected into, showing the following:
(Label: "Exhibit 10-III-A):

1. All of the deep mine workings used for material disposal.
2. Area(s) already flooded in the mine.
3. Strike, dip and height of the mine seam.
4. Seam structural contours and surface contours at twenty (20) foot intervals.
5. Location of faults, weak planes, subsidence cracks.
6. Cut throughs, punch outs, shafts, boreholes, wells *(domestic and production)*.
7. The area of containment used for material disposal.
8. All points of entry of material and mine discharge points.
(Exhibit 1-VI-A or 8-II-A can be used to show this information, if it can be clearly shown on that map)

Part IV: Maintenance

A. Describe the maintenance and monitoring procedures that will be followed to prevent pollution of the waters of the state?

Part V: Effects of Disposal

A. Is this mine discharging into the surface waters of the state? No Yes
(If "YES" provide analysis, including flow, in Mod. 3 Part III, and coordinates for discharge(s) in Mod 2 Part I)

B. What will be the effect of the disposal of the material into the mine on the groundwater quality in the mine area or neighboring areas?

Part IV: Required Additional Information

A. Address each section of the approved application that is changed or affected by the proposed modification(s). If this modification is to add a new type of operation to the permit then include any modules (*in their entirety*) that are required for that type of operation if they were not previously submitted and approved as part of the permit. Label each section being addressed by Module, Part and Section (Example: Mod I, Part II, Section B). (*see instructions for more details*)

Part V: Applicant Certification

A. I certify under penalty of law that this application and all attachments were prepared under the 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.

| | |
|--------------------------------------------------------------------------------|--------------------------------------------------------------------------|
| <i>(Typed or Printed Name and Title of Official)</i> | <i>(Signature in accordance with Title 47, Series 30, Section 4.7.1)</i> |
| Taken, subscribed and sworn to before me the undersigned authority on _____ in | |
| _____ county of _____ . | |
| <i>(Commission expiration date)</i> | |
| <i>(Signature of Notary Public)</i> | <i>(Seal)</i> |

Application for NPDES/ARTICLE 11 WATER POLLUTION CONTROL PERMIT STATE OF WEST VIRGINIA

NPDES Permit # WV _____

Module 12: Transfer Form

WVDEP Region # _____

Date(s) Submitted: _____

Permit Issuance Date: _____
(Original issuance or last reissuance date)

Required Reissuance filing Date: _____
(120 days prior to expiration date)

Transfer
Number: _____

Part I: Applicant (Transferee) Information

A. Name: _____

Mailing Address: _____ *(If P.O. Box show street address also)*

Street Address: _____ *street address also*

Town _____ State _____ Zip _____ Telephone No. _____

B. Category of applicant *(Check appropriate category; if "other" specify type)*

Federal State Private Public Other _____

Part II: Current Owner (Transferor) Information

A. Name: _____

Mailing Address: _____ *(If P.O. Box show street address also)*

Street Address: _____ *street address also*

Town _____ State _____ Zip _____ Telephone No. _____

B. Category of applicant *(Check appropriate category; if "other" specify type)*

Federal State Private Public Other _____

Part III: Transfers and Additional Responsibilities

A. If any of the following are proposed *(with this application)* include the appropriate attachments:

- To allow effluent from operations, owned by persons or organizations other than the applicant, to be discharged through any point source associated with this permit that is not currently permitted to do so. No Yes *(If YES, include Module 1R)*
- To transfer the Groundwater Protection Plan. No Yes *(If YES, include MR-5GT)*

Part IV: Facility Information

A. Facility Name: _____

Mailing Address: _____ *(If P.O. Box show street address also)*

Street Address: _____ *street address also)*

Town _____ State _____ Zip _____ Phone No. _____

Physical Location of Facility: County _____ Nearest P.O. _____

Facility Contact: _____ *(Name and Title)* _____ *(Phone)*

Part V: Environmental Permits

A. List the following information for all existing or required environmental permits for this facility.
(If effluent from one facility is treated under another NPDES permit list that permit ending with a "/R")

| ISSUING AGENCY AND ADDRESS | TYPE OF PERMIT | PERMIT OR ID NUMBER | DATE ISSUED | EXPIRATION DATE |
|--------------------------------------------------|----------------|---------------------|-------------|-----------------|
| WV DEP Office of Water Resources | NPDES/Art 11 | | | |
| WV DEP Office of Water Resources | UIC | | | |
| WV DEP Office of Waste Management | Solid Waste | | | |
| WV DEP Office of Air Quality | Article 5 | | | |
| WV Health Department | Sewage | | | |
| WV Public Land Corporation | | | | |
| US Army Corps of Engineers | | | | |
| WV DEP Office of Mining & Reclamation (List all) | Quarry/Art 4 | | | |
| WV DEP Office of Mining & Reclamation (List all) | Dam Control | | | |
| WV DEP Office of Mining & Reclamation (List all) | SMCRA/Art 3 | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Part VI: Certifications of Transfer

In accordance with Title 47 of the Legislative Rules, Series 30 (West Virginia NPDES Regulations for Coal Mining Facilities), it is hereby requested that all terms, conditions, liabilities and responsibilities of WV/NPDES Permit No. _____

be transferred from _____
(Transferor; Name of Existing Permittee)

and transferred to _____
(Transferee; Name of Proposed Permittee)

It is further requested that this transfer become effective as of _____
(If requesting transfer under Title 47, Series 30, Section 3.5.4 enter date, otherwise enter N/A and effective date will be approval date)

| TRANSFEROR | TRANSFeree |
|------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|
| | |
| <i>(Name of Existing Permittee)</i> | <i>(Name of Proposed Permittee)</i> |
| <i>(Typed or Printed Name and Title of Official)</i> | <i>(Typed or Printed Name and Title of Official)</i> |
| <i>(Signature in accordance with Title 47, Series 30, Section 4.7.1)</i> | <i>(Signature in accordance with Title 47, Series 30, Section 4.7.1)</i> |
| Taken, subscribed and sworn to before me the undersigned authority on _____ in _____ county of _____ | Taken, subscribed and sworn to before me the undersigned authority on _____ in _____ county of _____ |
| My Commission expires _____ | My Commission expires _____ |
| <i>(Signature of Notary Public)</i> | <i>(Signature of Notary Public)</i> |
| <i>(Typed or Printed Name of Notary Public)</i> | <i>(Typed or Printed Name of Notary Public)</i> |
| <i>(Reproducible Notary Public Seal)</i> | <i>(Reproducible Notary Public Seal)</i> |

Application for
NPDES/ARTICLE 11 WATER POLLUTION CONTROL PERMIT
 STATE OF WEST VIRGINIA

NPDES Permit # WV

Module 13: Remining

Part I: Baseline Sampling Data

- A.** Provide a "Table 13-I-A" for each pre-existing discharge from the remining area. The sampling must occur, at a minimum, over a twelve (12) consecutive month period, with samples being taken twice monthly at regular intervals. Analyze the samples for the following parameters at a minimum: Flow, Total Iron, Total Manganese, Total Hot Acidity as CaCO₃, Alkalinity as CaCO₃, pH, Sulfates as SO₄, Total Aluminum, Dissolved Solids and Specific Conductance. A minimum of twenty four consecutive baseline samples and their analyses are required to calculate re-mining limits. Use a separate table for each discharge.
- B.** Provide a "Table 13-I-B" for each in-stream monitoring station showing the impact of the pre-existing discharges from the remining area. An up-stream and a down-stream monitoring station must be established on the immediate receiving stream for each sampling point established in section "A" above. The sampling must occur, at a minimum, over a period of twelve (12) consecutive month periods, with samples being taken twice monthly at regular intervals and on the same day as the pre-existing discharge samples they represent. The samples must be analyzed for the following parameters at a minimum: Flow, Total Iron, Total Manganese, Total Hot Acidity as CaCO₃, Alkalinity as CaCO₃, pH, Sulfates as SO₄, Total Aluminum, Dissolved Solids and Specific Conductance. A minimum of twenty four consecutive baseline samples and their analyses are required to calculate re-mining limits. Use a separate table for each station.
- C.** Provide a "Table 13-I-C" for each pre-existing discharge and each in-stream monitoring station analysis provided per Part A and B above. Calculate the loading in pounds per day (lbs/day) of each sample for each pre-existing discharge or monitoring station. Loading shall be calculated for the following parameters: Total Iron, Total Manganese, Total Hot Acidity as CaCO₃. Use a separate table for each discharge or station.

Part II: Qualification Information

- A.** Provide a demonstration that the proposed remining site is located on a site on which coal mining was conducted prior to August 3, 1977. *(Label as Attachment 13-II-A)*

Part III: Abatement Plans

- A.** Provide a description of all abatement actions considered for the site and the reasons why the chosen abatement plan is preferred. *(Label as Attachment 13-III-A)*
- B.** Provide the abatement plan chosen. Include details of how it will be accomplished and why such a plan will result in improved water quality in the receiving stream. *(Label as Attachment 13-III-B)*

Part IV: Daily Max. and Monthly Average Limits

A. Based on the pre-existing discharge data provided in "Part I-C" calculate the "Daily Max." and "Monthly Average" Best Professional Judgment (BPJ) loading limits for total iron, manganese, and hot total acidity for each remaining outlet proposed. (See instructions for computing Daily Max. and Monthly Average. Monthly average must be calculated for both summer/fall and winter/spring seasons.)

| Outlet No. | Season | Total Iron | | Manganese | | Hot Total Acidity | |
|------------|---------------|------------|-----------|-----------|-----------|-------------------|-----------|
| | | Daily Max. | Month Avg | Daily Max | Month Avg | Daily Max. | Month Avg |
| | summer/fall | | | | | | |
| | winter/spring | | | | | | |
| | summer/fall | | | | | | |
| | winter/spring | | | | | | |
| | summer/fall | | | | | | |
| | winter/spring | | | | | | |
| | summer/fall | | | | | | |
| | winter/spring | | | | | | |
| | summer/fall | | | | | | |
| | winter/spring | | | | | | |
| | summer/fall | | | | | | |
| | winter/spring | | | | | | |

Part V: Trend Line Monitoring Limit

A. Based on the pre-existing discharge data provided in "Part I-C" show the "mean" of the semi-monthly cumulative baseline sampling data contributing to each outlet for "Hot Total Acidity"

| Outlet No. | Contributing Pre-existing Discharges (ID Numbers) | Hot Total Acidity (lb./day) | Outlet No. | Contributing Pre-existing Discharges (ID Numbers) | Hot Total Acidity (lb./day) |
|------------|---------------------------------------------------|-----------------------------|------------|---------------------------------------------------|-----------------------------|
| | | | | | |
| | | | | | |
| | | | | | |

Part VI: Bond Release Limit

A. Based on the pre-existing discharge data provided in "Part I-C" calculate the cumulative loading rate (in tons/year) for the entire remaining site for total iron, manganese and hot total acidity. Use the following equation: Sum of All Pre-existing Discharges (by parameter) divided by Number of Samples (for all sites) times Conversion Factor (.1825) equals Tons Per Year

| Pre-existing Discharge ID No | No. of Samples | units | Cumulative Iron | Cumulative Manganese | Cumulative Total Hot Acidity |
|------------------------------|----------------|----------|-----------------|----------------------|------------------------------|
| | | lb./day | | | |
| | | lb./day | | | |
| | | lb./day | | | |
| | | lb./day | | | |
| TOTAL | | lb./day | | | |
| | TOTAL | tons/yr. | | | |

Application for
NPDES/ARTICLE 11 WATER POLLUTION CONTROL PERMIT
 STATE OF WEST VIRGINIA

NPDES Permit # WV _____

Module 14: Article 12 - Groundwater Protection Plan

Part I: Applicant Owner (Operator) Information

| | | | | |
|--------------------------|-------------|-----------------------------|---------------------|--|
| A. Applicant Name: _____ | | | | |
| Mailing Address: _____ | | <i>(If P.O. Box show</i> | | |
| Street Address: _____ | | <i>street address also)</i> | | |
| Town _____ | State _____ | Zip _____ | Telephone No. _____ | |

Part II: Facility Information

| | | | | |
|----------------------------------------------------|-------------|-----------------------------|-----------------|--|
| A. Facility Name: _____ | | | | |
| Mailing Address: _____ | | <i>(If P.O. Box show</i> | | |
| Street Address: _____ | | <i>street address also)</i> | | |
| Town _____ | State _____ | Zip _____ | Phone No. _____ | |
| <u>Physical Location of Facility:</u> County _____ | | Nearest P.O. _____ | | |
| | | | | |
| Article 3/4 Permits: _____ | | | | |
| Article 11 Permits: _____ | | | | |
| Facility Contact: _____ | | | | |
| <i>(Name and Title)</i> | | | <i>(Phone)</i> | |

Part III: Inventory of Manmade Potential Contaminants

| | |
|----|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| A. | <p>Complete "Table 14-III-A" listing all manmade potential contaminants at your facility. At a minimum, be sure to include all of the activities such as; distribution, loading and bulk facilities, drums, tanks, areas used for maintenance and/or cleaning of equipment, preparation plant, material handling and storage areas to include piping, ditching and pumping of material. For each area/site potential contaminants are found include the following information:</p> <ol style="list-style-type: none"> 1. Give a brief description of the potential contaminant with location <i>(Ex: Stockton bench portable diesel tank; or Heating oil tank for office building; etc.)</i>. 2. The specific type of potential contaminant <i>(Ex: Diesel Fuel, Sodium Hydroxide)</i>, 3. The type of container or storage system use at this site and it's size <i>(Ex: single wall steel tank on skids 750 gal; or 5 to 10 steel drums 55 gal)</i>, 4. The existing protective controls for the contaminant at that site <i>(Ex: 110 cuft of secondary containment by earthen dike lined with clay, containment barrels with oil absorbent materials for minor spills during fueling)</i> 5. Any proposed protective controls with a projected installation date <i>(Ex: A secondary containment of 114 cuft consisting of a concrete pad with block walls, sealed against leakage, is to be installed by 1 August, 1997)</i> |
|----|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

Part IV: Spill Response Plan

- A.** Provide a plan that will be followed when a leak or spill of a potential contaminant is detected at the facility. At a minimum provide the following: *(Label "Attachment 14-IV-A")*
1. The types of immediate action will be taken by the person finding the leak/spill to prevent further contamination. *(immediate actions taken, materials used, procedures followed, persons contacted, etc.)*
 2. Location and title/name of the person *(spill coordinator)* that is responsible for insuring the GPP is followed and to whom all leaks/spills are reported. *(use position not name, i.e. foreman, superintendent)*
 3. The procedures will the spill coordinator follow when contacted about a leak/spill. *(give procedures for each type of potential contaminant at the facility, by size of the leak/spill)*
 4. The actions will be taken should the spill be beyond the capability of the site personnel. *(provide who will be contacted in the case of such a situation and provide options to be taken)*
 5. How the contaminated materials collected from leaks/spills during routine maintenance of the GPP will be disposed of. *(if by private contractor give name and address of company or method by which contract is let)*

Part V: Training and Inspections

- A.** Provide procedures and schedules for initial and refresher training of employees, contract workers and site visitors concerning their involvement and the requirements of the "Spill Response Plan" for the site. *(Label "Attachment 14-V-A")*

- B.** Provide procedures for inspections *(min. every 6 months)* and routine maintenance operations to insure the Groundwater Protection Plan are in place and in good working order. *(Label "Attachment 14-V-B")*

Part VI: Monitoring Wells

- A.** Identify by type and number each groundwater monitoring site being used to monitor the GPP. List the latitude and longitude *(to the nearest second)*, the surface and bottom elevation of each station.
- See "Module 2, Part I-A"

| Station Type | Station No. | Latitude | | | Longitude | | | Elevation | |
|-----------------|-------------|----------|------|------|-----------|------|------|-----------|--------|
| | | Deg. | Min. | Sec. | Deg. | Min. | Sec. | Surface | Bottom |
| Monitoring Well | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

Part VII: Contaminants & Monitoring Wells Map

- A.** Submit a map showing the location of all items listed in "Part III" and "Part VI" above. Identify each on the map using the ID# show on "Table 14-III-A" or the Station No. for the monitoring well. The map shall be of the same scale as the "Exhibit 1-VI-A" map of Module 1 and must clearly show each site. *(rubber tired mobile tanks may be addressed by a note on the map, see instructions)*
- See "Module 1, Exhibit 1-VI-A" See "Exhibit 14-VII-A"

Part VIII: Applicant Certification

A. I, the undersigned, having examined this facility and this groundwater protection plan, will commit the resources to comply with this plan, the Groundwater Protection Act, and the applicable regulations.

(Typed or Printed Name and Title of Official)

(Signature in accordance with Title 47, Series 30, Section 4.7.1)

Taken, subscribed and sworn to before me the undersigned authority on _____ in
county of _____

(Commission expiration date)

(Signature of Notary Public)

(Seal)

TABLE 14-III-A
Potential Groundwater Contaminant Sources and Controls

Page _____ of _____

| | |
|-----|--------------------------|
| ID# | Item Description: _____ |
| | Material: _____ |
| | Container Type: _____ |
| | Existing Controls: _____ |
| | Proposed Controls: _____ |

| | |
|-----|--------------------------|
| ID# | Item Description: _____ |
| | Material: _____ |
| | Container Type: _____ |
| | Existing Controls: _____ |
| | Proposed Controls: _____ |

| | |
|-----|--------------------------|
| ID# | Item Description: _____ |
| | Material: _____ |
| | Container Type: _____ |
| | Existing Controls: _____ |
| | Proposed Controls: _____ |

| | |
|-----|--------------------------|
| ID# | Item Description: _____ |
| | Material: _____ |
| | Container Type: _____ |
| | Existing Controls: _____ |
| | Proposed Controls: _____ |

| | |
|-----|--------------------------|
| ID# | Item Description: _____ |
| | Material: _____ |
| | Container Type: _____ |
| | Existing Controls: _____ |
| | Proposed Controls: _____ |

Application for ARTICLE 12 GROUNDWATER PROTECTION PLAN TRANSFER

STATE OF WEST VIRGINIA

WVDEP Region #

Date Submitted

Part I: Applicant (Transferee) Information

| | | | |
|------------------------|-------------|-----------------------------|---------------------|
| A. Name: _____ | | | |
| Mailing Address: _____ | | <i>(If P.O. Box show</i> | |
| Street Address: _____ | | <i>street address also)</i> | |
| Town _____ | State _____ | Zip _____ | Telephone No. _____ |

Part II: Current Owner (Transferor) Information

| | | | |
|------------------------|-------------|-----------------------------|---------------------|
| A. Name: _____ | | | |
| Mailing Address: _____ | | <i>(If P.O. Box show</i> | |
| Street Address: _____ | | <i>street address also)</i> | |
| Town _____ | State _____ | Zip _____ | Telephone No. _____ |

Part III: Associated Permits

| | |
|----------------------------------------------------------------------------------------------|--|
| A. List below, by type, all permits that are associated with the Groundwater Protection Plan | |
| WV/NPDES _____ | |
| WV/SMCRA (Article 3 or 4) _____ | |

Part IV: Spill Coordinator Information

| | |
|---------------------------------------------------------|--------------------|
| A. The new spill coordinator for this facility will be: | |
| _____ | _____ |
| <i>(Name and Title)</i> | <i>(Phone No.)</i> |

Part V: Certification of Transferee

| | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|
| A. I, the undersigned, having examined this facility and this groundwater protection plan (GPP), will follow the GPP currently on file with the environmental inspector and commit all resources needed to comply with this plan, the Groundwater Protection Act, and the applicable regulations. | |
| _____ | _____ |
| <i>(Typed or Printed Name and Title of Official)</i> | <i>(Signature of Owner, Partner or Principal Officer)</i> |
| Taken, subscribed and sworn to before me the undersigned authority on _____ in _____ county of _____ | |
| _____ | |
| <i>(Commission expiration date)</i> | |
| _____ | _____ |
| <i>(Signature of Notary Public)</i> | <i>(Seal)</i> |