

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

PERMITTEE NAME: The Chemours Company FC LLC	PERMIT NUMBER: FL0000051
ADDRESS: PO Box 753 Starke, FL 32091	LIMIT: FINAL REPORT: Monthly
FACILITY: Florida Mine - Trail Ridge	FACILITY TYPE: IW GROUP: Industrial
LOCATION: 4641 State Road 230 Starke, FL 32091	MONITORING GROUP: D-001
COUNTY: BRADFORD	DESCRIPTION: Outfall D0-01 to Alligator Creek
	MONITORING PERIOD: From: 08/01/2024 To: 08/31/2024

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
IC25 Statre 7day Chr Ceriodaphnia	Sample Measurement				MNR				0	1 Semi-Annually; twice per year	Grab
PARM Code TRP3B P Mon. Site: EFF-1	Permit Requirement				100.0 (Minimum)			percent		(1 Semi-Annually; twice per year)	(Grab)
IC25 Statre 7day Chr Ceriodaphnia	Sample Measurement				MNR				0	1 See permit	Documents
PARM Code TRP3B Q Mon. Site: EFF-1	Permit Requirement				100.0 (Minimum)			percent		(1 See permit)	(Documents)
IC25 Statre 7day Chr Ceriodaphnia	Sample Measurement				MNR				0	1 See permit	Documents
PARM Code TRP3B R Mon. Site: EFF-1	Permit Requirement				100.0 (Minimum)			percent		(1 See permit)	(Documents)
IC25 Statre 7Day Chr Pimephales	Sample Measurement				MNR				0	1 Semi-Annually; twice per year	Grab
PARM Code TRP6C P Mon. Site: EFF-1	Permit Requirement				100.0 (Minimum)			percent		(1 Semi-Annually; twice per year)	(Grab)

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
IC25 Statre 7Day Chr Pimephales PARM Code TRP6C Q Mon. Site: EFF-1	Sample Measurement				MNR				0	1 See permit	Documents
	Permit Requirement				100.0 (Minimum)			percent		(1 See permit)	(Documents)
IC25 Statre 7Day Chr Pimephales PARM Code TRP6C R Mon. Site: EFF-1	Sample Measurement				MNR				0	1 See permit	Documents
	Permit Requirement				100.0 (Minimum)			percent		(1 See permit)	(Documents)
Flow PARM Code 50050 Y Mon. Site: EFF-1	Sample Measurement		4.2						0	1 Continuous	Recording Flow Meter with Totalizer
	Permit Requirement		Report (Annl Avg)	MGD						(1 Continuous)	(Recording Flow Meter with Totalizer)
Flow PARM Code 50050 1 Mon. Site: EFF-1	Sample Measurement	34.4	12.4						0	1 Continuous	Recording Flow Meter with Totalizer
	Permit Requirement	40.0 (Daily Mx)	Report (Mo Avg)	MGD						(1 Continuous)	(Recording Flow Meter with Totalizer)
Solids, Total Suspended PARM Code 00530 1 Mon. Site: EFF-1	Sample Measurement				4.5	6.4			0	1 Weekly	24-hr Flow Proportioned Composite
	Permit Requirement				20.0 (Mo Avg)	30.0 (Daily Mx)	mg/L			(1 Weekly)	(24-hr Flow Proportioned Composite)

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Iron, Total Recoverable	Sample Measurement						1.2		0	1 Weekly	24-hr Flow Proportioned Composite
PARM Code 00980 1 Mon. Site: EFF-1	Permit Requirement						1.0 (Daily Mx)	mg/L		(1 Weekly)	(24-hr Flow Proportioned Composite)
pH	Sample Measurement				6.8		7.7		0	1 Continuous	Meter
PARM Code 00400 1 Mon. Site: EFF-1	Permit Requirement				6.0 (Daily Mn)		8.5 (Daily Mx)	s.u.		(1 Continuous)	(Meter)
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT Connie Henderson	I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHERED AND EVALUATED THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS.						SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT Electronically Signed			TELEPHONE (904) 964-1327	SUBMITTED ON 09/26/2024

Parameter	Monitoring Site	Comments for Monitoring Group - D-001
00980 1	EFF-1	Per CO 23-1066 Iron limit is 2mg/l

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PERMITTEE NAME: The Chemours Company FC LLC	PERMIT NUMBER: FL0000051
ADDRESS: PO Box 753 Starke, FL 32091	LIMIT: FINAL REPORT: Monthly
FACILITY: Florida Mine - Trail Ridge	FACILITY TYPE: IW GROUP: Industrial
LOCATION: 4641 State Road 230 Starke, FL 32091	MONITORING GROUP: D-002
COUNTY: BRADFORD	DESCRIPTION: Discharge to Blue Pond
	MONITORING PERIOD: From: 08/01/2024 To: 08/31/2024

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	42				0	1 Continuous	Recording Flow Meter with Totalizer
PARM Code 50050 1 Mon. Site: EFF-2	Permit Requirement	Report (Mo Total)	MGD				(1 Continuous)	(Recording Flow Meter with Totalizer)
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT Connie Henderson	I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHERED AND EVALUATED THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS.				SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT Electronically Signed		TELEPHONE (904) 964-1327	SUBMITTED ON 09/26/2024