

MARYLAND DEPARTMENT OF THE ENVIRONMENT

P.O. Box 2057 ● Baltimore Maryland 21203
(410) 537-3634 ● 1-800-633-6101 ● <http://www.mde.state.md.us>

NOTICE OF INTENT AND INSTRUCTIONS

GENERAL DISCHARGE PERMIT NO. 06-CM

DISCHARGES FROM SURFACE COAL MINES AND RELATED FACILITIES

The operator of surface coal mines and related facilities must submit a notice of intent (NOI) to obtain coverage under the NPDES General Permit for Discharges from Surface Coal and Related Facilities (General Discharge Permit 00-CM). Operators of surface coal mines, both active and inactive, until reclaimed that discharge storm water runoff and ground water seepage must also submit a NOI for coverage under this permit.

If you have a question about whether you need this permit or any NPDES permit, contact the Maryland Department of the Environment, Wastewater Permits Program at 410-537-3634.

Submission of this Notice of Intent (NOI) constitutes notice that the party identified in Section I of this form intends to be authorized by a State/NPDES permit issued for discharges from the surface coal mines and related facilities identified in Section II of this form. Authorization to discharge begins upon notification of acceptance of this NOI by MDE. Complete all sections of this form and mail to Maryland Department of the Environment, P.O. Box 2057, Baltimore, MD 21203. **For proper credit, do not return application fee without this form. Areas in bold print are for MDE use only.**

SECTION I. PERMITTEE INFORMATION

List the legal name of the person, firm or other entity that operates the facility or site described in this application. The operator is the legal entity that controls the facility's operation. Use the full name and address of the operator. List the name and telephone number of the person to contact concerning information on the NOI.

Permittee Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Contact Person: _____ Telephone (____) _____

Billing address: (if different than above) _____

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If facility was registered under 00CM (previous permit), enter the registration number (00CM#####).

Enter the Federal Identification Number used for tax purposes. (This number is necessary if a refund is due to the facility.) _____

Do you need a copy of the Permit? _____ (Y/N)

Enter the worker's compensation insurance policy or binder number, and the name of the company that issued the policy. _____

SECTION II. MINE INFORMATION

Enter the facility or site's official or legal name and complete street address, including (nearest) town or city, state, ZIP code, and county. Provide the latitude and longitude of the facility to the nearest 15 seconds of the approximate center of the site. The latitude and longitude can be found on a relatively detailed map such as an ADC (book) county map, or can be looked up at www.geocode.com.

Name: _____

Location: _____

Nearest Town: _____ State: _____ ZIP: _____

County: _____ Latitude: _____ Longitude: _____

Verify Map Attached _____ (Y/N) Bureau of Mines Permit No. _____

Enter the total disturbed area of the facility in acres.

(Current) _____ Total _____

SECTION III. DISCHARGES

List all outfalls by number, location, and type of discharge; estimated flow in gallons per day (flow estimate is not required for haul road culverts); and name of receiving stream. Identify type as drainage from haul road culverts (C); or discharge from coal storage and loading areas, coal preparation plants or mining areas - active (A), proposed (P) or reclaimed (R). **Average flow for each outfall must be listed to complete your NOI.**

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Outfall No.	Location	Type	Flow	Receiving Stream
001				
002				
003				
004				
005				
006				

Additional outfalls? ____ (Y/N) (Use separate sheet) Watershed Basin code (if known) _____

SECTION IV. ANNUAL FEE

Submit the first year's annual fee based upon the average daily discharge volume from the facility. Circle fee submitted for proper credit.

<u>Average Daily Discharge Volume (gallons/day)</u>	<u>NOI Fee</u>
Less than 1,000	\$175
1,001 - 5,000	\$525
5,001 - 50,000	\$1,100
50,001 - 100,000	\$2,100
100,001 - 250,000	\$3,100

SECTION V. CERTIFICATION

A responsible corporate officer, partner, proprietor, or principal executive officer must certify the information submitted on the NOI to be true, or a manager delegated to sign such documents according to the corporate procedures.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature _____ Date _____

Print Name _____ Title _____

Facility No. _____ Receipt No. _____ Date _____
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