



November 12, 2025

Demtech, LLC
5733 Westwood Drive
Weldon Spring, MO 63304

Re: Blasting Activity Permit Addendum
Explosive Demolition of Homer City Power Generating Station
Permit No.: 32254104
Township: Center
County: Indiana

Ladies and Gentlemen:

I am enclosing the approved blasting activity permit for this project. A copy of the blasting activity permit must be with the blaster during loading and available for review. Please read and take note of the Inspector's Comments page for this permit.

Any person aggrieved by this action may appeal the action to the Environmental Hearing Board (Board), pursuant to Section 4 of the Environmental Hearing Board Act, 35 P.S. § 7514, and the Administrative Agency Law, 2 Pa.C.S. Chapter 5A. The Board's address is:

Environmental Hearing Board
Rachel Carson State Office Building, Second Floor
400 Market Street
P.O. Box 8457
Harrisburg, PA 17105-8457

TDD users may contact the Environmental Hearing Board through the Pennsylvania Relay Service, 800-654-5984.

Appeals must be filed with the Board within 30 days of receipt of notice of this action unless the appropriate statute provides a different time. This paragraph does not, in and of itself, create any right of appeal beyond that permitted by applicable statutes and decisional law.

A Notice of Appeal form and the Board's rules of practice and procedure may be obtained online at <https://ehb.pa.gov> or by contacting the Secretary to the Board at 717-787-3483. The Notice of Appeal form and the Board's rules are also available in braille and on audiotape from the Secretary to the Board.

IMPORTANT LEGAL RIGHTS ARE AT STAKE. YOU SHOULD SHOW THIS DOCUMENT TO A LAWYER AT ONCE. IF YOU CANNOT AFFORD A LAWYER, YOU MAY QUALIFY FOR FREE PRO BONO REPRESENTATION. CALL THE SECRETARY TO THE BOARD AT 717-787-3483 FOR MORE INFORMATION. YOU DO NOT NEED A LAWYER TO FILE A NOTICE OF APPEAL WITH THE BOARD.

IF YOU WANT TO CHALLENGE THIS ACTION, YOUR APPEAL MUST BE FILED WITH AND RECEIVED BY THE BOARD WITHIN 30 DAYS OF RECEIPT OF NOTICE OF THIS ACTION.

If you have any questions concerning this matter, please contact me at 814.472.1900.

Sincerely,



Matthew J. Riley
Mine Inspector Supervisor
Bureau of District Mining Operations

Enclosure

cc: Adam Snyder, Blasting and Explosives Inspector
File

Permit Number: 32254104
Municipality: <i>Center</i>
Issue Date: <i>11/21/20</i>
Auth I.D.: <i>1817832</i>

BLASTING ACTIVITY PERMIT

In accordance with the provisions of the Administrative Code of 1929 (Section 1917-A) and 25 PA Code Chapter 211.

1. Name and description of project Explosive Demolition of Homer City Power Generating Station

2. Applicant

Name: Demtech LLC
 Address: 5733 Westwood Dr
Weldon Spring, MO 63304
 E-mail mm@dem-tech.com
 Type of Business Explosive Demolition
 Telephone: 573-366-7553

2(a) Blasting Contractor Information

Blasting contractor Yes No

If yes,

Name: _____
 Address: _____
 Telephone: _____

Applicant Authorized Representative/Title Matthew G McEntire Lead Blaster

Applicant Authorized Representative (signature) Matthew G McEntire

2(b)

ATF Lic./Permit Name and Number. 5-MO-187-20-5E-01599

Emergency Contact

Name: Tom Griewe
 Title: Owner/President
 Phone: 314-568-2073

3. Duration and Times of Blasting Activity

Blasting activity end date 1-31-2026

Anticipated days of the week and times when blasting may occur

Days Monday thru Sunday Time Sunrise AM or PM thru Sunset AM or PM

4. Location of Blasting Activity

Municipality/Township Center County: Indiana
 Map (attachment) Lat.: 40°30'46.95"N Long.: -79°11'40.34"W

5. Proof of Insurance Certificate (attachment)

6. Dwellings, Structures and Utilities

Indicate distance and direction (in degrees) to the nearest building, neither owned nor leased by the permittee, from the area where blasting will occur 4493 feet/ 84 degrees. Indicate method that will be employed to satisfy the requirements of Chapter 211 Subchapter G (relating to monitoring requirements) Third Party Seismic Monitoring

Will blasting be conducted within 200' of an underground utility line (see § 211.182). Yes No

Will blasting be conducted within 800' of any public roads? Yes No

If yes, what precautions will be taken to protect the public?

7. Blast Loading Plan

	Hole DIA.	MAX # HOLES	MAX # ROWS	BURDEN		SPACING		HOLE DEPTH		STEMMING	
				MIN.	MAX.	MIN.	MAX.	MIN.	MAX.	MIN.	TYPE
A	3.5"	600	3	1.5'	2.5'	1.5'	2.5'	1'	44'	.5'	Drill Cuttings
B											
C											
D											
E											

Maximum explosives weight per delay (less than 8ms) 150 Minimum Scaled Distance 846

Specific Type(s) of Explosives Dynomax Pro, DynoSplit EX, Dyno Unimax, Dyno DigiShot

Method of blast initiation Electric Non-Electric Electronic Other

Explain Other: _____

Comments:

A	Sauls Seismic will be providing the seismic monitoring of 4 locations including: HCR Building, Water Tower, North Laydown Yard and Switch Yard.
B	Demtech will be requesting an alternative air blast level of 148db at the switchyard, north laydown yard, HCR building and water tower.
C	This serves as an addendum to BAP 32254104 to cover blasting of Unit 2 and 3 Turbine Pedestal.
D	Day of blast site security will be provided by the GC.
E	Turbine 2/3 blast will occur approximately 4:45pm 11/23/2025, after all other contractors on site have left for the day and before sunset.

8. Blast Loading Plan

	Hole DIA.	MAX # HOLES	MAX # ROWS	BURDEN		SPACING		HOLE DEPTH		STEMMING	
				MIN.	MAX.	MIN.	MAX.	MIN.	MAX.	MIN.	TYPE
A											
B											
C											
D											
E											

Maximum explosives weight per delay (less than 8ms) _____ Minimum Scaled Distance _____

Specific Type(s) of Explosives _____

Method of blast initiation Electric Non-Electric - Electronic Other

Explain Other: _____

Comments:

A	Turbine pedestal legs and beams will be dilled vertically from the operating floor and loaded similarly to a typical rock shot utilizing drill cuttings for stemming material. Drilling of the mid beams and wall of the structure will be horizontal holes stemmed with spray foam. The turbine building and siding will remain in place to contain displaced concrete from the blast.
B	
C	
D	
E	

9. Limits on Peak Particle Velocity and Airblast

Blasts shall be designed and conducted to achieve either a minimum scaled distance of 90 or meet the maximum allowable peak particle velocity indicated by Figure 1 of PA Code Chapter 211.151 (c) and not exceed the noise levels specified in Table 1 of PA Code Chapter 211.151 (d) at the closest building not owned or leased by the permittee or its customer.

The Department may establish an alternative peak particle velocity or airblast level if it determines that an alternative standard is appropriate. Request for the Department to establish an alternative peak particle velocity or airblast level must be submitted to the Department Blasting and Explosives Inspector in writing. (attachment)

NOTE: Additional review time will be necessary if the applicant requests that the Department establish an alternative peak particle or airblast limit.

DEPARTMENT USE ONLY
Alternative Maximum Allowable Peak Particle Velocity _____
Alternative Maximum Allowable Airblast _____

10. Permits to Store Explosives

Will explosives be stored within the proposed blasting activity area? Yes No

If "yes" provide current explosives storage security plan number _____

If no, explain the disposition of explosives materials used for this project

Explosives will be delivered on site and there will be 24/7 guard security until detonation time on the scheduled shot day.

11. Prepared by:

Name Matthew G McEntire Blaster's License BL# BL-10878

Signature: Matthew G McEntire

ALL BLASTING ACTIVITIES SHALL BE CONDUCTED IN ACCORDANCE WITH THE BLASTING ACTIVITY PERMIT EXCEPT AS MODIFIED BY ANY TERMS AND CONDITIONS ATTACHED HERETO. UPON RECEIPT OF THIS AUTHORIZATION BLASTING ACTIVITIES MAY COMMENCE. THIS AUTHORIZATION IS VALID FOR BLASTING ACTIVITIES CONDUCTED NECESSARY FOR THE COMPLETION OF THE PROJECT IDENTIFIED AND NAMED IN SECTION 1 OF THIS PERMIT.

DEPARTMENT USE ONLY	
Blasting and Explosives Inspector <u>Adam M. Snyder</u> ID # <u>700475</u>	
Signature 	
Based on the information provided by the applicant, the blasting activities proposed in this application can be conducted in accordance with Pa. Code Chapter 211.	
Recommended Approval Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date <u>11/12/25</u>	
For the Department: Name <u>Matthew J. Riley</u> Title <u>Surface Mine Conservation & Exp. Sup.</u>	
If this is a demolition or implosion project, has the Bureau of Air Quality been notified? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
If no, immediately notify the Chief of the Explosives and Safety Section.	
Note: The Chief of the Explosives Safety Section must also be notified of demolition projects, projects directly affecting a public waterway, or any other project requiring special considerations outside the scope of typical blasting operations.	
Signature <u>Matthew J. Riley</u>	Approval Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Comments: <u>See attached comment sheet.</u>	Date <u>11/12/25</u>

Blasting Inspector's Comments for Addendum to BAP 32254104

1. The alternative air overpressure limit at all monitoring locations listed in Comment B on Page 2 is 148 dBL.
2. The permittee shall monitor the atmosphere for signs of an atmospheric thermal inversion. Blasting shall not be conducted during observed thermal inversion conditions.
3. Any blocking of public roads is to be coordinated with the appropriate transportation authorities and/or law enforcement.
4. Permittee is reminded that there is no unattended storage of explosives on the site without first obtaining a Site Security Plan and Magazine Storage Licenses. All explosives are to be attended at all times and all unused explosives are to be removed at the completion of blasting activities.
5. Blasting is only authorized from sunrise to sunset.
6. The addendum only applies to the concrete blast for the turbine pedestals for Units 2 and 3. The applicant will submit additional addendums to this permit prior to each phase of the blasting proposed to be conducted.
7. This permit authorizes blasting activity only. Additional state or local permits may be required for this or related activities.



Adam M. Snyder

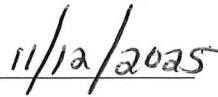


Date

Blasting Explosives Inspector
District Mining Operations



Matt Riley



Date

Mine Inspector Supervisor
District Mining Operations



NATIONALLY RECOGNIZED LEADER IN STRUCTURAL DEMOLITION

Shot Day Procedures

Jobsite: Homer City Generating Station/Turbine 2/3 Date: 11/23/2025

Time: 4:45pm

At least 2 weeks prior, the GC is responsible for notifying local authorities (police, fire and EMT departments/services)

Shot Day Sequence of Events:

1. All parties involved in operations and exclusion zones control are present.
2. Safety coordination meeting:
 - a) Security checkpoints assigned to GC personnel (checkpoints pre-determined).
 - b) Numbered radios issued to all security checkpoints personnel.
 - c) Back up cell phone numbers provided and confirmed.

Timeline: (Times are subject to change per the GC and weather)

2hrs prior - Pre-Blast meeting [All Hands-on Deck]. Go over all personnel assigned security checkpoint locations and what to expect on radio communications.

1hr 15mins prior - All personnel go to assigned security checkpoints and perform first radio check.

30mins prior - Second radio check from all security checkpoints. "All Clear" Seismic personnel - instruments operational and personnel in safe location

15mins prior - Confirm all GC personnel and any spectators are in safe locations, cameras up and running.

5mins prior - Third radio check from all security checkpoints and 5-minute warning siren.

1min prior - 1 minute warning siren. Final radio check from all security checkpoints and exclusion zones. ("ALL CLEAR" will be relayed over the radios)

4:45pm - If "ALL CLEAR", commence the 10 second count down: "10, 9, 8, 7, 6", over the radios, followed by a silent "5, 4, 3, 2, 1" (which will provide a small window of safety) followed by "Fire in the hole" [if no security breaches].

"Shot takes place."

After smoke has cleared blast area - Demtech Blasters go to blast site to perform post blast inspection [looking for any undetonated explosives] and will sound the "All Clear."

TBD - Demtech will announce the "ALL CLEAR", GC is approved to collapse exclusion zones and open roads.

NOTE: Should some unforeseen anomaly occur, Demtech takes full control of the situation! [From a safe distance]. Security checkpoints personnel stay at locations until advised otherwise. Safety Zones around the affected area will be established. The situation will be analyzed, and a plan will be formulated. With no explosives related dangers present - DEMTECH GIVES "ALL CLEAR" to the GC. All security checkpoints personnel will return to the command post.

Demtech and GC personnel allowed to proceed to blast site.

Seismographs to be retrieved and downloaded. Cameras retrieved and footage downloaded.

Demtech to fill out blast report and submit to GC for review.





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
2/25/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFRS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER	CONTACT NAME: Nancy Schwer, CISR	
	PHONE (A/C, No, Ext): 314-594-2779	FAX (A/C, No): 888-307-1561
E-MAIL ADDRESS: nancy.schwer@marshmma.com		
INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A : American Interstate Insurance Company		31895
INSURER B : National Indemnity Company		20087
INSURER C : Endurance American Insurance Company		10641
INSURER D : Evanston Insurance Company		35378
INSURER E : Gotham Insurance Company		25569
INSURER F : Lexington Insurance Company		19437

COVERAGES

CERTIFICATE NUMBER: 2035905017

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS		
F	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> HIRED AUTO <input checked="" type="checkbox"/> NON-OWNED AUTO GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO- JECT <input type="checkbox"/> LOC OTHER:			02773473	3/1/2025	3/1/2026	EACH OCCURRENCE	\$ 1,000,000	
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000	
							MED EXP (Any one person)	\$ 5,000	
							PERSONAL & ADV INJURY	\$ 1,000,000	
							GENERAL AGGREGATE	\$ 2,000,000	
							PRODUCTS - COMP/OP AGG	\$ 2,000,000	
								\$	
B	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY			70TRS133134	3/1/2025	3/1/2026	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000	
							BODILY INJURY (Per person)	\$	
							BODILY INJURY (Per accident)	\$	
							PROPERTY DAMAGE (Per accident)	\$	
								\$	
C	<input type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 0			EXC30000924906 EX202500002975	3/1/2025 3/1/2025	3/1/2026 3/1/2026	EACH OCCURRENCE	\$ 5,000,000	
							AGGREGATE	\$ 5,000,000	
							2nd Layer - Occ/Agg	\$ 5,000,000	
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y / N <input checked="" type="checkbox"/> N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N / A	AVWCMO3251572025	3/1/2025	3/1/2026	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER	\$ 1,000,000	
							E.L. EACH ACCIDENT	\$ 1,000,000	
							E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000	
							E.L. DISEASE - POLICY LIMIT	\$ 1,000,000	
D	Pollution Liability			MMAENV004165	3/1/2025	3/1/2026	Each Occurrence Aggregate	\$ 5,000,000 \$ 5,000,000	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER

CANCELLATION

For Information Only	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE 

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