



ROSEBUD MINING COMPANY

301 Market Street · Kittanning, PA 16201

Phone: (724) 545-6222 FAX: (724) 543-6375

Web Site: www.rosebudmining.com

September 23, 2021

Somerset County Commissioners
300 North Center Avenue, Suite 500
Somerset, PA 15501

RE: Mine 78 Surface No. 3 Mine Notice
Paint Twp., Somerset Co. & Richland Twp., Cambria Co.
Rosebud Mining Company

To Whom It May Concern,

This letter is to serve as notice that Rosebud Mining Company has submitted a new surface mine permit application to the PA Department of Environmental Protection, Cambria District Office for review. The permit application is located in Richland Township, Cambria County and Paint Township, Somerset County as shown on the attached map.

Enclosed is a General Information Form (GIF) for the project. Please review the GIF in regard to land use aspects of this project. If you wish to submit comments to become part of the land use review you must respond within thirty (30) days to the PA Department of Environmental Protection, Cambria District Office, 286 Industrial Park Road, Ebensburg, PA 15931. If there are no land use comments received by the end of the comment period, DEP will assume that there are no substantive land use conflicts and will proceed with the normal application review process. If you have any questions concerning this notice please contact me using the information provided below. Thank you.

Sincerely,

ROSEBUD MINING COMPANY

John M. Ochs
Project Supervisor
Phone: (724) 545-6222 ext 270
Email: john.ochs@rosebudmining.com



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September 23, 2021

Richland Township Supervisors
322 Schoolhouse Road, Suite 110
Johnstown, PA 15904

RE: Mine 78 Surface No. 3 Mine Notice
Paint Twp., Somerset Co. & Richland Twp., Cambria Co.
Rosebud Mining Company

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September 23, 2021

Paint Township Supervisors
1741 Basin Drive
Windber, PA 15963

RE: Mine 78 Surface No. 3 Mine Notice
Paint Twp., Somerset Co. & Richland Twp., Cambria Co.
Rosebud Mining Company

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September 23, 2021

Cambria County Commissioners
200 South Center Street
Ebensburg, PA 15931

RE: Mine 78 Surface No. 3 Mine Notice
Paint Twp., Somerset Co. & Richland Twp., Cambria Co.
Rosebud Mining Company

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GENERAL INFORMATION FORM – AUTHORIZATION APPLICATION

Before completing this General Information Form (GIF), read the step-by-step instructions provided in this application package. This form is used by the Department of Environmental Protection (DEP) to inform our programs regarding what other DEP permits or authorizations may be needed for the proposed project or activity. This version of the General Information Form (GIF) must be completed and returned with any program-specific application being submitted to the DEP.

<p style="text-align: center;">Related ID#s (If Known)</p> <p>Client ID# <u>51461</u> APS ID# _____ Site ID# _____ Auth ID# _____ Facility ID# _____</p>	<p style="text-align: center;">DEP USE ONLY</p> <p style="text-align: center;">Date Received & General Notes</p>
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CLIENT INFORMATION

DEP Client ID# 51461	Client Type / Code PACOR	Dun & Bradstreet ID#	
Legal Organization Name or Registered Fictitious Name Rosebud Mining Company		Employer ID# (EIN) Is the EIN a SSN? 25-1359034 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> NO	
State of Incorporation or Registration of Fictitious Name PA	<input checked="" type="checkbox"/> Corporation <input type="checkbox"/> LLC <input type="checkbox"/> Partnership <input type="checkbox"/> LLP <input type="checkbox"/> LP <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Association/Organization <input type="checkbox"/> Estate/Trust <input type="checkbox"/> Other		
Individual Last Name	First Name	MI	Suffix
Additional Individual Last Name	First Name	MI	Suffix
Mailing Address Line 1 301 Market Street		Mailing Address Line 2	
Address Last Line – City Kittanning	State PA	ZIP+4 16201	Country USA
Client Contact Last Name St. Clair	First Name John	MI J	Suffix
Client Contact Title Manager of Permitting	Phone (724) 545-6222	Ext 225	Cell Phone
Email Address John.St.Clair@rosebudmining.com		FAX	

SITE INFORMATION

DEP Site ID#	Site Name Mine 78 Surface No. 3 Mine				
EPA ID#	Estimated Number of Employees to be Present at Site				
Description of Site Surface and auger coal mine					
Tax Parcel ID(s):					
County Name(s)	Municipality(ies)	City	Boro	Twp	State
Cambria	Richland	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PA
Somerset	Paint	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PA
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Site Location Line 1 North of State Route 1033 (Centennial Road)		Site Location Line 2			
Site Location Last Line – City Windber		State PA	ZIP+4 15963		

Detailed Written Directions to Site
 From intersection of US Route 219 and State Route 56: head southeast on PA 56/Scalp Ave, turn left onto 12th Street, turn right onto Jefferson Ave, then immediately bear right onto PA 160/Graham Ave, turn left onto 18th Street, turn left onto Somerset Ave, then immediately turn right onto 17th Street, bear left onto Railroad Street, Road name changes to Centennial Drive.

Site Contact Last Name St. Clair		First Name John		MI J.	Suffix
Site Contact Title Manager of Permitting			Site Contact Firm Rosebud Mining Company		
Mailing Address Line 1 301 Market Street			Mailing Address Line 2		
Mailing Address Last Line – City Kittanning			State PA	ZIP+4 16201	
Phone (724) 545-6222	Ext 225	FAX	Email Address John.St.Clair@rosebudmining.com		
NAICS Codes (Two- & Three-Digit Codes – List All That Apply)				6-Digit Code (Optional)	

Client to Site Relationship
Operator

FACILITY INFORMATION

Modification of Existing Facility	Yes	No
1. Will this project modify an existing facility, system, or activity?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2. Will this project involve an addition to an existing facility, system, or activity?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

If "Yes", check all relevant facility types and provide DEP facility identification numbers below.

Facility Type	DEP Fac ID#	Facility Type	DEP Fac ID#
<input type="checkbox"/> Air Emission Plant	_____	<input type="checkbox"/> Industrial Minerals Mining Operation	_____
<input type="checkbox"/> Beneficial Use (water)	_____	<input type="checkbox"/> Laboratory Location	_____
<input type="checkbox"/> Blasting Operation	_____	<input type="checkbox"/> Land Recycling Cleanup Location	_____
<input type="checkbox"/> Captive Hazardous Waste Operation	_____	<input type="checkbox"/> Mine Drainage Treatment / Land Recycling Project Location	_____
<input type="checkbox"/> Coal Ash Beneficial Use Operation	_____	<input type="checkbox"/> Municipal Waste Operation	_____
<input type="checkbox"/> Coal Mining Operation	_____	<input type="checkbox"/> Oil & Gas Encroachment Location	_____
<input type="checkbox"/> Coal Pillar Location	_____	<input type="checkbox"/> Oil & Gas Location	_____
<input type="checkbox"/> Commercial Hazardous Waste Operation	_____	<input type="checkbox"/> Oil & Gas Water Poll Control Facility	_____
<input type="checkbox"/> Dam Location	_____	<input type="checkbox"/> Public Water Supply System	_____
<input type="checkbox"/> Deep Mine Safety Operation -Anthracite	_____	<input type="checkbox"/> Radiation Facility	_____
<input type="checkbox"/> Deep Mine Safety Operation -Bituminous	_____	<input type="checkbox"/> Residual Waste Operation	_____
<input type="checkbox"/> Deep Mine Safety Operation -Ind Minerals	_____	<input type="checkbox"/> Storage Tank Location	_____
<input type="checkbox"/> Encroachment Location (water, wetland)	_____	<input type="checkbox"/> Water Pollution Control Facility	_____
<input type="checkbox"/> Erosion & Sediment Control Facility	_____	<input type="checkbox"/> Water Resource	_____
<input type="checkbox"/> Explosive Storage Location	_____	<input type="checkbox"/> Other:	_____

Latitude/Longitude Point of Origin	Latitude			Longitude		
	Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
	40	14	16.78	78	47	51.55

Horizontal Accuracy Measure Feet --or-- Meters

Horizontal Reference Datum Code

North American Datum of 1927

North American Datum of 1983

World Geodetic System of 1984

Horizontal Collection Method Code

Reference Point Code

Altitude Feet --or-- Meters

Altitude Datum Name

The National Geodetic Vertical Datum of 1929

The North American Vertical Datum of 1988 (NAVD88)

Altitude (Vertical) Location Datum Collection Method Code

Geometric Type Code

Data Collection Date

Source Map Scale Number Inch(es) = Feet

--or-- Centimeter(s) = Meters

PROJECT INFORMATION

Project Name Mine 78 Surface No. 3 Mine			
Project Description Surface and Auger Coal Mine			
Project Consultant Last Name N/A	First Name	MI	Suffix
Project Consultant Title		Consulting Firm	
Mailing Address Line 1		Mailing Address Line 2	
Address Last Line – City		State	ZIP+4
Phone	Ext	FAX	Email Address
Time Schedules 2022	Project Milestone (Optional) Start of Operation		

1. Is the project located in or within a 0.5-mile radius of an Environmental Justice community as defined by DEP? Yes No
- To determine if the project is located in or within a 0.5-mile radius of an environmental justice community, please use the online [Environmental Justice Areas Viewer](#).
-
2. Have you informed the surrounding community prior to submitting the application to the Department? Yes No
- Method of notification:** Public notice with permit submittal
-
3. Have you addressed community concerns that were identified? Yes No N/A
- If no, please briefly describe the community concerns that have been expressed and not addressed.
-
4. Is your project funded by state or federal grants? Yes No
- Note:** If “Yes”, specify what aspect of the project is related to the grant and provide the grant source, contact person and grant expiration date.
- Aspect of Project Related to Grant _____
- Grant Source: _____
- Grant Contact Person: _____
- Grant Expiration Date: _____
-
5. Is this application for an authorization on Appendix A of the Land Use Policy? (For referenced list, see Appendix A of the Land Use Policy attached to GIF instructions) Yes No
- Note:** If “No” to Question 5, the application is not subject to the Land Use Policy.
If “Yes” to Question 5, the application is subject to this policy and the Applicant should answer the additional questions in the Land Use Information section.

LAND USE INFORMATION

Note: Applicants should submit copies of local land use approvals or other evidence of compliance with local comprehensive plans and zoning ordinances.

1.	Is there an adopted county or multi-county comprehensive plan?	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
2.	Is there a county stormwater management plan?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
3.	Is there an adopted municipal or multi-municipal comprehensive plan?	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
4.	Is there an adopted county-wide zoning ordinance, municipal zoning ordinance or joint municipal zoning ordinance?	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
<p>Note: If the Applicant answers "No" to either Questions 1, 3 or 4, the provisions of the PA MPC are not applicable and the Applicant does not need to respond to questions 5 and 6 below. If the Applicant answers "Yes" to questions 1, 3 and 4, the Applicant should respond to questions 5 and 6 below.</p>					
5.	Does the proposed project meet the provisions of the zoning ordinance or does the proposed project have zoning approval? If zoning approval has been received, attach documentation.	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
6.	Have you attached Municipal and County Land Use Letters for the project?	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No

COORDINATION INFORMATION

Note: The PA Historical and Museum Commission must be notified of proposed projects in accordance with DEP Technical Guidance Document 012-0700-001 utilizing the [Project Review Form](#).

If the activity will be a mining project (i.e., mining of coal or industrial minerals, coal refuse disposal and/or the operation of a coal or industrial minerals preparation/processing facility), respond to questions 1.0 through 2.5 below.

If the activity will not be a mining project, skip questions 1.0 through 2.5 and begin with question 3.0.

1.0	Is this a coal mining project? If "Yes", respond to 1.1-1.6. If "No", skip to Question 2.0.	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
1.1	Will this coal mining project involve coal preparation/ processing activities in which the total amount of coal prepared/processed will be equal to or greater than 200 tons/day?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
1.2	Will this coal mining project involve coal preparation/ processing activities in which the total amount of coal prepared/processed will be greater than 50,000 tons/year?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
1.3	Will this coal mining project involve coal preparation/ processing activities in which thermal coal dryers or pneumatic coal cleaners will be used?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
1.4	For this coal mining project, will sewage treatment facilities be constructed and treated waste water discharged to surface waters?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
1.5	Will this coal mining project involve the construction of a permanent impoundment meeting one or more of the following criteria: (1) a contributory drainage area exceeding 100 acres; (2) a depth of water measured by the upstream toe of the dam at maximum storage elevation exceeding 15 feet; (3) an impounding capacity at maximum storage elevation exceeding 50 acre-feet?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
1.6	Will this coal mining project involve underground coal mining to be conducted within 500 feet of an oil or gas well?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
2.0	Is this a non-coal (industrial minerals) mining project? If "Yes", respond to 2.1-2.6. If "No", skip to Question 3.0.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
2.1	Will this non-coal (industrial minerals) mining project involve the crushing and screening of non-coal minerals other than sand and gravel?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No

2.2	Will this non-coal (industrial minerals) mining project involve the crushing and/or screening of sand and gravel with the exception of wet sand and gravel operations (screening only) and dry sand and gravel operations with a capacity of less than 150 tons/hour of unconsolidated materials?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
2.3	Will this non-coal (industrial minerals) mining project involve the construction, operation and/or modification of a portable non-metallic (i.e., non-coal) minerals processing plant under the authority of the General Permit for Portable Non-metallic Mineral Processing Plants (i.e., BAQ-PGPA/GP-3)?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
2.4	For this non-coal (industrial minerals) mining project, will sewage treatment facilities be constructed and treated waste water discharged to surface waters?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
2.5	Will this non-coal (industrial minerals) mining project involve the construction of a permanent impoundment meeting one or more of the following criteria: (1) a contributory drainage area exceeding 100 acres; (2) a depth of water measured by the upstream toe of the dam at maximum storage elevation exceeding 15 feet; (3) an impounding capacity at maximum storage elevation exceeding 50 acre-feet?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
3.0	Will your project, activity, or authorization have anything to do with a well related to oil or gas production, have construction within 200 feet of, affect an oil or gas well, involve the waste from such a well, or string power lines above an oil or gas well? If "Yes", respond to 3.1-3.3. If "No", skip to Question 4.0.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
3.1	Does the oil- or gas-related project involve any of the following: placement of fill, excavation within or placement of a structure, located in, along, across or projecting into a watercourse, floodway or body of water (including wetlands)?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
3.2	Will the oil- or gas-related project involve discharge of industrial wastewater or stormwater to a dry swale, surface water, ground water or an existing sanitary sewer system or storm water system? If "Yes", discuss in <i>Project Description</i> .	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
3.3	Will the oil- or gas-related project involve the construction and operation of industrial waste treatment facilities?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
4.0	Will the project involve a construction activity that results in earth disturbance? If "Yes", specify the total disturbed acreage.	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
4.0.1	Total Disturbed Acreage 46.6				
4.0.2	Will the project discharge or drain to a special protection water (EV or HQ) or an EV wetland?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
4.0.3	Will the project involve a construction activity that results in earth disturbance in the area of the earth disturbance that are contaminated at levels exceeding residential or non-residential medium-specific concentrations (MSCs) in 25 Pa. Code Chapter 250 at residential or non-residential construction sites, respectively?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
5.0	Does the project involve any of the following: water obstruction and/or encroachment, wetland impacts, or floodplain project by the Commonwealth/political subdivision or public utility? If "Yes", respond to 5.1-5.7. If "No", skip to Question 6.0.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
5.1	Water Obstruction and Encroachment Projects – Does the project involve any of the following: placement of fill, excavation within or placement of a structure, located in, along, across or projecting into a watercourse, floodway or body of water?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
5.2	Wetland Impacts – Does the project involve any of the following: placement of fill, excavation within or placement of a structure, located in, along, across or projecting into a wetland?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No

5.3	Floodplain Projects by the Commonwealth, a Political Subdivision of the Commonwealth or a Public Utility – Does the project involve any of the following: placement of fill, excavation within or placement of a structure, located in, along, across or projecting into a floodplain?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
5.4	Is your project an interstate transmission natural gas pipeline?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
5.5	Does your project consist of linear construction activities which result in earth disturbance in two or more DEP regions AND three or more counties?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
5.6	Does your project utilize Floodplain Restoration as a best management practice for Post Construction Stormwater Management?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
5.7	Does your project utilize Class V Gravity / Injection Wells as a best management practice for Post Construction Stormwater Management?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
6.0	Will the project involve discharge of construction related stormwater to a dry swale, surface water, ground water or separate storm water system?	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
6.1	Will the project involve discharge of industrial waste stormwater or wastewater from an industrial activity or sewage to a dry swale, surface water, ground water or an existing sanitary sewer system or separate storm water system?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
7.0	Will the project involve the construction and operation of industrial waste treatment facilities?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
8.0	Will the project involve construction of sewage treatment facilities, sanitary sewers, or sewage pumping stations? If "Yes", indicate estimated proposed flow (gal/day). Also, discuss the sanitary sewer pipe sizes and the number of pumping stations/treatment facilities/name of downstream sewage facilities in the <i>Project Description</i> , where applicable.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
	8.0.1 Estimated Proposed Flow (gal/day)				
9.0	Will the project involve the subdivision of land, or the generation of 800 gpd or more of sewage on an existing parcel of land or the generation of an additional 400 gpd of sewage on an already-developed parcel, or the generation of 800 gpd or more of industrial wastewater that would be discharged to an existing sanitary sewer system?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
	9.0.1 Was Act 537 sewage facilities planning submitted and approved by DEP? If "Yes" attach the approval letter. Approval required prior to 105/NPDES approval.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
10.0	Is this project for the beneficial use of biosolids for land application within Pennsylvania? If "Yes" indicate how much (i.e. gallons or dry tons per year).	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
	10.0.1 Gallons Per Year (residential septage) _____				
	10.0.2 Dry Tons Per Year (biosolids) _____				
11.0	Does the project involve construction, modification or removal of a dam? If "Yes", identify the dam.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
	11.0.1 Dam Name _____				
12.0	Will the project interfere with the flow from, or otherwise impact, a dam? If "Yes", identify the dam.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
	12.0.1 Dam Name _____				


13.0	Will the project involve operations (excluding during the construction period) that produce air emissions (i.e., NOX, VOC, etc.)?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
13.0.1	If "Yes", is the operation subject to the agricultural exemption in 35 P.S. § 4004.1?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
13.0.2	If the answer to 13.0.1 is "No", identify each type of emission followed by the estimated amount of that emission. Enter all types & amounts of emissions; separate each set with semicolons.				
14.0	Does the project include the construction or modification of a drinking water supply to serve 15 or more connections or 25 or more people, at least 60 days out of the year? If "Yes", check all proposed sub-facilities.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
14.0.1	Number of Persons Served	_____			
14.0.2	Number of Employee/Guests	_____			
14.0.3	Number of Connections	_____			
14.0.4	Sub-Fac: Distribution System	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
14.0.5	Sub-Fac: Water Treatment Plant	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
14.0.6	Sub-Fac: Source	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
14.0.7	Sub-Fac: Pump Station	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
14.0.8	Sub Fac: Transmission Main	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
14.0.9	Sub-Fac: Storage Facility	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
15.0	Will your project include infiltration of storm water or waste water to ground water within one-half mile of a public water supply well, spring or infiltration gallery?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
16.0	Is your project to be served by an existing public water supply? If "Yes", indicate name of supplier and attach letter from supplier stating that it will serve the project.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
16.0.1	Supplier's Name	_____			
16.0.2	Letter of Approval from Supplier is Attached	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
17.0	Will this project be served by on-lot drinking water wells?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
18.0	Will this project involve a new or increased drinking water withdrawal from a river, stream, spring, lake, well or other water bod(ies)? If "Yes", reference Safe Drinking Water Program.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
18.0.1	Source Name	_____			
19.0	Will the construction or operation of this project involve treatment, storage, reuse, or disposal of waste? If "Yes", indicate what type (i.e., hazardous, municipal (including infectious & chemotherapeutic), residual) and the amount to be treated, stored, re-used or disposed.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
19.0.1	Type & Amount	_____			
20.0	Will your project involve the removal of coal, minerals, contaminated media, or solid waste as part of any earth disturbance activities?	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
21.0	Does your project involve installation of a field constructed underground storage tank? If "Yes", list each Substance & its Capacity. Note: Applicant may need a Storage Tank Site Specific Installation Permit.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
21.0.1	Enter all substances & capacity of each; separate each set with semicolons.	_____			

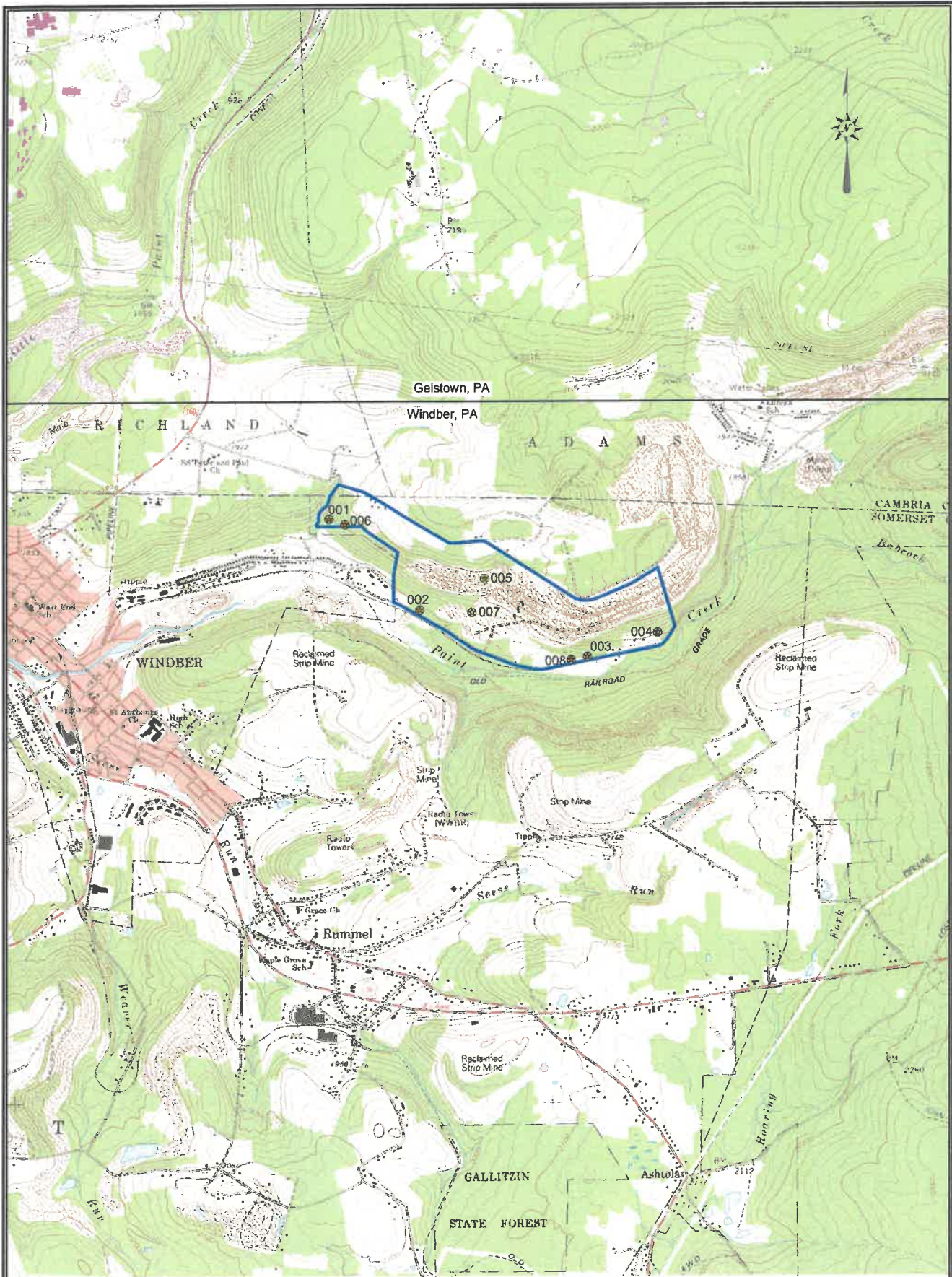
22.0	Does your project involve installation of an aboveground storage tank greater than 21,000 gallons capacity at an existing facility? If "Yes", list each Substance & its Capacity. Note: Applicant may need a Storage Tank Site Specific Installation Permit. 22.0.1 Enter all substances & capacity of each; separate each set with semicolons.	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
23.0	Does your project involve installation of a tank greater than 1,100 gallons which will contain a highly hazardous substance as defined in DEP's Regulated Substances List, 2570-BK-DEP2724? If "Yes", list each Substance & its Capacity. Note: Applicant may need a Storage Tank Site Specific Installation Permit. 23.0.1 Enter all substances & capacity of each; separate each set with semicolons.	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
24.0	Does your project involve installation of a storage tank at a new facility with a total AST capacity greater than 21,000 gallons? If "Yes", list each Substance & its Capacity. Note: Applicant may need a Storage Tank Site Specific Installation Permit. 24.0.1 Enter all substances & capacity of each; separate each set with semicolons.	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
<p>NOTE: If the project includes the installation of a regulated storage tank system, including diesel emergency generator systems, the project may require the use of a Department Certified Tank Handler. For a full list of regulated storage tanks and substances, please go to www.dep.pa.gov search term storage tanks</p>			
25.0	Will the intended activity involve the use of a radiation source?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

CERTIFICATION


I certify that I have the authority to submit this application on behalf of the applicant named herein and that the information provided in this application is true and correct to the best of my knowledge and information.

For applicants supplying an EIN number: I am applying for a permit or authorization from the Pennsylvania Department of Environmental Protection (DEP). As part of this application, I will provide DEP with an accurate EIN number for the applicant entity. By filing this application with DEP, I hereby authorize DEP to confirm the accuracy of the EIN number provided with the Pennsylvania Department of Revenue. As applicant, I further consent to the Department of Revenue discussing the same with DEP prior to issuance of the Commonwealth permit or authorization.

Type or Print Name	John St. Clair	
	Manager of Permitting	09/23/21
Signature	Title	Date



LOCATION MAP

 Permit Boundary (279.7 Acres)
 NPDES Outfall



Reference: Geistown, PA and Windber, PA 7.5' Quadrangles

REVISIONS			
No	By	Date	Description

Project	MINE 78 SURFACE NO. 3
Client	ROSEBUD MINING COMPANY 301 MARKET STREET, KITTANNING, PA 16201 PHONE: 724-645-0222
For	Richland Township, Cambria County Paint Township, Somerset County
Location	Upper Freeport, Lower Freeport Upper Kittanning, Middle Kittanning
Seam	
Drawn By	JJS
Date	08/2021
Scale	1" = 1000'