

**MARYLAND DEPARTMENT OF THE ENVIRONMENT**  
 General Discharge Permit For Discharges from Mineral Quarries,  
 Borrow Pits, and Concrete and Asphalt Plants  
 Notice of Intent (NOI) for Maryland General Permit No. 15-MM

**DISCHARGE PERMIT NO. 15-MM-0000**

**NPDES PERMIT NO. MDG490000**

<b>SECTION I: Facility Operator Information</b>			
<b>(A) Owner/Operator Name</b>			
Chaney Enterprises, LP			
<b>(B) Primary Contact Name</b>		<b>Title</b>	
Victor Vilece		Assistant Project Manager/Land	
<b>Telephone Number</b>		<b>Email Address</b>	
301-861-6094		vvilece@chaneyenterprises.com	
<b>(C) Mailing Address</b>			
Street			
P.O. Box 2000			
<b>City</b>		<b>State</b>	<b>ZIP Code</b>
Gambrills		MD	21054
<b>(D) IRS Employer Identification Number (EIN)</b>		<b>(E) Ownership Type - check below</b>	
52-1702211		<input checked="" type="checkbox"/> Private <input type="checkbox"/> Federal <input type="checkbox"/> State/Local	
<b>(F) Worker's Compensation Insurance:</b>	<b>Insurance Company Name</b>		<b>Policy Number</b>
	Hartford		30WNR96800
<b>SECTION II: Facility Information</b>			
<b>(A) Name of Facility</b>			
Salisbury			
<b>(B) Facility Address (if different than your mailing address)</b>			
Street			
1000 Parsons Road			
<b>City</b>		<b>State</b>	<b>ZIP Code</b>
Salisbury		MD	21801
		<b>County</b>	
		Wicomico	
<b>For MDE use only:</b>		<b>Facility #</b>	<b>Receipt #</b>
PCA 13710		Comp Object 5710	Suffix 411
		<b>Date:</b>	

**MARYLAND DEPARTMENT OF THE ENVIRONMENT**  
**NOI for Permit No. 15-MM**

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 Mineral Quarries, Borrow Pits, and Concrete and Asphalt Plants identified 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, and any co-located SIC codes.

Primary SIC: 3273	Co-located SICs: , ,	Description of your primary industrial activity: <b>Ready Mix Concrete Facility</b>	
(D) Latitude 38.360 (in decimal 616 degrees)	Longitude -75.616 (in decimal 279 degrees)	<b>(E)</b> <input type="checkbox"/> Check here if you a new discharger.	
		If not a new discharger, provide the previous registration (e.g., 10MM1234)	10MM2409
<b>(F)</b> Total property size 4 (in acres)		<b>(G)</b> <input type="checkbox"/> Check if your facility is inactive and unstaffed.	
<b>(H)</b> Identify the 8 digit identifier(s) and name(s) of the receiving water(s). 02130301 Lower Wicomico River			
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"/> Biological <input type="checkbox"/> Ions <input type="checkbox"/> Metals <input checked="" type="checkbox"/> Nutrients <input checked="" type="checkbox"/> PCBs	<input type="checkbox"/> Pesticides <input type="checkbox"/> pH <input type="checkbox"/> Stream Modifications <input type="checkbox"/> Sediments <input type="checkbox"/> Toxics <input type="checkbox"/> Trash
<input type="checkbox"/> Check here if any of the receiving water(s) are listed as high quality (Tier 2)			
Check if stream is protected for <input type="checkbox"/> Use III <input type="checkbox"/> Use IV			
Identify your local MS4 jurisdiction or N/A if your facility is not within an MS4: N/A			
<b>SECTION III: Stormwater Pollution Prevention Plan (SWPPP) and Monitoring</b>			
The 15MM permit does require you to evaluate and implement specific control measures and effluent limits. It requires you to perform quarterly visual monitoring, may include numeric limits, benchmark monitoring and reporting for specific industrial sectors. 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.			
<b>(A)</b> Has the SWPPP been prepared in advance of filing this NOI, as required? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
<b>(B)</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.)		<a href="https://www.chaneyenterprises.com/locations/Concrete-Salisbury-Maryland">https://www.chaneyenterprises.com/locations/Concrete-Salisbury-Maryland</a>	

**MARYLAND DEPARTMENT OF THE ENVIRONMENT**  
**NOI for Permit No. 15-MM**

**SECTION IV: Discharge Information**

Use the table in the instructions to choose the appropriate benchmarks and effluent limitations that apply for the stormwater discharges at each of the outfalls at your facility and fill out the information in the table below:

**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).		Benchmark Table(s)		Effluent Limitations Table(s)	
<b>Outfall ID</b>	001	<input type="checkbox"/> A-1	<input type="checkbox"/> E-2	<input type="checkbox"/> A-3	<input checked="" type="checkbox"/> E-5
Latitude	38.3605331	<input type="checkbox"/> A-2	<input type="checkbox"/> J-1	<input type="checkbox"/> AD.C-1	<input type="checkbox"/> J-2
In degrees decimal		<input type="checkbox"/> C-1	<input type="checkbox"/> L-1	<input type="checkbox"/> C-3	<input type="checkbox"/> J-3
Longitude	-75.6158718	<input type="checkbox"/> D-1	<input type="checkbox"/> L-2	<input type="checkbox"/> D-2	<input type="checkbox"/> J-4
In degrees decimal		<input type="checkbox"/> E-1		<input type="checkbox"/> E-3	<input type="checkbox"/> J-5
Identical Outfalls				<input checked="" type="checkbox"/> E-4	<input type="checkbox"/> J-6
<b>Outfall ID</b>		<input type="checkbox"/> A-1	<input type="checkbox"/> E-2	<input type="checkbox"/> A-3	<input type="checkbox"/> E-5
Latitude		<input type="checkbox"/> A-2	<input type="checkbox"/> J-1	<input type="checkbox"/> AD.C-1	<input type="checkbox"/> J-2
In degrees decimal		<input type="checkbox"/> C-1	<input type="checkbox"/> L-1	<input type="checkbox"/> C-3	<input type="checkbox"/> J-3
Longitude		<input type="checkbox"/> D-1	<input type="checkbox"/> L-2	<input type="checkbox"/> D-2	<input type="checkbox"/> J-4
In degrees decimal		<input type="checkbox"/> E-1		<input type="checkbox"/> E-3	<input type="checkbox"/> J-5
Identical Outfalls				<input type="checkbox"/> E-4	<input type="checkbox"/> J-6
<b>Outfall ID</b>		<input type="checkbox"/> A-1	<input type="checkbox"/> E-2	<input type="checkbox"/> A-3	<input type="checkbox"/> E-5
Latitude		<input type="checkbox"/> A-2	<input type="checkbox"/> J-1	<input type="checkbox"/> AD.C-1	<input type="checkbox"/> J-2
In degrees decimal		<input type="checkbox"/> C-1	<input type="checkbox"/> L-1	<input type="checkbox"/> C-3	<input type="checkbox"/> J-3
Longitude		<input type="checkbox"/> D-1	<input type="checkbox"/> L-2	<input type="checkbox"/> D-2	<input type="checkbox"/> J-4
In degrees decimal		<input type="checkbox"/> E-1		<input type="checkbox"/> E-3	<input type="checkbox"/> J-5
Identical Outfalls				<input type="checkbox"/> E-4	<input type="checkbox"/> J-6
<b>Outfall ID</b>		<input type="checkbox"/> A-1	<input type="checkbox"/> E-2	<input type="checkbox"/> A-3	<input type="checkbox"/> E-5
Latitude		<input type="checkbox"/> A-2	<input type="checkbox"/> J-1	<input type="checkbox"/> AD.C-1	<input type="checkbox"/> J-2
In degrees decimal		<input type="checkbox"/> C-1	<input type="checkbox"/> L-1	<input type="checkbox"/> C-3	<input type="checkbox"/> J-3
Longitude		<input type="checkbox"/> D-1	<input type="checkbox"/> L-2	<input type="checkbox"/> D-2	<input type="checkbox"/> J-4
In degrees decimal		<input type="checkbox"/> E-1		<input type="checkbox"/> E-3	<input type="checkbox"/> J-5
Identical Outfalls				<input type="checkbox"/> E-4	<input type="checkbox"/> J-6
<b>Outfall ID</b>		<input type="checkbox"/> A-1	<input type="checkbox"/> E-2	<input type="checkbox"/> A-3	<input type="checkbox"/> E-5
Latitude		<input type="checkbox"/> A-2	<input type="checkbox"/> J-1	<input type="checkbox"/> AD.C-1	<input type="checkbox"/> J-2
In degrees decimal		<input type="checkbox"/> C-1	<input type="checkbox"/> L-1	<input type="checkbox"/> C-3	<input type="checkbox"/> J-3
Longitude		<input type="checkbox"/> D-1	<input type="checkbox"/> L-2	<input type="checkbox"/> D-2	<input type="checkbox"/> J-4
In degrees decimal		<input type="checkbox"/> E-1		<input type="checkbox"/> E-3	<input type="checkbox"/> J-5
Identical Outfalls				<input type="checkbox"/> E-4	<input type="checkbox"/> J-6

**SECTION V: Chemical Additives**

Will you use chemical additives?  Yes  No  
 Will you use **cationic** chemical additives?  Yes  No

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, submit a signed *Request for Cationic Chemical Additive Form* along with this NOI and refer to the *Use of Treatment Chemicals Guidance Document* for further requirements.

**MARYLAND DEPARTMENT OF THE ENVIRONMENT**  
**NOI for Permit No. 15-MM**

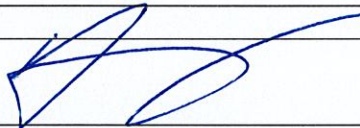
**SECTION VI: Permit Fee Selection**

All discharges to groundwater ONLY	No Fee	<input type="checkbox"/>
Average Daily Discharge Volume: Less than 1,000 Gallons Per Day	\$110	<input type="checkbox"/>
Average Daily Discharge Volume: 1,000—5,000 Gallons Per Day	\$275	<input type="checkbox"/>
Average Daily Discharge Volume: 5,001—50,000 Gallons Per Day	\$600	<input checked="" type="checkbox"/>
Average Daily Discharge Volume: 50,001—100,000 Gallons Per Day	\$1175	<input type="checkbox"/>
Average Daily Discharge Volume: 100,001—250,000 Gallons Per Day	\$1740	<input type="checkbox"/>
Average Daily Discharge Volume: 250,001—1,000,000 Gallons Per Day	\$2300	<input type="checkbox"/>
Average Daily Discharge Volume: Greater than 1,000,000 Gallons Per Day	\$2875	<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
		9/22/17
Signatory Name/Title: Typed or Printed		Telephone Number
Kyle Murray Project Manager/Land		301-932-5000
NOI Preparer (Complete if NOI was prepared by someone other than the certifier)		
<b>Prepared by:</b>	Victor Vilece	
Telephone Number	Email Address	
301-932-5087	vilece@chaneyenterprises.com	

**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**