**COMMONWEALTH OF VIRGINIA**
**DEPARTMENT OF ENVIRONMENTAL QUALITY**
**CONCRETE PRODUCTS FACILITIES**
**DISCHARGE MONITORING REPORT (DMR)**

**NAME:** Allied Concrete Co - Zion Crossroads  
**ADDRESS:** PO Box 1547  
**City:** Charlottesville  
**State:** VA  
**ZIP:** 22902

**MONITORING PERIOD**

<table>
<thead>
<tr>
<th>FROM</th>
<th>TO</th>
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</thead>
<tbody>
<tr>
<td>2019 1</td>
<td>2021 12 31</td>
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</table>

**PARAMETER** | **QUANTITY OR LOADING** | **QUALITY OR CONCENTRATION** | **NO. EX.** | **FREQUENCY OF ANALYSIS** | **SAMPLE TYPE** |
<table>
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<tbody>
<tr>
<td></td>
<td>AVERAGE</td>
<td>MAXIMUM</td>
<td>UNITS</td>
<td>MINIMUM</td>
<td>AVERAGE</td>
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<tr>
<td><strong>001 FLOW</strong></td>
<td>REPORTED</td>
<td>0.006</td>
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<td>m^3/d</td>
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<td>NL</td>
<td>m^3/d</td>
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<tr>
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<td>8.29</td>
<td>m^3/d</td>
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**STORM EVENT INFORMATION**

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<tr>
<th>DATE</th>
<th>DURATION</th>
<th>RAINFALL TOTAL (IN.)</th>
<th>DAYS</th>
<th>PRECEDING EVENT</th>
<th>HOURS</th>
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<td>1.04</td>
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**DEQ Comments:**

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**BYPASSES AND OVERFLOWS**

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<thead>
<tr>
<th>TOTAL OCCURRENCES</th>
<th>TOTAL FLOW (M.G.)</th>
<th>TOTAL BOD (K.G.)</th>
<th>OPERATOR IN RESPONSIBLE CHARGE</th>
<th>DATE</th>
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</thead>
<tbody>
<tr>
<td></td>
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<td>TYPED OR PRINTED NAME</td>
<td>SIGNATURE</td>
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<tr>
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<td></td>
<td>PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT</td>
<td>TELEPHONE</td>
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1. CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS HEREIN ARE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ENSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE 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 FIRE AND IMPRISONMENT FOR KNOWING VIOLATIONS.