

Permit Information

Report Year: 2018

NPDES ID: IDR053014

Facility Information

Facility Name: DRY VALLEY MINE (PITS A AND B)

Facility Point of Contact

First Name Middle Initial Last Name: Jonathan Bucca

Organization:

Title:

Phone: 215-299-6358 Ext.

Email: jonathan.bucca@fmc.com

Facility Mailing Address

Address Line 1: 2275 DRY VALLEY ROAD

City: SODA SPRINGS

Address Line 2:

ZIP/Postal Code: 83276

State: ID

County or Similar Division: CARIBOU

General Findings

Provide a summary of your past year's routine facility inspection documentation (see Part 3.1.2 of the permit). In addition, if you are an operator of an airport facility (Sector S) that is subject to the airport effluent limitations guidelines, and are complying with the MSGP Part 8.S.8.1 effluent limitation through the use of non-urea-containing deicers, provide a statement certifying that you do not use pavement deicers containing urea (e.g., "Urea was not used at [name of airport] for pavement deicing in the past year and will also not be used in 2015." (Note: Operators of airport facilities that are complying with Part 8.S.8.1 by meeting the numeric effluent limitation for ammonia do not need to include this statement.)

The requirement to conduct inspections on a routine basis does not apply at this facility as it is "inactive and unstaffed".

An annual facility inspection was conducted on October 25, 2018 between 09:15 and 16:30 by Site Contractor James Williams. A signed copy of the inspection form was placed in the plan binder.

Weather conditions noted during the inspection include: calm, overcast, light rain, 45 degrees F, cool and moist conditions.

A thorough inspection of the site was conducted, all control measures were observed, no discharges were occurring from the outfalls, no previously unidentified discharges occurring, and no evidence of pollutants entering the drainages. Physical condition of the outfalls were observed and found to be in good condition, adequate, functioning as designed, well armored with heavy vegetative growth with no evidence of erosion, in no need of maintenance or repair, and no additional control measures needed.

During the annual inspection no incidents of non compliance and no need for corrective actions were identified.

A statement, signed and certified in accordance with Appendix B, Subsection 11 is included with the inspection form in the plan binder.

Provide a summary of your past year's quarterly visual assessment documentation (see Part 3.2.2 of the permit).

The requirement to conduct quarterly visual assessments does not apply at this facility as it is "inactive and unstaffed".

A visual assessment of representative outfalls was conducted on April 20, 2018 during a period of snowmelt. Visual assessments were conducted by site contractor James Williams and reviewed by FMC Remedial Project Manager Jonathan Bucca.

Each visual assessment includes information including: sample location, date and time of collection and assessment, name of personnel, nature of discharge (snowmelt), results of observations, no observed contamination, and a statement, signed and certified in accordance with Appendix B, Subsection 11 which is included with the visual assessment forms in the plan binder.

For any four-sample (minimum) average benchmark monitoring exceedance, if after reviewing the selection, design, installation, and implementation of your control measures and considering whether any modifications are necessary to meet the effluent limits in the permit, you determine that no further pollutant reductions are technologically available and economically practicable and achievable in light of best industry practice, provide your rationale for why you believe no further reductions are achievable (see Part 6.2.1.2 of the permit). Enter "NA" if not applicable.

NA

Provide a summary of your past year's corrective action documentation (See Part 4.4 of the permit). (Note: If corrective action is not yet completed at the time of submission of this annual report, you must describe the status of any outstanding corrective action(s).) Also describe any incidents of noncompliance in the past year or currently ongoing, or if none, provide a statement that you are in compliance with the permit.

No non-compliance or deficiencies identified, no corrective actions necessary.

Certification Information

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 gathered and evaluated 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.

Certified By: Jonathan A. Bucca (DVMNPDES)

Certified On: 01/29/2019 3:48 PM