Form CCR 1	Illinois Environmental Protection Agency CCR Surface Impoundment Permit Application Form CCR 1 – General Provisions

Bureau of Water ID Number: **CCR Permit Number:** **Facility Name:**	For IEPA Use Only

SECTION 1: FACILITY, OPERATOR, AND OWNER INFORMATION (35 Ill. Adm. Code 845.210(b))

Facility, Operator, and Owner Information

1.1	Facility Name		
	Ameren Missouri - Venice Energy Center		
1.2	Illinois EPA CCR Permit Number (if applicable)		
	see Section 4.1		
1.3	Facility Contact Information		
	Name (first and last) Craig Giesmann	Title Sr Mgr Env Services	Phone Number 314-315-3035
	Email address cgiesmann@ameren.com		
1.4	Facility Mailing Address		
	Street or P.O. box 1901 Chouteau Ave		
	City or town St. Louis	State Mo	Zip Code 63103
1.5	Facility Location		
	Street, route number, or other specific identifier 701 N. Main St		
	County name St. Clair	County code (if known)	
	City or town Venice	State IL	Zip Code 62090
1.6	Name of Owner/Operator		
	Ameren Missouri		

Facility, Operator, and Owner Info

1.7 Owner/Operator Contact Information

Name (first and last)	Title	Phone Number
Craig Giesmann	Sr Mgr Env Services	314-315-3035

Email address: cgiesmann@ameren.com

1.8 Owner/Operator Mailing Address

Street or P.O. box: 1901 Chouteau Ave

City or town	State	Zip Code
St. Louis	MO	63103

SECTION 2: LEGAL DESCRIPTION (35 Ill. Adm. Code 845.210(c))

Legal Description

2.1 Legal Description of the facility boundary

St. Clair county, Township 2 North, Range West 10, Section 2

SECTION 3: PUBLICLY ACCESSIBLE INTERNET SITE REQUIREMENTS (35 Ill. Adm. Code 845.810)

Internet Site

3.1 Web Address(es) to publicly accessible internet site(s) (CCR website)

N/A

3.2 Is/are the website(s) titled "Illinois CCR Rule Compliance Data and Information"

☐ Yes ☐ No

SECTION 4: IMPOUNDMENT IDENTIFICATION

Impoundment Identification

4.1 List all the impoundment identification numbers for your facility and check the corresponding box to indicate that you have attached a written description for each impoundment.

W1191050002-01 North Pond	☐	Attached written description
W1191050002-02 South Pond	☐	Attached written description
	☐	Attached written description
	☐	Attached written description
	☐	Attached written description
	☐	Attached written description

			☐	Attached written description
			☐	Attached written description
			☐	Attached written description
			☐	Attached written description

SECTION 5: CHECKLIST AND CERTIFICATION STATEMENT

Checklist and Certification Statement

5.1 In Column 1 below, mark the sections of Form 1 that you have completed and are submitting with your application. For each section, specify in Column 2 any attachments that you are enclosing.

Column 1		Column 2	
Section 1: Facility, Operator, and Owner Information	☑	w/attachments	☐
Section 2: Legal Description	☑	w/attachments	☐
Section 3: Publicly Accessible Internet Site Requirement	☐	w/attachments	☐
Section 4: Impoundment Identification	☑	w/attachments	☐

5.2 **Certification Statement**

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 gather and evaluate 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.

Name (print or type first and last name) of Owner/Operator	Official Title
Tim Lafser	VP Power Ops
Signature: Timothy C Lafser	Date Signed: 10/28/2021