

Jerry L. Storedahl, Owner



CM-02

Office: (360) 636-2420  
FAX: (360) 577-3906

2233 Talley Way • Kelso, Washington 98626

ROCK PRODUCTS, GRADING & EXCAVATING

April 12, 2013

Department of Ecology  
Water Quality Permit Coordinator  
P.O. Box 47600  
Olympia, WA 98504-7600

Dear Sirs,

Please find with this cover letter, Discharge Monitoring Reports (DMR's) from J.L. Storedahl and Sons, Inc. for the first quarter of 2013.

They include:

WAG-50-1359

Daybreak Pit

Thank you for your time. If you have any questions or concerns please feel free to contact me at my office at (360)636-2420 or on my cell at (360)957-3555.

Sincerely,

A handwritten signature in cursive script that reads "Brian K. Sanders".

Brian K. Sanders  
Environmental Coordinator

**WAG-50-1359**  
**SAND AND GRAVEL GENERAL PERMIT**  
**DISCHARGE MONITORING REPORT**

Stormwater to Surface Water – NAICS Code 212311 (Dimension Stone Mining & Quarrying),  
 212321 (Construction Sand & Gravel Mining), 212322 (Industrial Sand Mining)

NAME/ FACILITY: **J L Storedahl & Sons - Daybreak Pit**  
 27140 NE 61<sup>st</sup> Avenue, Battle Ground Clark County

DISCHARGE MONITORING POINT: **SWA**

MONITORING PERIOD: FROM: 1 / 1 / 2013 TO: 3 / 31 / 2013

(Instructions and Signature Block on Reverse Side)

|                                                                                     |                                                                                                                             |                                                                                                                                                                                                                                                                                  |
|-------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>QUARTERLY<br/>MONITORING</b>                                                     | <input type="checkbox"/> There was NO discharge at any time during the quarter <span style="float: right;"><u>OR</u></span> |                                                                                                                                                                                                                                                                                  |
|                                                                                     | SAMPLE DATE (MM/DD/YYYY)                                                                                                    | Nitrate +Nitrite (mg/L as N)                                                                                                                                                                                                                                                     |
|                                                                                     |                                                                                                                             | <u>N/A</u>                                                                                                                                                                                                                                                                       |
|                                                                                     |                                                                                                                             | QUARTERLY AVERAGE =                                                                                                                                                                                                                                                              |
| <b>MONTHLY<br/>MONITORING</b>                                                       | <input type="checkbox"/> There was NO discharge at any time during the month <span style="float: right;"><u>OR</u></span>   |                                                                                                                                                                                                                                                                                  |
|                                                                                     | SAMPLE DATE (MM/DD/YYYY)                                                                                                    | TURBIDITY (NTUs)                                                                                                                                                                                                                                                                 |
|                                                                                     | <u>1/15/2013</u>                                                                                                            | <u>3.6</u>                                                                                                                                                                                                                                                                       |
|                                                                                     | <u>1/28/2013</u>                                                                                                            | <u>4.3</u>                                                                                                                                                                                                                                                                       |
| <u>JANUARY</u><br>MONTH                                                             | <input type="checkbox"/> Check if only ONE discharge during the month                                                       |                                                                                                                                                                                                                                                                                  |
|                                                                                     | SUMMARY                                                                                                                     | AVERAGE = <u>3.9</u>                                                                                                                                                                                                                                                             |
| <b>FEBRUARY</b><br>MONTH                                                            | <input type="checkbox"/> There was NO discharge at any time during the month <span style="float: right;"><u>OR</u></span>   |                                                                                                                                                                                                                                                                                  |
|                                                                                     | <u>2/14/2013</u>                                                                                                            | <u>4.7</u>                                                                                                                                                                                                                                                                       |
|                                                                                     | <u>2/25/2013</u>                                                                                                            | <u>4.6</u>                                                                                                                                                                                                                                                                       |
|                                                                                     | <input type="checkbox"/> Check if only ONE discharge during the month                                                       |                                                                                                                                                                                                                                                                                  |
|                                                                                     | SUMMARY                                                                                                                     | AVERAGE = <u>4.7</u>                                                                                                                                                                                                                                                             |
| <b>MARCH</b><br>MONTH                                                               | <input type="checkbox"/> There was NO discharge at any time during the month <span style="float: right;"><u>OR</u></span>   |                                                                                                                                                                                                                                                                                  |
|                                                                                     | <u>3/7/2013</u>                                                                                                             | <u>4.1</u>                                                                                                                                                                                                                                                                       |
|                                                                                     | <u>3/22/2013</u>                                                                                                            | <u>3.8</u>                                                                                                                                                                                                                                                                       |
|                                                                                     | <input type="checkbox"/> Check if only ONE discharge during the month                                                       |                                                                                                                                                                                                                                                                                  |
|                                                                                     | SUMMARY                                                                                                                     | AVERAGE = <u>4.0</u>                                                                                                                                                                                                                                                             |
| <b>Visible Oil Sheen Detected?</b>                                                  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No                                                      | 1. If Yes, identify all date(s) detected: _____<br>2. If Yes, identify the probable cause of the oil sheen and the actions taken to prevent further contamination in the inspection report. Failure to describe control of sheen in the inspection report is a permit violation. |
| <b>Oil Sheen or Petroleum Products Discharged to Ground Water or Surface Water?</b> | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No                                                      | If Yes, date(s) discharged _____                                                                                                                                                                                                                                                 |

WAG-50-1359

# 2010 SAND AND GRAVEL GENERAL PERMIT DISCHARGE MONITORING REPORT Form 1A

Stormwater to Ground Water – NAICS 212311 (Dimension Stone), 212321 (Construction Sand and Gravel), 212322 (Industrial Sand)

NAME/ FACILITY: J L Storedahl & Sons - Daybreak Pit  
27140 NE 61st Avenue, Battle Ground Clark County

DISCHARGE MONITORING POINT: GW1

MONITORING PERIOD: FROM: 1/1/2013 TO: 3/31/2013

Daily monitoring for visible oil sheen is required at all discharge points or representative locations where water collects prior to discharge each day that runoff occurs.

## DAILY MONITORING WHEN RUNOFF OCCURS

| Visible Oil Sheen Detected?                                                         | <input type="checkbox"/> Yes                                           | 1. If Yes, identify all date(s) detected: _____                                                                                                                                                                               |         |        |                                  |
|-------------------------------------------------------------------------------------|------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|--------|----------------------------------|
|                                                                                     | <input checked="" type="checkbox"/> No                                 | 2. If Yes, identify the probable cause of the oil sheen and the actions taken to prevent further contamination in the inspection report. Failure to describe control of sheen in the inspection report is a permit violation. |         |        |                                  |
| LIMITS                                                                              | Parameter                                                              | Minimum                                                                                                                                                                                                                       | Maximum | Units  | # Samples                        |
|                                                                                     | Oil Sheen                                                              | No discharge of sheen to ground water or surface water                                                                                                                                                                        |         | Yes/No | Observe daily when runoff occurs |
| <u>Oil Sheen or Petroleum Products Discharged to Ground Water or Surface Water?</u> | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No | If Yes, date(s) discharged _____                                                                                                                                                                                              |         |        |                                  |

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 33 USC § 1319. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$10,000.00 AND OR MAXIMUM IMPRISONMENT OF BETWEEN SIX MONTHS AND FIVE YEARS.)

Brian H. Sanders

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER (TYPED OR PRINTED)

2013/4/10  
DATE: YEAR MO DAY

Brian H. Sanders / ENVIRON CORP

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

360-636-2420  
TELEPHONE NUMBER

WAG-50-1359

# 2010 SAND AND GRAVEL GENERAL PERMIT DISCHARGE MONITORING REPORT **Form 1A**

Stormwater to Ground Water – NAICS 212311 (Dimension Stone), 212321 (Construction Sand and Gravel), 212322 (Industrial Sand)

NAME/ FACILITY: J L Storedahl & Sons - Daybreak Pit  
27140 NE 61st Avenue, Battle Ground Clark County

DISCHARGE MONITORING POINT: GW2

MONITORING PERIOD: FROM: 1 / 1 / 2013 TO: 3 / 31 / 2013

*Daily monitoring for visible oil sheen is required at all discharge points or representative locations where water collects prior to discharge each day that runoff occurs.*

## DAILY MONITORING WHEN RUNOFF OCCURS

| Visible Oil Sheen Detected?                                                  | <input type="checkbox"/> Yes                                           | 1. If Yes, identify all date(s) detected: _____                                                                                                                                                                               |         |        |                                  |
|------------------------------------------------------------------------------|------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|--------|----------------------------------|
|                                                                              | <input checked="" type="checkbox"/> No                                 | 2. If Yes, identify the probable cause of the oil sheen and the actions taken to prevent further contamination in the inspection report. Failure to describe control of sheen in the inspection report is a permit violation. |         |        |                                  |
| LIMITS                                                                       | Parameter                                                              | Minimum                                                                                                                                                                                                                       | Maximum | Units  | # Samples                        |
|                                                                              | Oil Sheen                                                              | No discharge of sheen to ground water or surface water                                                                                                                                                                        |         | Yes/No | Observe daily when runoff occurs |
| Oil Sheen or Petroleum Products Discharged to Ground Water or Surface Water? | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No | If Yes, date(s) discharged _____                                                                                                                                                                                              |         |        |                                  |

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 33 USC § 1319. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$10,000.00 AND OR MAXIMUM IMPRISONMENT OF BETWEEN SIX MONTHS AND FIVE YEARS.)

BRIAN K. SANDERS

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER (TYPED OR PRINTED)

2013 / 4 / 10

DATE: YEAR MO DAY

Brian K. Sanders / ENVIRON. COORD

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

360-636-2420

TELEPHONE NUMBER



WAG-50-1359

# 2010 SAND AND GRAVEL GENERAL PERMIT DISCHARGE MONITORING REPORT Form 1A

Stormwater to Ground Water = NAICS 212311 (Dimension Stone), 212321 (Construction Sand and Gravel), 212322 (Industrial Sand)

NAME/ FACILITY: J L Storedahl & Sons - Daybreak Pit  
27140 NE 61st Avenue, Battle Ground Clark County

DISCHARGE MONITORING POINT: GW3

MONITORING PERIOD: FROM: 1 / 1 / 2013 TO: 3 / 31 / 2013

*Daily monitoring for visible oil sheen is required at all discharge points or representative locations where water collects prior to discharge each day that runoff occurs.*

## DAILY MONITORING WHEN RUNOFF OCCURS

|                                                                              |                                                                        |                                                                                                                                                                                                                               |         |        |                                  |
|------------------------------------------------------------------------------|------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|--------|----------------------------------|
| Visible Oil Sheen Detected?                                                  | <input type="checkbox"/> Yes                                           | 1. If Yes, identify all date(s) detected: _____                                                                                                                                                                               |         |        |                                  |
|                                                                              | <input checked="" type="checkbox"/> No                                 | 2. If Yes, identify the probable cause of the oil sheen and the actions taken to prevent further contamination in the inspection report. Failure to describe control of sheen in the inspection report is a permit violation. |         |        |                                  |
| LIMITS                                                                       | Parameter                                                              | Minimum                                                                                                                                                                                                                       | Maximum | Units  | # Samples                        |
|                                                                              | Oil Sheen                                                              | No discharge of sheen to ground water or surface water                                                                                                                                                                        |         | Yes/No | Observe daily when runoff occurs |
| Oil Sheen or Petroleum Products Discharged to Ground Water or Surface Water? | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No | If Yes, date(s) discharged _____                                                                                                                                                                                              |         |        |                                  |

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 33 USC § 1319. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$10,000.00 AND OR MAXIMUM IMPRISONMENT OF BETWEEN SIX MONTHS AND FIVE YEARS.)

BRIAN K. SANDERS

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER (TYPED OR PRINTED)

2013/4/10

DATE: YEAR MO DAY

Brian K. Sanders / ENVIRON. COORD

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

360-636-2420

TELEPHONE NUMBER

WAG-50-1359

# 2010 SAND AND GRAVEL GENERAL PERMIT DISCHARGE MONITORING REPORT Form 1A

Stormwater to Ground Water – NAICS 212311 (Dimension Stone), 212321 (Construction Sand and Gravel), 212322 (Industrial Sand)

NAME/ FACILITY: J L Storedahl & Sons - Daybreak Pit  
27140 NE 61st Avenue, Battle Ground Clark County

DISCHARGE MONITORING POINT: GW5

MONITORING PERIOD: FROM: 1 / 1 / 2013 TO: 3 / 31 / 2013

*Daily monitoring for visible oil sheen is required at all discharge points or representative locations where water collects prior to discharge each day that runoff occurs.*

## DAILY MONITORING WHEN RUNOFF OCCURS

| Visible Oil Sheen Detected?                                                  | <input type="checkbox"/> Yes                                           | 1. If Yes, identify all date(s) detected: _____                                                                                                                                                                               |         |        |                                  |
|------------------------------------------------------------------------------|------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|--------|----------------------------------|
|                                                                              | <input checked="" type="checkbox"/> No                                 | 2. If Yes, identify the probable cause of the oil sheen and the actions taken to prevent further contamination in the inspection report. Failure to describe control of sheen in the inspection report is a permit violation. |         |        |                                  |
| LIMITS                                                                       | Parameter                                                              | Minimum                                                                                                                                                                                                                       | Maximum | Units  | # Samples                        |
|                                                                              | Oil Sheen                                                              | No discharge of sheen to ground water or surface water                                                                                                                                                                        |         | Yes/No | Observe daily when runoff occurs |
| Oil Sheen or Petroleum Products Discharged to Ground Water or Surface Water? | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No | If Yes, date(s) discharged _____                                                                                                                                                                                              |         |        |                                  |

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 33 USC § 1319. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$10,000.00 AND OR MAXIMUM IMPRISONMENT OF BETWEEN SIX MONTHS AND FIVE YEARS.)

Brian K. Sanders  
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER (TYPED OR PRINTED)

2013/4/10  
DATE: YEAR MO DAY

Brian K. Sanders / ENVIRON. COORD  
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

360-636-2420  
TELEPHONE NUMBER

**COLUMBIA ANALYTICAL SERVICES, INC.**

Now part of the ALS Group

## Analytical Report

**Client:** JL Storedahl & Sons, Incorporated  
**Project:** J.L Storedahl & Sons Inc  
**Sample Matrix:** Water  
**Analysis Method:** SM 2540 D

**Service Request:** K1302603**Date Collected:** 03/22/13**Date Received:** 03/22/13**Units:** mg/L**Basis:** NA**Solids, Total Suspended (TSS)**

| Sample Name  | Lab Code     | Result | MRL | Dil. | Date Analyzed  | Q |
|--------------|--------------|--------|-----|------|----------------|---|
| Daybreak SWA | K1302603-002 | ND U   | 5.0 | 1    | 03/28/13 14:00 |   |
| Method Blank | K1302603-MB1 | ND U   | 5.0 | 1    | 03/28/13 14:00 |   |
| Method Blank | K1302603-MB2 | ND U   | 5.0 | 1    | 03/28/13 14:00 |   |
| Method Blank | K1302603-MB3 | ND U   | 5.0 | 1    | 03/28/13 14:00 |   |

Jerry L. Storedahl, Owner



Office: (360) 636-2420  
FAX: (360) 577-3906

2233 Talley Way • Kelso, Washington 98626

ROCK PRODUCTS, GRADING & EXCAVATING

October 22, 2013

Department of Ecology  
Water Quality Permit Coordinator  
P.O. Box 47600  
Olympia, WA 98504-7600

Dear Sirs,

Please find with this cover letter, Discharge Monitoring Reports (DMR's) from J.L. Storedahl and Sons, Inc. for the third quarter of 2013.

They include:

WAG-50-1359

Daybreak Pit

Thank you for your time. If you have any questions or concerns please feel free to contact me at my office at (360)636-2420 or on my cell at (360)957-3555.

Sincerely,

A handwritten signature in cursive script that reads 'Brian K. Sanders'.

Brian K. Sanders  
Environmental Coordinator

WAG-50-1359

**SAND AND GRAVEL GENERAL PERMIT  
DISCHARGE MONITORING REPORT**

Stormwater to Surface Water – NAICS Code 212311 (Dimension Stone Mining & Quarrying),  
212321 (Construction Sand & Gravel Mining), 212322 (Industrial Sand Mining)

NAME/ FACILITY: J L Storedahl & Sons - Daybreak Pit  
27140 NE 61<sup>st</sup> Avenue, Battle Ground Clark County

DISCHARGE MONITORING POINT: SWA

MONITORING PERIOD: FROM: 7 / 1 / 2013 TO: 9 / 30 / 2013

(Instructions and Signature Block on Reverse Side)

|                                                                              |                                                                                          |                                                                                                                                                                                                                                                                                  |
|------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| QUARTERLY<br>MONITORING                                                      | <input type="checkbox"/> There was NO discharge at any time during the quarter <u>OR</u> |                                                                                                                                                                                                                                                                                  |
|                                                                              | SAMPLE DATE (MM/DD/YYYY)                                                                 | Nitrate +Nitrite (mg/L as N)                                                                                                                                                                                                                                                     |
|                                                                              |                                                                                          | <u>N/A</u>                                                                                                                                                                                                                                                                       |
|                                                                              | QUARTERLY AVERAGE =                                                                      |                                                                                                                                                                                                                                                                                  |
| MONTHLY<br>MONITORING                                                        | <input type="checkbox"/> There was NO discharge at any time during the month <u>OR</u>   |                                                                                                                                                                                                                                                                                  |
| <u>July</u><br>MONTH                                                         | SAMPLE DATE (MM/DD/YYYY)                                                                 | TURBIDITY (NTUs)                                                                                                                                                                                                                                                                 |
|                                                                              | <u>7/2/2013</u>                                                                          | <u>3.8</u>                                                                                                                                                                                                                                                                       |
|                                                                              | <u>7/18/2013</u>                                                                         | <u>4.3</u>                                                                                                                                                                                                                                                                       |
|                                                                              | SUMMARY AVERAGE = <u>3.6</u>                                                             |                                                                                                                                                                                                                                                                                  |
| <u>AUGUST</u><br>MONTH                                                       | SAMPLE DATE (MM/DD/YYYY)                                                                 | TURBIDITY (NTUs)                                                                                                                                                                                                                                                                 |
|                                                                              | <u>8/6/2013</u>                                                                          | <u>4.8</u>                                                                                                                                                                                                                                                                       |
|                                                                              | <u>8/24/2013</u>                                                                         | <u>5.7</u>                                                                                                                                                                                                                                                                       |
|                                                                              | SUMMARY AVERAGE = <u>5.3</u>                                                             |                                                                                                                                                                                                                                                                                  |
| <u>SEPTEMBER</u><br>MONTH                                                    | SAMPLE DATE (MM/DD/YYYY)                                                                 | TURBIDITY (NTUs)                                                                                                                                                                                                                                                                 |
|                                                                              | <u>9/6/2013</u>                                                                          | <u>4.6</u>                                                                                                                                                                                                                                                                       |
|                                                                              | <u>9/19/2013</u>                                                                         | <u>5.3</u>                                                                                                                                                                                                                                                                       |
|                                                                              | SUMMARY AVERAGE = <u>5.0</u>                                                             |                                                                                                                                                                                                                                                                                  |
| Visible Oil Sheen Detected?                                                  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No                   | 1. If Yes, identify all date(s) detected: _____<br>2. If Yes, identify the probable cause of the oil sheen and the actions taken to prevent further contamination in the inspection report. Failure to describe control of sheen in the inspection report is a permit violation. |
| Oil Sheen or Petroleum Products Discharged to Ground Water or Surface Water? | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No                   | If Yes, date(s) discharged _____                                                                                                                                                                                                                                                 |

|        |                    |                                                        |                  |        |           |
|--------|--------------------|--------------------------------------------------------|------------------|--------|-----------|
| LIMITS | Nitrate + Nitrite* | 0.68 mg/L average                                      |                  | mg/L   | Quarterly |
|        | Turbidity          | 50 Average Monthly                                     | 50 Maximum Daily | NTU    | 2x month  |
|        | Oil Sheen**        | No discharge of sheen to ground water or surface water |                  | Yes/No | Daily     |

\* Quarterly nitrate/nitrite monitoring and limit applicable only when blasting is used at the facility (within 2 years prior to sample date). If monitoring is not applicable place NA for average.

\*\* Daily monitoring for visible oil sheen is required at all discharge points (or representative locations where water collects prior to discharge) each day that runoff occurs.

For NAICS Codes 212311, 212321, 212322: Twice-monthly monitoring for turbidity is required if the discharge is to surface water and includes only stormwater. Unless there was no discharge during a month, there must be at least one sample and analysis for turbidity. Report the average of the turbidity samples as "Monthly Average".

Be sure to include the name of the discharge point at the top of the form.

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 33 USC § 1319. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$10,000.00 AND OR MAXIMUM IMPRISONMENT OF BETWEEN SIX MONTHS AND FIVE YEARS.)

BRIAN K. SANDERS

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER (TYPED OR PRINTED)

10/14/2013  
DATE: MO DAY YEAR

Brian K. Sanders ENVIRON. COORD.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

360-636-2420  
TELEPHONE NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

**Reporting Permit Violations** - When the Permittee cannot comply with the permit limits, due to any cause, the Permittee shall: 1. Immediately take action to stop, contain, and clean up the unauthorized discharges or otherwise stop the violation, correct the problem and, if applicable, repeat the sampling and analysis of any violation; 2. The Permittee is required to notify the Ecology Regional Sand and Gravel Permit Manager orally within 24 hours of when the Permittee becomes aware of the circumstances. Refer to Permit Special Condition S6. E. on page 27 for additional requirements.

**MAIL THIS FORM TO:**

Department of Ecology  
Southwest Regional Office  
Water Quality Program  
P.O. Box 47775  
Olympia, WA 98504



WAG-50-1359

# 2010 SAND AND GRAVEL GENERAL PERMIT DISCHARGE MONITORING REPORT Form 1A

Stormwater to Ground Water – NAICS 212311 (Dimension Stone), 212321 (Construction Sand and Gravel), 212322 (Industrial Sand)

NAME/ FACILITY: J L Storedahl & Sons - Daybreak Pit  
27140 NE 61st Avenue, Battle Ground Clark County

DISCHARGE MONITORING POINT: GW1

MONITORING PERIOD: FROM: 7/1/2013 TO: 9/30/2013

Daily monitoring for visible oil sheen is required at all discharge points or representative locations where water collects prior to discharge each day that runoff occurs.

## DAILY MONITORING WHEN RUNOFF OCCURS

|                                                                              |                                                                        |                                                                                                                                                                                                                                                                                  |         |        |                                  |
|------------------------------------------------------------------------------|------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|--------|----------------------------------|
| Visible Oil Sheen Detected?                                                  | <input type="checkbox"/> Yes                                           | 1. If Yes, identify all date(s) detected: _____<br>2. If Yes, identify the probable cause of the oil sheen and the actions taken to prevent further contamination in the inspection report. Failure to describe control of sheen in the inspection report is a permit violation. |         |        |                                  |
|                                                                              | <input checked="" type="checkbox"/> No                                 |                                                                                                                                                                                                                                                                                  |         |        |                                  |
| LIMITS                                                                       | Parameter                                                              | Minimum                                                                                                                                                                                                                                                                          | Maximum | Units  | # Samples                        |
|                                                                              | Oil Sheen                                                              | No discharge of sheen to ground water or surface water                                                                                                                                                                                                                           |         | Yes/No | Observe daily when runoff occurs |
| Oil Sheen or Petroleum Products Discharged to Ground Water or Surface Water? | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No | If Yes, date(s) discharged _____                                                                                                                                                                                                                                                 |         |        |                                  |

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 33 USC § 1319. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$10,000.00 AND OR MAXIMUM IMPRISONMENT OF BETWEEN SIX MONTHS AND FIVE YEARS.)

BRIAN K. SANDERS  
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER (TYPED OR PRINTED)

2013/10/14  
DATE: YEAR MO DAY

Brian K. Sanders ENVIRON COORD  
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

360-636-2420  
TELEPHONE NUMBER

**Reporting Permit Violations** - When the Permittee cannot comply with the permit limits, due to any cause, the Permittee shall: 1. Immediately take action to stop, contain, and clean up the unauthorized discharges or otherwise stop the violation, correct the problem and, if applicable, repeat the sampling and analysis of any violation; 2. The Permittee is required to notify the Ecology Regional Sand and Gravel Permit Manager orally within 24 hours of when the Permittee becomes aware of the circumstances. Refer to Permit Special Condition S6.E. on page 27 for additional requirements.

**MAIL THIS FORM TO:**

Department of Ecology  
Southwest Regional Office  
Water Quality Program  
P.O. Box 47775  
Olympia, WA 98512

WAG-50-1359

# 2010 SAND AND GRAVEL GENERAL PERMIT DISCHARGE MONITORING REPORT Form 1A

Stormwater to Ground Water – NAICS 212311 (Dimension Stone), 212321 (Construction Sand and Gravel), 212322 (Industrial Sand)

NAME/ FACILITY: J L Storedahl & Sons - Daybreak Pit  
27140 NE 61st Avenue, Battle Ground Clark County

DISCHARGE MONITORING POINT: GW2

MONITORING PERIOD: FROM: 7 / 1 / 2013 TO: 9 / 30 / 2013

Daily monitoring for visible oil sheen is required at all discharge points or representative locations where water collects prior to discharge each day that runoff occurs.

## DAILY MONITORING WHEN RUNOFF OCCURS

|                                                                              |                                                                        |                                                                                                                                                                                                                                                                                  |         |        |                                  |
|------------------------------------------------------------------------------|------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|--------|----------------------------------|
| Visible Oil Sheen Detected?                                                  | <input type="checkbox"/> Yes                                           | 1. If Yes, identify all date(s) detected: _____<br>2. If Yes, identify the probable cause of the oil sheen and the actions taken to prevent further contamination in the inspection report. Failure to describe control of sheen in the inspection report is a permit violation. |         |        |                                  |
|                                                                              | <input checked="" type="checkbox"/> No                                 |                                                                                                                                                                                                                                                                                  |         |        |                                  |
| LIMITS                                                                       | Parameter                                                              | Minimum                                                                                                                                                                                                                                                                          | Maximum | Units  | # Samples                        |
|                                                                              | Oil Sheen                                                              | No discharge of sheen to ground water or surface water                                                                                                                                                                                                                           |         | Yes/No | Observe daily when runoff occurs |
| Oil Sheen or Petroleum Products Discharged to Ground Water or Surface Water? | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No | If Yes, date(s) discharged _____                                                                                                                                                                                                                                                 |         |        |                                  |

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 33 USC § 1319. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$10,000.00 AND OR MAXIMUM IMPRISONMENT OF BETWEEN SIX MONTHS AND FIVE YEARS.)

BRIAN K. SANDERS

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER (TYPED OR PRINTED)

2013/10/14  
DATE: YEAR MO DAY

Brian K. Sanders ENVIRON. COORD.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

360-636-2420  
TELEPHONE NUMBER

**Reporting Permit Violations** - When the Permittee cannot comply with the permit limits, due to any cause, the Permittee shall: 1. Immediately take action to stop, contain, and clean up the unauthorized discharges or otherwise stop the violation, correct the problem and, if applicable, repeat the sampling and analysis of any violation; 2. The Permittee is required to notify the Ecology Regional Sand and Gravel Permit Manager orally within 24 hours of when the Permittee becomes aware of the circumstances. Refer to Permit Special Condition S6.E. on page 27 for additional requirements.

**MAIL THIS FORM TO:**

Department of Ecology  
Southwest Regional Office  
Water Quality Program  
P.O. Box 47775  
Olympia, WA 98512

WAG-50-1359

# 2010 SAND AND GRAVEL GENERAL PERMIT DISCHARGE MONITORING REPORT Form 1A

Stormwater to Ground Water – NAICS 212311 (Dimension Stone), 212321 (Construction Sand and Gravel), 212322 (Industrial Sand)

NAME/ FACILITY: J L Storedahl & Sons - Daybreak Pit  
27140 NE 61st Avenue, Battle Ground Clark County

DISCHARGE MONITORING POINT: GW3

MONITORING PERIOD: FROM: 7/1/2013 TO: 9/30/2013

*Daily monitoring for visible oil sheen is required at all discharge points or representative locations where water collects prior to discharge each day that runoff occurs.*

## DAILY MONITORING WHEN RUNOFF OCCURS

|                                                                              |                                                                        |                                                                                                                                                                                                                                                                                  |         |        |                                  |
|------------------------------------------------------------------------------|------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|--------|----------------------------------|
| Visible Oil Sheen Detected?                                                  | <input type="checkbox"/> Yes                                           | 1. If Yes, identify all date(s) detected: _____<br>2. If Yes, identify the probable cause of the oil sheen and the actions taken to prevent further contamination in the inspection report. Failure to describe control of sheen in the inspection report is a permit violation. |         |        |                                  |
|                                                                              | <input checked="" type="checkbox"/> No                                 |                                                                                                                                                                                                                                                                                  |         |        |                                  |
| LIMITS                                                                       | Parameter                                                              | Minimum                                                                                                                                                                                                                                                                          | Maximum | Units  | # Samples                        |
|                                                                              | Oil Sheen                                                              | No discharge of sheen to ground water or surface water                                                                                                                                                                                                                           |         | Yes/No | Observe daily when runoff occurs |
| Oil Sheen or Petroleum Products Discharged to Ground Water or Surface Water? | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No | If Yes, date(s) discharged _____                                                                                                                                                                                                                                                 |         |        |                                  |

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 33 USC § 1319. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$10,000.00 AND OR MAXIMUM IMPRISONMENT OF BETWEEN SIX MONTHS AND FIVE YEARS.)

Brian K. Sanders

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER (TYPED OR PRINTED)

2013/10/14

DATE: YEAR MO DAY

Brian K. Sanders ENVIRON COORD

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

360-636-2420

TELEPHONE NUMBER

**Reporting Permit Violations** - When the Permittee cannot comply with the permit limits, due to any cause, the Permittee shall: 1. Immediately take action to stop, contain, and clean up the unauthorized discharges or otherwise stop the violation, correct the problem and, if applicable, repeat the sampling and analysis of any violation; 2. The Permittee is required to notify the Ecology Regional Sand and Gravel Permit Manager orally within 24 hours of when the Permittee becomes aware of the circumstances. Refer to Permit Special Condition S6.E. on page 27 for additional requirements.

**MAIL THIS FORM TO:**

Department of Ecology  
Southwest Regional Office  
Water Quality Program  
P.O. Box 47775  
Olympia, WA 98512



WAG-50-1359

# 2010 SAND AND GRAVEL GENERAL PERMIT DISCHARGE MONITORING REPORT Form 1A

Stormwater to Ground Water – NAICS 212311 (Dimension Stone), 212321 (Construction Sand and Gravel), 212322 (Industrial Sand)

NAME/ FACILITY: J L Storedahl & Sons - Daybreak Pit  
27140 NE 61st Avenue, Battle Ground Clark County

DISCHARGE MONITORING POINT: GW5

MONITORING PERIOD: FROM: 7 / 1 / 2013 TO: 9 / 30 / 2013

*Daily monitoring for visible oil sheen is required at all discharge points or representative locations where water collects prior to discharge each day that runoff occurs.*

## DAILY MONITORING WHEN RUNOFF OCCURS

|                                                                              |                                                                        |                                                                                                                                                                                                                                                                                  |         |        |                                  |
|------------------------------------------------------------------------------|------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|--------|----------------------------------|
| Visible Oil Sheen Detected?                                                  | <input type="checkbox"/> Yes                                           | 1. If Yes, identify all date(s) detected: _____<br>2. If Yes, identify the probable cause of the oil sheen and the actions taken to prevent further contamination in the inspection report. Failure to describe control of sheen in the inspection report is a permit violation. |         |        |                                  |
|                                                                              | <input checked="" type="checkbox"/> No                                 |                                                                                                                                                                                                                                                                                  |         |        |                                  |
| LIMITS                                                                       | Parameter                                                              | Minimum                                                                                                                                                                                                                                                                          | Maximum | Units  | # Samples                        |
|                                                                              | Oil Sheen                                                              | No discharge of sheen to ground water or surface water                                                                                                                                                                                                                           |         | Yes/No | Observe daily when runoff occurs |
| Oil Sheen or Petroleum Products Discharged to Ground Water or Surface Water? | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No | If Yes, date(s) discharged _____                                                                                                                                                                                                                                                 |         |        |                                  |

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT, SEE 18 USC § 1001 AND 33 USC § 1319. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$10,000.00 AND OR MAXIMUM IMPRISONMENT OF BETWEEN SIX MONTHS AND FIVE YEARS.)

BRIAN K. SANDERS  
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER (TYPED OR PRINTED)

2013/10/14  
DATE: YEAR MO DAY

Brian K. Sanders ENVIRON. COORD.  
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

360-636-2420  
TELEPHONE NUMBER

**Reporting Permit Violations** - When the Permittee cannot comply with the permit limits, due to any cause, the Permittee shall: 1. Immediately take action to stop, contain, and clean up the unauthorized discharges or otherwise stop the violation, correct the problem and, if applicable, repeat the sampling and analysis of any violation; 2. The Permittee is required to notify the Ecology Regional Sand and Gravel Permit Manager orally within 24 hours of when the Permittee becomes aware of the circumstances. Refer to Permit Special Condition S6.E. on page 27 for additional requirements.

**MAIL THIS FORM TO:**

Department of Ecology  
Southwest Regional Office  
Water Quality Program  
P.O. Box 47775  
Olympia, WA 98512

ALS Group USA, Corp.  
dba ALS Environmental

Analytical Report

Client: JL Storedahl & Sons, Incorporated  
Project: J.L. Storedahl & Sons Inc.  
Sample Matrix: Water  
Analysis Method: SM 2540 D

Service Request: K1310159  
Date Collected: 09/24/13  
Date Received: 09/25/13

Units: mg/L  
Basis: NA

Solids, Total Suspended (TSS)

| Sample Name  | Lab Code     | Result | MRL | Dil. | Date Analyzed  | Q |
|--------------|--------------|--------|-----|------|----------------|---|
| Daybreak SWA | K1310159-001 | ND U   | 5.0 | 1    | 09/30/13 17:10 |   |
| Method Blank | K1310159-MB1 | ND U   | 5.0 | 1    | 09/30/13 17:10 |   |
| Method Blank | K1310159-MB2 | ND U   | 5.0 | 1    | 09/30/13 17:10 |   |

Jerry L. Storedahl, Owner



Office: (360) 636-2420  
FAX: (360) 577-3906

2233 Talley Way • Kelso, Washington 98626

ROCK PRODUCTS, GRADING & EXCAVATING

January 8, 2014

Department of Ecology  
Water Quality Permit Coordinator  
P.O. Box 47600  
Olympia, WA 98504-7600

Dear Sirs,

Please find with this cover letter, Discharge Monitoring Reports (DMR's) from J.L. Storedahl and Sons, Inc. for the fourth quarter of 2013.

They include:

WAG-50-1359

Daybreak Pit

Thank you for your time. If you have any questions or concerns please feel free to contact me at my office at (360)636-2420 or on my cell at (360)957-3555.

Sincerely,

A handwritten signature in cursive script that reads 'Brian K. Sanders'.

Brian K. Sanders  
Environmental Coordinator

WAG-50-1359

## SAND AND GRAVEL GENERAL PERMIT

DISCHARGE MONITORING REPORT **Form 3B**

Stormwater to Surface Water – NAICS Code 212311 (Dimension Stone Mining & Quarrying),  
212321 (Construction Sand & Gravel Mining), 212322 (Industrial Sand Mining)

NAME/ FACILITY: J L Storedahl & Sons - Daybreak Pit  
27140 NE 61<sup>st</sup> Avenue, Battle Ground Clark County

DISCHARGE MONITORING POINT: SWA

MONITORING PERIOD: FROM: 10 / 1 / 2013 TO: 12 / 31 / 2013

(Instructions and Signature Block on Reverse Side)

|                                                                              |                                                                                          |                                                                                                                                                                                                                                                                                  |
|------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| QUARTERLY MONITORING                                                         | <input type="checkbox"/> There was NO discharge at any time during the quarter <b>OR</b> |                                                                                                                                                                                                                                                                                  |
|                                                                              | SAMPLE DATE (MM/DD/YYYY)                                                                 | Nitrate +Nitrite (mg/L as N)                                                                                                                                                                                                                                                     |
|                                                                              |                                                                                          | <u>N/A</u>                                                                                                                                                                                                                                                                       |
|                                                                              |                                                                                          | QUARTERLY AVERAGE =                                                                                                                                                                                                                                                              |
| MONTHLY MONITORING                                                           | <input type="checkbox"/> There was NO discharge at any time during the month <b>OR</b>   |                                                                                                                                                                                                                                                                                  |
| <u>OCTOBER</u><br>MONTH                                                      | SAMPLE DATE (MM/DD/YYYY)                                                                 | TURBIDITY (NTUs)                                                                                                                                                                                                                                                                 |
|                                                                              | <u>10/10/2013</u>                                                                        | <u>4.8</u>                                                                                                                                                                                                                                                                       |
|                                                                              | <u>10/28/2013</u>                                                                        | <u>5.2</u>                                                                                                                                                                                                                                                                       |
|                                                                              | SUMMARY AVERAGE = <u>5.0</u>                                                             | <input type="checkbox"/> Check if only ONE discharge during the month                                                                                                                                                                                                            |
| <u>NOVEMBER</u><br>MONTH                                                     | <input type="checkbox"/> There was NO discharge at any time during the month <b>OR</b>   |                                                                                                                                                                                                                                                                                  |
|                                                                              | <u>11/6/2013</u>                                                                         | <u>4.1</u>                                                                                                                                                                                                                                                                       |
|                                                                              | <u>11/20/2013</u>                                                                        | <u>3.6</u>                                                                                                                                                                                                                                                                       |
|                                                                              | SUMMARY AVERAGE = <u>3.9</u>                                                             | <input type="checkbox"/> Check if only ONE discharge during the month                                                                                                                                                                                                            |
| <u>DECEMBER</u><br>MONTH                                                     | <input type="checkbox"/> There was NO discharge at any time during the month <b>OR</b>   |                                                                                                                                                                                                                                                                                  |
|                                                                              | <u>12/3/2013</u>                                                                         | <u>3.8</u>                                                                                                                                                                                                                                                                       |
|                                                                              | <u>12/20/2013</u>                                                                        | <u>3.1</u>                                                                                                                                                                                                                                                                       |
|                                                                              | SUMMARY AVERAGE = <u>3.5</u>                                                             | <input type="checkbox"/> Check if only ONE discharge during the month                                                                                                                                                                                                            |
| Visible Oil Sheen Detected?                                                  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No                   | 1. If Yes, identify all date(s) detected: _____<br>2. If Yes, identify the probable cause of the oil sheen and the actions taken to prevent further contamination in the inspection report. Failure to describe control of sheen in the inspection report is a permit violation. |
| Oil Sheen or Petroleum Products Discharged to Ground Water or Surface Water? | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No                   | If Yes, date(s) discharged _____                                                                                                                                                                                                                                                 |

|        |                    |                                                        |                  |        |           |
|--------|--------------------|--------------------------------------------------------|------------------|--------|-----------|
| LIMITS | Nitrate + Nitrite* | 0.68 mg/L average                                      |                  | mg/L   | Quarterly |
|        | Turbidity          | 50 Average Monthly                                     | 50 Maximum Daily | NTU    | 2x month  |
|        | Oil Sheen**        | No discharge of sheen to ground water or surface water |                  | Yes/No | Daily     |

\* *Quarterly nitrate/nitrite monitoring and limit applicable only when blasting is used at the facility (within 2 years prior to sample date). If monitoring is not applicable place NA for average.*

\*\* *Daily monitoring for visible oil sheen is required at all discharge points (or representative locations where water collects prior to discharge) each day that runoff occurs.*

For NAICS Codes 212311, 212321, 212322: Twice-monthly monitoring for turbidity is required if the discharge is to surface water and includes only stormwater. Unless there was no discharge during a month, there must be at least one sample and analysis for turbidity. Report the average of the turbidity samples as "Monthly Average".

Be sure to include the name of the discharge point at the top of the form.

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 33 USC § 1319. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$10,000.00 AND OR MAXIMUM IMPRISONMENT OF BETWEEN SIX MONTHS AND FIVE YEARS.)

BRIAN K. SANDER/ ENVIRN. COORD

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER (TYPED OR PRINTED)

1/7/2014  
DATE: MO DAY YEAR

Brian K. Sander

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

360-636-2420  
TELEPHONE NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

**Reporting Permit Violations** - When the Permittee cannot comply with the permit limits, due to any cause, the Permittee shall: 1. Immediately take action to stop, contain, and clean up the unauthorized discharges or otherwise stop the violation, correct the problem and, if applicable, repeat the sampling and analysis of any violation; 2. The Permittee is required to notify the Ecology Regional Sand and Gravel Permit Manager orally within 24 hours of when the Permittee becomes aware of the circumstances. Refer to Permit Special Condition S6. E. on page 27 for additional requirements.

MAIL THIS FORM TO:

Department of Ecology  
Southwest Regional Office  
Water Quality Program  
P.O. Box 47775  
Olympia, WA 98504

WAG-50-1359

# 2010 SAND AND GRAVEL GENERAL PERMIT DISCHARGE MONITORING REPORT Form 1A

Stormwater to Ground Water – NAICS 212311 (Dimension Stone), 212321 (Construction Sand and Gravel), 212322 (Industrial Sand)

NAME/ FACILITY: J L Storedahl & Sons - Daybreak Pit  
27140 NE 61st Avenue, Battle Ground Clark County

DISCHARGE MONITORING POINT: GW1

MONITORING PERIOD: FROM: 10 / 1 / 2013 TO: 12 / 31 / 2013

Daily monitoring for visible oil sheen is required at all discharge points or representative locations where water collects prior to discharge each day that runoff occurs.

## DAILY MONITORING WHEN RUNOFF OCCURS

|                                                                              |                                                                        |                                                                                                                                                                                                                                                                                  |         |        |                                  |
|------------------------------------------------------------------------------|------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|--------|----------------------------------|
| Visible Oil Sheen Detected?                                                  | <input type="checkbox"/> Yes                                           | 1. If Yes, identify all date(s) detected: _____<br>2. If Yes, identify the probable cause of the oil sheen and the actions taken to prevent further contamination in the inspection report. Failure to describe control of sheen in the inspection report is a permit violation. |         |        |                                  |
|                                                                              | <input checked="" type="checkbox"/> No                                 |                                                                                                                                                                                                                                                                                  |         |        |                                  |
| LIMITS                                                                       | Parameter                                                              | Minimum                                                                                                                                                                                                                                                                          | Maximum | Units  | # Samples                        |
|                                                                              | Oil Sheen                                                              | No discharge of sheen to ground water or surface water                                                                                                                                                                                                                           |         | Yes/No | Observe daily when runoff occurs |
| Oil Sheen or Petroleum Products Discharged to Ground Water or Surface Water? | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No | If Yes, date(s) discharged _____                                                                                                                                                                                                                                                 |         |        |                                  |

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 33 USC § 1319. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$10,000.00 AND OR MAXIMUM IMPRISONMENT OF BETWEEN SIX MONTHS AND FIVE YEARS.)

BRIAN H. SANDERS / ENVIRON. COORD

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER (TYPED OR PRINTED)

2014 / 1 / 7

DATE: YEAR MO DAY

Brian H. Sanders

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

360-636-2420

TELEPHONE NUMBER



**Reporting Permit Violations** - When the Permittee cannot comply with the permit limits, due to any cause, the Permittee shall: 1. Immediately take action to stop, contain, and clean up the unauthorized discharges or otherwise stop the violation, correct the problem and, if applicable, repeat the sampling and analysis of any violation; 2. The Permittee is required to notify the Ecology Regional Sand and Gravel Permit Manager orally within 24 hours of when the Permittee becomes aware of the circumstances. Refer to Permit Special Condition S6.E. on page 27 for additional requirements.

**MAIL THIS FORM TO:**

Department of Ecology  
Southwest Regional Office  
Water Quality Program  
P.O. Box 47775  
Olympia, WA 98512

WAG-50-1359

# 2010 SAND AND GRAVEL GENERAL PERMIT DISCHARGE MONITORING REPORT Form 1A

Stormwater to Ground Water – NAICS 212311 (Dimension Stone), 212321 (Construction Sand and Gravel), 212322 (Industrial Sand)

NAME/ FACILITY: J L Storedahl & Sons - Daybreak Pit  
27140 NE 61st Avenue, Battle Ground Clark County

DISCHARGE MONITORING POINT: GW2

MONITORING PERIOD: FROM: 10 / 1 / 2013 TO: 12 / 31 / 2013

Daily monitoring for visible oil sheen is required at all discharge points or representative locations where water collects prior to discharge each day that runoff occurs.

## DAILY MONITORING WHEN RUNOFF OCCURS

|                                                                              |                                                                        |                                                                                                                                                                                                                                                                                  |         |        |                                  |
|------------------------------------------------------------------------------|------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|--------|----------------------------------|
| Visible Oil Sheen Detected?                                                  | <input type="checkbox"/> Yes                                           | 1. If Yes, identify all date(s) detected: _____<br>2. If Yes, identify the probable cause of the oil sheen and the actions taken to prevent further contamination in the inspection report. Failure to describe control of sheen in the inspection report is a permit violation. |         |        |                                  |
|                                                                              | <input checked="" type="checkbox"/> No                                 |                                                                                                                                                                                                                                                                                  |         |        |                                  |
| LIMITS                                                                       | Parameter                                                              | Minimum                                                                                                                                                                                                                                                                          | Maximum | Units  | # Samples                        |
|                                                                              | Oil Sheen                                                              | No discharge of sheen to ground water or surface water                                                                                                                                                                                                                           |         | Yes/No | Observe daily when runoff occurs |
| Oil Sheen or Petroleum Products Discharged to Ground Water or Surface Water? | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No | If Yes, date(s) discharged _____                                                                                                                                                                                                                                                 |         |        |                                  |

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 33 USC § 1319. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$10,000.00 AND OR MAXIMUM IMPRISONMENT OF BETWEEN SIX MONTHS AND FIVE YEARS.)

BRIAN K. SANDERS / ENVIRON. COORD  
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER (TYPED OR PRINTED)

2014 / 1 / 7  
DATE: YEAR MO DAY

Brian K. Sanders  
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

360-636-2420  
TELEPHONE NUMBER

**Reporting Permit Violations** - When the Permittee cannot comply with the permit limits, due to any cause, the Permittee shall: 1. Immediately take action to stop, contain, and clean up the unauthorized discharges or otherwise stop the violation, correct the problem and, if applicable, repeat the sampling and analysis of any violation; 2. The Permittee is required to notify the Ecology Regional Sand and Gravel Permit Manager orally within 24 hours of when the Permittee becomes aware of the circumstances. Refer to Permit Special Condition S6.E. on page 27 for additional requirements.

**MAIL THIS FORM TO:**

Department of Ecology  
Southwest Regional Office  
Water Quality Program  
P.O. Box 47775  
Olympia, WA 98512

WAG-50-1359

# 2010 SAND AND GRAVEL GENERAL PERMIT DISCHARGE MONITORING REPORT Form 1A

Stormwater to Ground Water – NAICS 212311 (Dimension Stone), 212321 (Construction Sand and Gravel), 212322 (Industrial Sand)

NAME/ FACILITY: J L Storedahl & Sons - Daybreak Pit  
27140 NE 61st Avenue, Battle Ground Clark County

DISCHARGE MONITORING POINT: GW3

MONITORING PERIOD: FROM: 10 / 1 / 2013 TO: 12 / 31 / 2013

*Daily monitoring for visible oil sheen is required at all discharge points or representative locations where water collects prior to discharge each day that runoff occurs.*

## DAILY MONITORING WHEN RUNOFF OCCURS

|                                                                              |                                                                        |                                                                                                                                                                                                                                                                                  |         |        |                                  |
|------------------------------------------------------------------------------|------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|--------|----------------------------------|
| Visible Oil Sheen Detected?                                                  | <input type="checkbox"/> Yes                                           | 1. If Yes, identify all date(s) detected: _____<br>2. If Yes, identify the probable cause of the oil sheen and the actions taken to prevent further contamination in the inspection report. Failure to describe control of sheen in the inspection report is a permit violation. |         |        |                                  |
|                                                                              | <input checked="" type="checkbox"/> No                                 |                                                                                                                                                                                                                                                                                  |         |        |                                  |
| LIMITS                                                                       | Parameter                                                              | Minimum                                                                                                                                                                                                                                                                          | Maximum | Units  | # Samples                        |
|                                                                              | Oil Sheen                                                              | No discharge of sheen to ground water or surface water                                                                                                                                                                                                                           |         | Yes/No | Observe daily when runoff occurs |
| Oil Sheen or Petroleum Products Discharged to Ground Water or Surface Water? | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No | If Yes, date(s) discharged _____                                                                                                                                                                                                                                                 |         |        |                                  |

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 33 USC § 1319. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$10,000.00 AND OR MAXIMUM IMPRISONMENT OF BETWEEN SIX MONTHS AND FIVE YEARS.)

Brian K. Sanders / ENVIEN. Coord.  
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER (TYPED OR PRINTED)

2014 / 1 / 7  
DATE: YEAR MO DAY

Brian K. Sanders  
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

360-636-2420  
TELEPHONE NUMBER

**Reporting Permit Violations** - When the Permittee cannot comply with the permit limits, due to any cause, the Permittee shall: 1. Immediately take action to stop, contain, and clean up the unauthorized discharges or otherwise stop the violation, correct the problem and, if applicable, repeat the sampling and analysis of any violation; 2. The Permittee is required to notify the Ecology Regional Sand and Gravel Permit Manager orally within 24 hours of when the Permittee becomes aware of the circumstances. Refer to Permit Special Condition S6.E. on page 27 for additional requirements.

MAIL THIS FORM TO:

Department of Ecology  
Southwest Regional Office  
Water Quality Program  
P.O. Box 47775  
Olympia, WA 98512

WAG-50-1359

# 2010 SAND AND GRAVEL GENERAL PERMIT DISCHARGE MONITORING REPORT Form 1A

Stormwater to Ground Water – NAICS 212311 (Dimension Stone), 212321 (Construction Sand and Gravel), 212322 (Industrial Sand)

NAME/ FACILITY: J L Storedahl & Sons - Daybreak Pit  
27140 NE 61st Avenue, Battle Ground Clark County

DISCHARGE MONITORING POINT: GW5

MONITORING PERIOD: FROM: 10 / 1 / 2013 TO: 12 / 31 / 2013

*Daily monitoring for visible oil sheen is required at all discharge points or representative locations where water collects prior to discharge each day that runoff occurs.*

## DAILY MONITORING WHEN RUNOFF OCCURS

| Visible Oil Sheen Detected?                                                  | <input type="checkbox"/> Yes                                           | 1. If Yes, identify all date(s) detected: _____<br>2. If Yes, identify the probable cause of the oil sheen and the actions taken to prevent further contamination in the inspection report. Failure to describe control of sheen in the inspection report is a permit violation. |         |        |                                  |
|------------------------------------------------------------------------------|------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|--------|----------------------------------|
|                                                                              | <input checked="" type="checkbox"/> No                                 |                                                                                                                                                                                                                                                                                  |         |        |                                  |
| LIMITS                                                                       | Parameter                                                              | Minimum                                                                                                                                                                                                                                                                          | Maximum | Units  | # Samples                        |
|                                                                              | Oil Sheen                                                              | No discharge of sheen to ground water or surface water                                                                                                                                                                                                                           |         | Yes/No | Observe daily when runoff occurs |
| Oil Sheen or Petroleum Products Discharged to Ground Water or Surface Water? | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No | If Yes, date(s) discharged _____                                                                                                                                                                                                                                                 |         |        |                                  |

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 33 USC § 1319. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$10,000.00 AND OR MAXIMUM IMPRISONMENT OF BETWEEN SIX MONTHS AND FIVE YEARS.)

Brian K. Sanders / ENVIRON. COORD.  
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER (TYPED OR PRINTED)

2014/1/7  
DATE: YEAR / MO / DAY

Brian K. Sanders  
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

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Department of Ecology  
Southwest Regional Office  
Water Quality Program  
P.O. Box 47775  
Olympia, WA 98512



ALS Group USA, Corp.  
dba ALS Environmental

Analytical Report

**Client:** JL Storedahl & Sons, Incorporated  
**Project:** J.L. Storedahl & Sons  
**Sample Matrix:** Water  
**Analysis Method:** SM 2540 D  
**Prep Method:** None

**Service Request:** K1313748  
**Date Collected:** 12/19/13  
**Date Received:** 12/19/13

**Units:** mg/L  
**Basis:** NA

**Solids, Total Suspended (TSS)**

| Sample Name  | Lab Code     | Result | MRL | Dil. | Date Analyzed  | Q |
|--------------|--------------|--------|-----|------|----------------|---|
| Daybreak SWA | K1313748-001 | 11.5   | 5.0 | 1    | 12/26/13 19:30 |   |
| Method Blank | K1313748-MB1 | ND U   | 5.0 | 1    | 12/26/13 19:30 |   |
| Method Blank | K1313748-MB2 | ND U   | 5.0 | 1    | 12/26/13 19:30 |   |