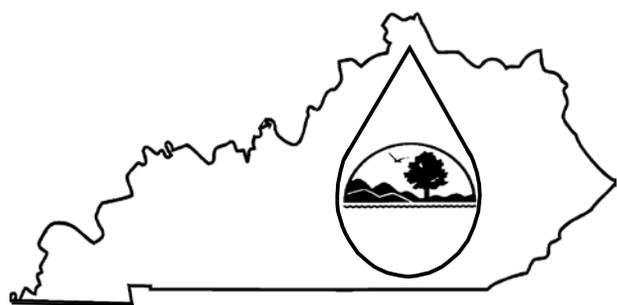


US EPA ARCHIVE DOCUMENT

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

Czar Coal Corporation

B. Facility Name and Location

Facility Location Name:

Czar Coal Corporation

Facility Location Address (i.e. street, road, etc., **not P.O. Box**):

81 Enterprise Drive

Facility Location City, State, Zip Code:

Debord, KY 41214

D. Owner's name (if not the same as in part A and C):

N/A

Owner's Mailing Address:

N/A

C. Primary Mailing Address (all facility correspondence will be sent to this address). **Include owner's mailing address (if different) in D.**

Facility Contact Name and Title: Mr. Ms.

Larry D. Adams, P.E. Vice President in Permitting & Environmental Affairs

Mailing Address:

81 Enterprise Drive

Mailing City, State, Zip Code:

Debord, KY 41214

Facility Contact Telephone Number:

606-298-2340

Owner's Telephone Number (if different):

N/A

II. FACILITY DESCRIPTION

A. Provide a brief description of activities, products, etc:

The newly proposed project involves area and highwall mining of the Stockton coal reserves, the construction of one fill area (Fill No. 1), two existing in-stream ponds (Pond FWP-1 and Pond 1), and three upland ponds (Pond 100, Pond 101, and Pond 102). This project involves the disturbance of only 146.32 surface acres.

B. Standard Industrial Classification (SIC) Code and Description

Principal SIC Code & Description:

1221 – Surface Mining

Other SIC Codes:

N/A

N/A

N/A

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:
Martin

City where facility is located (if applicable):
Davella is located 8.2 miles NE of the project

C. Body of water receiving discharge:

Sand Gap Branch of Middle Fork Rockcastle Creek, Grassy Gap Branch of Middle Fork Rockcastle Creek, Chestnut Cove Branch of Middle Fork Rockcastle Creek, Music Fork of Middle Fork Rockcastle Creek, and Middle Fork Rockcastle Creek of Rockcastle Creek of the Tug Fork of the Big Sandy River

D. Facility Site Latitude (degrees, minutes, seconds):
37-43-42

Facility Site Longitude (degrees, minutes, seconds):
82-38-14

E. Method used to obtain latitude & longitude (see instructions):

USGS 7.5 minute topographic map

US EPA ARCHIVE DOCUMENT

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: Czar Coal Corporation	Telephone Number: 606-298-2300
Operator Mailing Address (Street): 81 Enterprise Drive	
Operator Mailing Address (City, State, Zip Code): Debord, KY 41214	
Is the operator also the owner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Is the operator certified? If yes, list certification class and number below. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Certification Class: N/A	Certification Number: N/A

V. EXISTING ENVIRONMENTAL PERMITS		
Current NPDES Number: N/A	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): 880-0194 original	Sludge Disposal Permit Number: N/A
Other Existing Environmental Permit #: N/A	Other Existing Environmental Permit #: N/A	Other Existing Environmental Permit #: N/A

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):	Czar Coal Corporation
DMR Official Telephone Number:	606-298-2340

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:	Larry D. Adams, P.E. Vice President in Permitting & Environmental Affairs
DMR Mailing Address:	81 Enterprise Drive
DMR Mailing City, State, Zip Code:	Debord, KY 41214

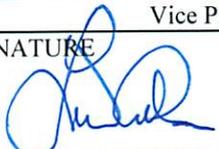
VII. APPLICATION FILING FEE

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: Surface Mining	Filing Fee Enclosed: \$660.00
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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): Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/> Larry D. Adams, P.E. Vice President in Permitting & Environmental Affairs	PHONE NUMBER: 606-298-2340 EMAIL: larry.a@czarky.net
SIGNATURE 	DATE: 3/23/11

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.**

