

MARYLAND DEPARTMENT OF THE ENVIRONMENT
 General Discharge Permit for Discharges from Surface Coal Mines and Related
 Facilities
 Notice of Intent (NOI) Permit No. 19-CM

DISCHARGE PERMIT NO. 19-CM

NPDES PERMIT NO. MDG850000

SECTION I: Facility Operator Information

| | | |
|---|---|---|
| (A) Owner/Operator Name | | |
| | | |
| (B) Primary Contact Name | Title | |
| | | |
| Telephone Number | Email Address | |
| | | |
| (C) Mailing Address | | |
| Street | | |
| | | |
| City | State | ZIP Code |
| | | |
| (D) IRS Employer Identification Number (EIN) | (E) Ownership Type - check below | |
| | <input type="checkbox"/> Private | <input type="checkbox"/> Federal <input type="checkbox"/> State/Local |
| (F) Worker's Compensation Insurance: | Insurance Company Name | Policy Number |
| | | |

SECTION II: Facility Information

| | | | |
|--|-------------------|------------------|---------------|
| (A) Name of Facility | | | |
| | | | |
| (B) Facility Address (if different than your mailing address) | | | |
| Street | | | |
| | | | |
| City | State | ZIP Code | County |
| | MD | | |
| For MDE use only: | Facility # | Receipt # | Date: |
| PCA 13710 | Comp Object 5710 | Suffix 411 | |

MARYLAND DEPARTMENT OF THE ENVIRONMENT
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Submission of this NOI constitutes notice that the party identified in Section I of this form intends to be authorized by a State/ National Pollutant Discharge Elimination System (NPDES) permit issued for discharges from Surface Coal Mines and Related Facilities, in Section II of this form. All information requested must be provided in order to be considered for authorization to discharge under this permit. Instructions are provided at the end of this form.

SECTION II (continued): Facility Information

(C) Provide the primary four-digit SIC code that best represents the principal products or activities provided by the facility.

| | |
|--------------|--|
| Primary SIC: | Description of your primary industrial activity: |
| | |

| | | | |
|---|--|-----------------------------------|--|
| (D) Latitude (in decimal degrees) | | Longitude (in decimal degrees) | |
|---|--|-----------------------------------|--|

| | | | |
|---|--------------------------|---|--|
| (E) Check here if you a new discharger | <input type="checkbox"/> | If not a new discharger, provide the previous registration (e.g. 00CM1234): | |
|---|--------------------------|---|--|

| | | | |
|---|--|--|--------------------------|
| (F) Total property size (in acres) | | (G) Check if your facility is inactive and unstaffed. | <input type="checkbox"/> |
|---|--|--|--------------------------|

(H) Identify the 8-digit identifier(s) and name(s) of the receiving water(s).

| | | |
|--|--|--|
| | | |
|--|--|--|

| | | |
|--|-------------------------------------|---|
| Identify which of these impairments have been identified for the receiving water(s). (Category 4a, 4b, 4c, or 5 waterbodies) | <input type="checkbox"/> Bacteria | <input type="checkbox"/> Pesticides |
| | <input type="checkbox"/> Biological | <input type="checkbox"/> pH |
| | <input type="checkbox"/> Ions | <input type="checkbox"/> Stream Modifications |
| | <input type="checkbox"/> Metals | <input type="checkbox"/> Sediments |
| | <input type="checkbox"/> Nutrients | <input type="checkbox"/> Toxics |
| | <input type="checkbox"/> PCBs | <input type="checkbox"/> Trash |

| | |
|---|--------------------------|
| Check here if any of the receiving water(s) are listed as high quality (Tier 2) | <input type="checkbox"/> |
|---|--------------------------|

| | | |
|----------------------------------|----------------------------------|---------------------------------|
| Check if stream is protected for | <input type="checkbox"/> Use III | <input type="checkbox"/> Use IV |
|----------------------------------|----------------------------------|---------------------------------|

| | |
|--|--|
| (I) Identify MDE's Bureau of Mines permit number: | |
|--|--|

SECTION III: Stormwater Pollution Prevention Plan (SWPPP) and Monitoring

The 19-CM permit does require you to evaluate and implement specific control measures and effluent limits. It requires you to perform quarterly routine facility inspections and annual comprehensive site compliance evaluation. It requires you to update your SWPPP to encompass the new controls required and provide this in conjunction with your NOI, and then keep an updated SWPPP onsite.

| | | |
|--|------------------------------|-----------------------------|
| (A) Has the SWPPP been prepared in advance of filing this NOI, as required? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
|--|------------------------------|-----------------------------|

(B) Stormwater Pollution Prevention Plan (SWPPP) Primary Contact (if different than section I.B)

| | | | |
|-------|--|--------|--|
| Name: | | Title: | |
|-------|--|--------|--|

| | |
|-------------------|--|
| Telephone Number: | |
|-------------------|--|

| | |
|----------------|--|
| Email Address: | |
|----------------|--|

| | |
|--|--|
| SWPPP Delivery Method (URL, email, etc.) | |
|--|--|

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SECTION IV: Discharge Information

For each discharge, identify the outfall number, outfall location (latitude and longitude), estimated flow (in gallons per day), type of discharge, and receiving water(s). See "Instructions" for further details.

Outfalls Information: (Attach a separate list if necessary)

| List all of outfalls from your facility. Each outfall must be identified by a unique 3-digit ID (e.g. 001, 002). | | Type of Discharge | Receiving Water |
|--|------------|--------------------------|------------------------|
| Outfall ID | 001 | | |
| Latitude (decimal) | | | |
| Longitude (decimal) | | | |
| * Identical Outfalls | | | |
| * Flow (GPD) | | | |
| Outfall ID | | | |
| Latitude (decimal) | | | |
| Longitude (decimal) | | | |
| * Identical Outfalls | | | |
| * Flow (GPD) | | | |
| Outfall ID | | | |
| Latitude (decimal) | | | |
| Longitude (decimal) | | | |
| * Identical Outfalls | | | |
| * Flow (GPD) | | | |
| Outfall ID | | | |
| Latitude (decimal) | | | |
| Longitude (decimal) | | | |
| * Identical Outfalls | | | |
| * Flow (GPD) | | | |
| Outfall ID | | | |
| Latitude (decimal) | | | |
| Longitude (decimal) | | | |
| * Identical Outfalls | | | |
| * Flow (GPD) | | | |

* Flow is required for effluent limits.

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SECTION V: Chemical Additives

Will you use chemical additives? Yes Will you use cationic chemical additives? Yes

The use of any cationic chemical additives, that will mix with stormwater or that might otherwise become part of the effluent discharged, is prohibited without prior approval. To obtain approval, refer submit a signed **Request for Cationic Chemical Additive Form** and refer to the **Use of Treatment Chemicals Guidance Document** for further requirements.

SECTION VI: Permit Fee Selection – ONLY REQUIRED FOR NEW APPLICANTS ⁽¹⁾

| | | |
|---|---------|--------------------------|
| Average Daily Discharge Volume: Less than 1,000 Gallons Per Day | \$175 | <input type="checkbox"/> |
| Average Daily Discharge Volume: 1,000—5,000 Gallons Per Day | \$525 | <input type="checkbox"/> |
| Average Daily Discharge Volume: 5,001—50,000 Gallons Per Day | \$1,100 | <input type="checkbox"/> |
| Average Daily Discharge Volume: 50,001—100,000 Gallons Per Day | \$2,100 | <input type="checkbox"/> |
| Average Daily Discharge Volume: 100,001—250,000 Gallons Per Day | \$3,100 | <input type="checkbox"/> |

SECTION VII: Certification

To be completed by a responsible corporate officer, proprietor, general partner, principal executive officer, or ranking elected official or their duly authorized representative, as detailed in Part II.C of the permit.

"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/Certifier | Date |
| | |

| | |
|--|------------------|
| Signatory Name/Title: Typed or Printed | Telephone Number |
| | |

NOI Preparer (Complete if NOI was prepared by someone other than the certifier)

| | |
|---------------------|----------|
| Prepared by: | |
|---------------------|----------|

| | |
|------------------|---------------|
| Telephone Number | Email Address |
| | |

New Applicants:

**Submit completed form and FEE (payable to Maryland Department of the Environment) to:
 Maryland Department of the Environment, P.O. Box 2057, Baltimore, MD 21203-2057**

Renewal Applicants:

**Submit completed form to:
 Maryland Department of the Environment, Bureau of Mines
 160 South Water Street, Frostburg, MD 21532**

(1) Annual fee payments are not required for permit renewals or modifications (see instructions in Section VI for details).

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INSTRUCTIONS

WHO MUST FILE

The operator of a facility that is requesting to discharge from a surface coal mines or related facilities to waters of the state must submit a notice of intent (NOI) to obtain coverage under the General Permit No. 19-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 (MDE), Wastewater Pollution Prevention and Reclamation Program (WWPPRP), at 410-537-3323.

Submission of this NOI constitutes notice that the party identified in Section I of this form intends to be authorized by a State/ National Pollutant Discharge Elimination System (NPDES) permit issued for discharges from surface coal mines and related facilities identified in Section II of this form. Authorization to discharge begins upon notification of registration by MDE. The permit is available using this link <https://mdewwp.page.link/CMGP> or via MDE's website.

SECTION I: Owner/Operator Information

- (A) Provide the legal name of the person, firm, public organization, or other entity that operates the industrial facility described in Section II of this application. An operator of a facility is a legal entity that controls the operation of the facility.
- (B) Provide the name of the Primary Contact; title of Primary Contact; Primary Contact phone number; Primary Contact e-mail address.
- (C) Provide the primary facility contact mailing address; city; state; zip. All correspondence will be sent to this address.
- (D) Provide the IRS Employer Identification Number (EIN).
- (E) Identify whether the owner/operator is private, federal or state/local government.
- (F) Provide worker's compensation insurance information for the facility identified in this section of the application.

SECTION II: Facility Information

- (A) Provide the name of facility – enter "same" if the name does not differ from the information in Section I(A).
- (B) Provide the physical address; city; state; zip – enter "same" if the address does not differ from the information in Section I(C); Provide the County where the facility is located. If this is a contiguous system spanning multiple counties or cities, list all county or city associated with mailing address.
- (C) Provide the primary four-digit Standard Industrial Classification (SIC) Major Group Code 12 describing the facility:
 - Bituminous coal and lignite surface mining (SIC 1221)
 - Anthracite mining (SIC 1231)
 - Coal mining services (SIC 1241)

The current Department of Labor's - Occupation, Safety and Health Administration (OSHA) website (<http://www.osha.gov/pls/imis/sicsearch.html>) provides a detailed written description of SIC codes.

- (D) Provide latitude and longitude of the discharge/outfalls requesting to be permitted. To obtain coordinates, you may use a GPS to find location within your site. There are internet options that you can also use, such as Google's Tool. A step-by-step method can be found at this URL: <https://mdewwp.page.link/FindGPS>
We require the coordinates be in degrees decimal. An example of this for Maryland Department of the Environment at 1800 Washington Blvd, Baltimore, MD would be latitude of 39.276027, longitude of - 76.644779.
- (E) Identify if you are a new discharger, or previously covered under another permit. Identify any previously obtained NPDES permit (general or individual) for your stormwater discharges. If applicable, include the permit number. (e.g., 10MM1234 general permit or 12DP1234 individual permit, where 1234 was the unique 4-digit designation for your coverage).
- (F) Provide the total property size at the address, including both the industrial and non-industrial portions of your property (e.g., 2 acres).
- (G) Indicate whether your facility is currently inactive and unstaffed (Part V.A.3 of the permit). Note that if your facility becomes inactive and unstaffed during the permit term, you must notify the Department immediately.

**MARYLAND DEPARTMENT OF THE ENVIRONMENT
NOI for Permit No. 19-CM, NPDES PERMIT NO. MDG85**

INSTRUCTIONS

(H) This section is to verify information about where the stormwater is discharged. Identify the name(s) and 8-digit identifier of the receiving stream or water (e.g., Georges Creek 02141004), using the Department's "FindMyWatershed" tool at this link <https://mdewwp.page.link/MDWatershedMap>. When using the "FindMyWatershed" tool type in your address, and then place your mouse at your discharge points and left-click to bring up the identifier and receiving water.

To verify if receiving waters are impaired (Category 4a, 4b, 4c, or 5 water bodies), use the Department's "Integrated Report Water Quality Assessment Maps" at this link <https://mdewwp.page.link/MDIRMap> and review each of the impairments provided on that website (bacteria, biological, ions, metals, nutrients, PCBs, pesticides, pH, stream modifications, sediments, toxics or trash) for your facility location. When looking at each of the maps, you can use the Legend Button on the upper right side of the map to identify what each color or shading means. **See the Addendum for a "List of Approved TMDLs".**

To verify if the receiving waters are designated as high-quality waters, use the Department's "Tier 2" tools at this link <https://mdewwp.page.link/Tier2Map> to locate your facility location and identify if the stream or catchment are categorized as Tier 2. The "Tier 2" tools have shaded areas that indicate where waters are designated as high quality or Tier 2 waters.

To verify whether your receiving stream is a Use III or Use IV, use the Department's "Designated Use" map at this link <https://mdewwp.page.link/MDUseMap>.

(I) Identify current permit issued by the Maryland Bureau of Mines.

SECTION III: Stormwater Pollution Prevention Plan (SWPPP) and Monitoring

(A) Preparation and delivery of the SWPPP is required prior to the submittal of the NOI.

(B) Indicate how you are providing your SWPPP to the Department, either online with appropriate URL (provide your URL in the space on the form), by email, or other methods provided in the permit. Also, identify the name, telephone number, and email address of the person who will serve as a contact for the Department on issues related to stormwater management at your facility. This person should be able to answer questions related to stormwater discharges, the SWPPP and other issues related to stormwater permit coverage, or have immediate access to individuals with that knowledge.

SECTION IV: Discharge Information

For each type of discharge routed to the outfall, identify:

- 1). Description of Outfall – outfall ID, location (latitude and longitude in decimals), and flow in gallons per minute.
If there are any substantially identical outfalls, indicate it in the table by listing the outfall ID(s) in the appropriate box.
- 2). Type of discharge - use the abbreviations listed below to identify the type of discharge.
 - C = drainage from haul road culverts
 - A = discharge from coal storage and loading areas, coal preparation plants or mining areas in an active mine
 - P = discharge from coal storage and loading areas, coal preparation plants or mining areas in an proposed mine
 - R = discharge from coal storage and loading areas, coal preparation plants or mining areas in a reclaimed mine
- 3). Estimated flow - provide the average flow in gallons per day for each discharge
- 4). Receiving Water - Indicate if the discharge is directed to groundwater or surface waters. Groundwater includes injection or ground saturation. If to a surface water, indicate the name of the closest receiving stream (i.e., Creek Bay).

SECTION V: Chemical Additives

Confirm whether any Chemical Additives are used in the treatment of water, and whether you cationic chemical additives (Part III.B.1.b.xii) which you are requesting approval for use (Part I.C.5). The use of polymers, flocculants, or other treatment chemicals, including use of cationic treatment chemicals (Part III.B.1.b.xii), require that you include documentation in your SWPPP of the appropriate controls and implementation procedures designed to ensure that your use of treatment chemicals will not lead to a violation of water quality standards.

MARYLAND DEPARTMENT OF THE ENVIRONMENT
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INSTRUCTIONS

SECTION VI: Permit Fee

Annual fee payments should be submitted only with new permit applications (NOIs), but are not required for permit renewals or modifications. However, permit fee category box must be checked off based on the actual flow and you may be billed for any difference in annual fee. Indicate the amount sent with this NOI form. The annual rate and application fee may change over time, so you are encouraged to check COMAR 26.08.04.09-1(D) at the time of your application. Discharges from municipal, county and state operated facilities are exempt from a permit fee.

SECTION VII: Certification

Signatures and Certifications are detailed in the permit Part II.C. Individuals who discharge to waters of the State without an individual State or general State/NPDES discharge permit, are in violation of the Federal Clean Water Act and of the Environment Article, Annotated Code of Maryland, and may be subject to penalties. An original signature and date is required.

A completed form will not be processed until the fee has been paid-in-full and your SWPPP has been received.

HOW TO SUBMIT:

New permittees should send a completed NOI and fee (see permit) to **Maryland Department of the Environment, P.O. Box 2057, Baltimore, MD 21203-2057**, and provide the SWPPP in one of the allowed formats (Part II.A.3 of the permit).

Renewal applications and modification requests should be forwarded, along with the updated SWPPP, to the following address: **Maryland Department of the Environment, Bureau of Mines, 160 South Water Street, Frostburg, MD 21532.**

You must ensure that the form is completely filled out and payment is enclosed (for new applicants), and the SWPPP follows all permit requirements and is successfully provided to the Department. Your permit application will be handled as efficiently as possible. However, if you fail to provide us with the information we request, we will be unable to process your registration for the permit.

MARYLAND DEPARTMENT OF THE ENVIRONMENT
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ADDENDUM

LIST OF APPROVED TMDLs

As discussed in Part III.D.2.b of this permit, the Department has approved the following TMDLs protective of state waters. This list may be modified during any time during the permit term and will be noted as such in the appropriate column of this addendum. For a complete up-to-date list of all TMDLs, visit the Department's website at: <https://mdewwp.page.link/MDIRMap>

| Basin Name | DNR 8-digit Basin Number | Impairment | Status |
|--|---------------------------------|--------------------------|--------------------------|
| Georges Creek | 02141004 | Low pH | Approved: April 17, 2008 |
| Georges Creek | 02141004 | Sediment | Approved: Dec. 27, 2006 |
| Georges Creek | 02141004 | Bacteria | Approved: Sept. 20, 2007 |
| Georges Creek | 02141004 | Nutrient | Approved: Feb. 6, 2002 |
| Savage River | 02141006 | Metals (mercury) | Approved: Jan. 29, 2004 |
| Savage River | 02141006 | Low pH | Approved: Apr. 17, 2008 |
| Upper North Branch Potomac River | 02141005 | Low pH | Approved: April 17, 2008 |
| Upper North Branch Potomac River | 02141005 | Sediments | Approved: May 15, 2007 |
| Upper North Branch Potomac River | 02141005 | Metals (aluminum & iron) | Approved: Feb. 10, 2011 |
| Wills Creek | 02141003 | Low pH | Approved: April 17, 2008 |
| Wills Creek | 02141003 | Sediment | Approved: Jan. 16, 2007 |
| Wills Creek | 02141003 | Bacteria | Approved: Nov. 6, 2007 |