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|  | COMMONWEALTH OF VIRGINIA VIRGINIA DEPARTMENT OF ENERGY MINED LAND REPURPOSING3405 MOUNTAIN EMPIRE ROAD; BIG STONE GAP, VA 24219 TELEPHONE: (276) 523-8100 |

DISCHARGE MONITORING REPORT

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| **COMPANY** |  | **CSMO/NPDES PERMIT NO.** |  |
| **OUTFALL NO.** |  | **MPID** |  | **Monitoring Period (Qtr./Yr.)** |  |
| **INDICATE FOR EACH SAMPLE THE APPLICABLE DRAINAGE AREA CATEGORY (DAC):**1. **Pre-reclamation/Preparation Plant 3) Mine Drainage 5) Post-reclamation Area**
2. **Commingled/Controlled 4) Refuse Disposal Area**
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| **Month 1** |
| **Date** | **DAC** | **Flow** | **pH** | **Iron** | **Manganese** | **TSS** | **SS** | **Precipitation** |
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| **Average** |  |  |  |  |  |  |  |  |

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| **Month 2** |
| **Date** | **DAC** | **Flow** | **pH** | **Iron** | **Manganese** | **TSS** | **SS** | **Precipitation** |
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| **Average** |  |  |  |  |  |  |  |  |

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| **Month 3** |
| **Date** | **DAC** | **Flow** | **pH** | **Iron** | **Manganese** | **TSS** | **SS** | **Precipitation** |
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| **Average** |  |  |  |  |  |  |  |  |

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| **Laboratory Identification Number** |  |  |
| **Company Certification:**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 upon 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** |  |

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