

**Commonwealth of Kentucky
Department for Natural Resources
Division of Mine Permits**

Application for Water Quality Certification for Surface Coal Mining Activities

The Clean Water Act Section 401 Water Quality Certification (WQC) program in Kentucky ensures that activities which may involve a discharge into waters of the Commonwealth which require federal permit or license are consistent with Kentucky's water quality standards in 401 KAR Chapter 5. The Energy and Environment Cabinet has authorized the Department for Natural Resources to issue water quality certifications related to surface coal mining operations. The project may not start until all necessary approvals are obtained. For questions concerning the WQC process, contact the WQC Coordinator at (502)-564-2320.

1. Applicant Name: _____
Mailing Address: _____

Contact Person: _____
Telephone No: (_____) _____
E Mail Address: _____

2. Consultant Name & Address: _____

Telephone No. (_____) _____
E Mail Address: _____

3. Provide a brief description of the proposed activity and stream impact.

4. Project Location Information:
County _____; **USGS Quadrangle Name** _____
Nearest Community & Road Intersection: _____
Longitude _____ **Latitude** _____ (Approximate center of the project area)

5. List the names of all streams affected by the proposed project:

6. For each affected watershed provide the acreage above the toe of the lowest permanent structure.

7. For each affected stream provide the linear feet of impact, whether the impact is temporary or permanent and indicate if the stream reach is classified as ephemeral, intermittent, or perennial.

8. Provide the acreage of wetlands that would be impacted: _____

9. Beginning at the nearest intersection of two public roads, provide directions to the project site:

10. Has application been submitted to the U.S. Army Corps of Engineers for this project? Yes ___ No ___. If yes, indicate type of application:

NW 12 ___ NW 14 ___ NW 21 ___ NW 27 ___ NW 49 ___
NW 50 ___ Individual _____

11. Provide the following permit numbers associated with this mining activity:
SMCRA Permit No. _____, KPDES No. _____

12. The following attachments must be provided:

- a. A watershed map showing all ponds and hollowfills to scale with all intermittent, and perennial stream reaches clearly identified.
- b. A 7.5 minute topographic map delineating the proposed project area.
- c. A copy of the complete Compensatory Mitigation Plan

List all other plans and profiles included with this application:

I hereby request approval for construction across or along a stream as described in this application and supporting attachments. All of the information provided with this application is true and accurate to the best of my belief and knowledge.

Applicant's Signature:

_____, **Date:** _____
If signed by applicant's agent, attach power of attorney

SUBMIT APPLICATION AND ATTACHMENTS TO:

**WQC COORDINATOR
DIVISION OF MINE PERMITS
#2 HUDSON HOLLOW
FRANKFORT, KENTUCKY 40601**