ALABAMA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT (ADEM) REQUEST FOR RELEASE FROM NPDES PERMIT MONITORING AND REPORTING REQUIREMENTS (MINING OPERATIONS)

Instructions: Your NPDES permit requires that certain information be provided in writing to ADEM in order to obtain approval to terminate monitoring and reporting requirements for a permitted outfall and its associated drainage area. **Use one form per outfall.** Please complete all questions. Use "N/A" where appropriate. Incorrect/Incomplete forms will be returned and may delay approval. Please attach a detailed explanation for any "No" responses or as necessary to explain any unusual circumstances. Please type or print legibly in blue or black ink.

You are advised that you <u>must continue monitoring and reporting</u> until the Department grants approval of your request <u>in writing</u>. Mail the completed form to: ADEM-Water Division, Stormwater Management Branch, P O Box 301463, Montgomery, AL 36130-1463.

1.	Name	of Per	rmittee:				
2.	Postal Address of Permittee:						
3.	Facility Name:						
4.	NPDI	ES/SID	Permit Number:	_			
5.	ASMC/ADOL Permit Number(s):			(if appl	icable)		
6.	Phone	e:	Fax:	Email Address:			
7.	Point	Source	e (Outfall) Number:				
8.	Location of Outfall:						
	Count	ty:	Township:	_ Range:	Section:		
ASMO	C PERM	IITTE	ED OR BONDED FACILITIES				
9.	Yes	No	The Permittee has received a Phase III bond release disturbed in the drainage area(s), including the treatment ensure that a copy(s) of the applicable ASMC bond release	nt basin, associated			
10.	Yes	No	The Permittee has received approval from ASMC to remove and mine through the outfall(s), and the drainage previously treated by the mined-through outfall(s) is routed and properly controlled/treated by another permitted and properly certified existing outfall. List approved/certified outfall receiving drainage:				
NON-	ASMC	PERM	MITTED OR BONDED FACILITIES				
11.	Yes	No The Permittee has received a 100% bond release from the Alabama Department of Labor (ADOL) for all areas disturbed in the drainage area(s), including the treatment basin, associated with the discharge from the permitted outfall. Please ensure that a copy(s) of the applicable ADOL reclamation release(s) is attached.					
12.	Yes	No	Unless waived by the Department, the Permittee, in order to expedite review/approval of this request, has attached inspection reports prepared and certified by 1) a Professional Engineer (PE) registered in the State of Alabama or a qualified professional under the PE's direction, or 2) a Certified Professional in Sediment And Erosion Control (CPESC), which certify that the facility has been fully reclaimed or that water quality remediation has been achieved. The first inspection should be conducted approximately one year prior to and the second inspection should be conducted within thirty days of the Permittee's request for termination of monitoring and reporting requirements. Permanent, perennial vegetation has been re-established on all areas mined or disturbed for at least one year since mining has ceased in the drainage basin(s) associated with the surface discharge, or all areas have been permanently graded such that all drainage is directed back into the mined pit to preclude any surface discharges. Responding "No" may significantly delay approval until an inspection can be performed by Department personnel.				
<u>ALL</u> I	FACILI	TIES					
13.	Yes	No	All mining, processing, or disturbance in the drainage adequately restricted, controlled, or regularly monit transportation, or associated operations/activity.				
14.	Yes	No	The outfall is a pumped discharge and, (1) the pump has to prevent future discharge, or (2) the pump has been r routed and properly controlled/treated by another permit receiving drainage:	removed and the putted and properly ce	imped drainage previously treated by the outfall(s) is		

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15.	Yes	All surface effects of the mining activity such as fuel or chemical tanks/containers, wet preparation equipment (washers), ol tools or equipment, junk, garbage, debris, fuel/chemical spills, contaminated soils, etc. have been removed/remediated an disposed of according to applicable State and federal regulations.					
16.	Yes	No	The Permittee's request for termination of monitoring and reporting requirements contained in this permit is supported by monitoring data covering a period of at least six consecutive months or such longer period as is necessary to assure that the data reflect discharges occurring during varying climatological conditions.				
17.	Yes	No	The Permittee hereby certifies that the samples collected and reported in the monitoring data submitted in support of the Permittee's request for monitoring termination or suspension are representative of the discharge and were collected in accordance with <u>all</u> permit terms and conditions respecting sampling times (e.g., rainfall events) and methods and were analyzed in accordance with all permit terms and conditions respecting analytical methods and procedures.				
18.	Yes	No	The Permittee hereby certifies that during at least the previous twelve (12) months prior to this request, there was \underline{no} chemical treatment in the drainage area(s), including the treatment basin, associated with the discharge from the permitted outfall.				
19.	Yes	No	Additional information <u>is attached</u> to 1) further support this request, 2) provide pertinent additional information, as required by the permit, that is not requested on this form that may impact the Department's determination regarding this request, or 3) explain a "no" response on this form, or 4) provide an explanation for circumstances which may potentially result in delay or non-approval of this request.				
20.	Print or type the name and title of the principal executive officer or authorized agent whose signature appears below:						
	"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.						
		the Pe	derstand that it is the Permittee's responsibility to ensure and verify receipt of this request by the Department and that ermittee is required to immediately notify the Department in writing should conditions or information provided in this st, upon which approval may be granted, change."				
	Name and Title of Responsible Corporate Official or Authorized Agent						
	Sign	ature	Date				

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