

US EPA ARCHIVE DOCUMENT

KPDES FORM 1

KENTUCKY POLLUTANT DISCHARGE ELIMINATION SYSTEM

PERMIT APPLICATION

This is an application to: (check one)

- Apply for a new permit.
- Apply for reissuance of expiring permit.
- Apply for a construction permit.
- Modify an existing permit.

Give reason for modification under Item II.A.

A complete application consists of this form and one of the following:

Form A, Form B, Form C, Form F, or Form SC

For additional information contact:

Surface Water Permits Branch (502) 564-3410

I. FACILITY LOCATION AND CONTACT INFORMATION	AGENCY USE						
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A. Name of Business, Municipality, Company, Etc. Requesting Permit BDCC Holding Company, Inc.	
B. Facility Name and Location	C. Primary Mailing Address (all facility correspondence will be sent to this address). Include owner's mailing address (if different) in D.
Facility Location Name: Bear Branch Surface Mine	Facility Contact Name and Title: Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/> Bill Johnson
Facility Location Address (i.e. street, road, etc., not P.O. Box): Approx. 1.25 miles NW from KY-7 and KY-699 intersection.	Mailing Address: 1374 Hwy 192 E.
Facility Location City, State, Zip Code: Cornettsville, KY, 41731	Mailing City, State, Zip Code: London, KY 40741
D. Owner's name (if not the same as in part A and C):	Facility Contact Telephone Number: (606) 878-7411
Owner's Mailing Address:	Owner's Telephone Number (if different):

II. FACILITY DESCRIPTION	
A. Provide a brief description of activities, products, etc: Surface Mine Operation Expansion	
B. Standard Industrial Classification (SIC) Code and Description	
Principal SIC Code & Description:	1221 Bituminous Coal Lignite Surface Mining
Other SIC Codes:	

III. FACILITY LOCATION	
A. Attach a U.S. Geological Survey 7 1/2 minute quadrangle map for the site. (See instructions)	
B. County where facility is located: Perry	City where facility is located (if applicable): N/A
C. Body of water receiving discharge: Bear Branch/Leatherwood Creek	
D. Facility Site Latitude (degrees, minutes, seconds): 37° 07' 30"	Facility Site Longitude (degrees, minutes, seconds): 83° 06' 30"
E. Method used to obtain latitude & longitude (see instructions): Topographical map	

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IV. OWNER/OPERATOR INFORMATION	
A. Type of Ownership: <input type="checkbox"/> Publicly Owned <input checked="" type="checkbox"/> Privately Owned <input type="checkbox"/> State Owned <input type="checkbox"/> Both Public and Private Owned <input type="checkbox"/> Federally owned	
B. Operator Contact Information (See instructions)	
Name of Treatment Plant Operator: N/A	Telephone Number: N/A
Operator Mailing Address (Street): N/A	
Operator Mailing Address (City, State, Zip Code): N/A	
Is the operator also the owner? Yes <input type="checkbox"/> No <input type="checkbox"/>	Is the operator certified? If yes, list certification class and number below. Yes <input type="checkbox"/> No <input type="checkbox"/>
Certification Class: N/A	Certification Number: N/A

V. EXISTING ENVIRONMENTAL PERMITS		
Current NPDES Number: KY0106682	Issue Date of Current Permit: N/A	Expiration Date of Current Permit: N/A
Other DOW Operational Permit #: N/A	Kentucky DMR Permit Number(s): 897-5061 Am 4	Sludge Disposal Permit Number: N/A
Other Existing Environmental Permit #: N/A	Other Existing Environmental Permit #:	Other Existing Environmental Permit #:

Which of the following additional environmental permit/registration categories will also apply to this facility?

CATEGORY	EXISTING PERMIT WITH NO.	PERMIT NEEDED WITH PLANNED APPLICATION DATE
Air Emission Source	N/A	N/A
Solid or Special Waste	N/A	N/A
Hazardous Waste - Registration or Permit	N/A	N/A

VI. DISCHARGE MONITORING REPORTS (DMRs)

KPDES permit holders are required to submit DMRs to the Division of Water on a regular schedule (as defined by the KPDES permit). Information in this section serves to specifically identify the name and telephone number of the DMR official and the DMR mailing address (if different from the primary mailing address in Section I.C).

A. DMR Official (i.e., the department, office or individual designated as responsible for submitting DMR forms to the Division of Water):	BDCC Holding Company, Inc.
DMR Official Telephone Number:	(606) 878-7411

B. DMR Mailing Address:	
<ul style="list-style-type: none"> Address the Division of Water will use to mail DMR forms (if different from mailing address in Section I.C), or Contact address if another individual, company, laboratory, etc. completes DMRs for you; e.g., contract laboratory address. 	
DMR Mailing Name:	See Section I. C.
DMR Mailing Address:	
DMR Mailing City, State, Zip Code:	

VII. APPLICATION FILING FEE

KPDES regulations require that a permit applicant pay an application filing fee equal to twenty percent of the permit base fee. Please examine the base and filing fees listed in "Form 1 Instructions" and enclose a check payable to "Kentucky State Treasurer" for the appropriate amount. For permit renewals, please include the KPDES permit number on the check to ensure proper crediting. Please see the separate document "General Instructions" for an expanded description of the base fee amounts.

Facility Fee Category:

Filing Fee Enclosed:

\$660.00

VIII. 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 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.

NAME AND OFFICIAL TITLE (type or print):

PHONE NUMBER: (606) 878-7411

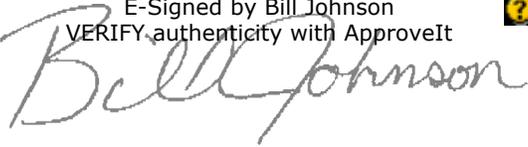
Mr. Ms. Bill Johnson, Vice President

EMAIL: bill.johnson@jamesrivercoal.com

SIGNATURE

DATE:

E-Signed by Bill Johnson
VERIFY authenticity with ApproveIt



12/29/10

Return completed application form and attachments to: **Surface Water Permits Branch, Division of Water, 200 Fair Oaks Lane, Frankfort, KY 40601. Direct questions to: Surface Water Permits Branch at (502) 564-3410.**