AI # 68236
GNP20150001

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JUL - 6 2015
Dept. of Environmental Quality

MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY

WET DECK LOG SPRAY WITH RECIRCULATION NOTICE OF INTENT

FOR COVERAGE UNDER WET DECK LOG SPRAY WITH RE-CIRCULATION GENERAL NPDES PERMIT MSG17 0101

(NUMBER TO BE ASSIGNED BY STATE)

FILE AT LEAST 30 DAYS PRIOR TO THE COMMENCEMENT OF THE REGULATED INDUSTRIAL ACTIVITY

INSTRUCTIONS

Submittals with this Notice of Intent (NOI) must include an United States Geological Survey (USGS) quadrangle map (or a copy) showing site location and extending at least ½ mile beyond the site's property boundary and a drawing showing the dimensions of the wet deck recirculation pond(s) and the timber wet storage area(s). Maps can be obtained from the MDEQ, Office of Geology at 601-961-5523.

For new or expanding facilities, detailed plans and specifications must be submitted for the wet deck log spray recirculation pond(s) by a registered Professional Engineer. Also, contiguous landowner notification forms, the proof of publication in a local newspaper, and the acceptance letter from a local library must also be provided as outlined in Activity 4, Conditions S-2 and S-3 of the general permit.

As part of this NOI, if applicable, all previously approved boiler chemical additive approval notifications must be submitted. At a minimum, the exact name of the chemical, the date of the facility's notification submittal, and MDEQ's approval letter must be provided.

All INFORMATION REQUESTS MUST BE ANSWERED (answer "NA" if not applicable)

THE APPLICANT IS ☒OWNER OR ☒OPERATOR? (CHECK ONE OR BOTH)

OWNER INFORMATION

Owner Contact Name & Position: Hugh Lewing, Group General Manager

Owner Company Name: Georgia-Pacific WFS LLC

Owner Street or (P.O. Box): 630 Lakeland East Drive Suite A

Owner City: Flowood **State:** MS **Zip:** 39232

Owner Phone Number (Include Area Code): 601-933-0490

OPERATOR INFORMATION (if different than owner)

Operator Contact Name & Position: Don Gaskin, Area Manager

Operator Company: Georgia-Pacific WFS LLC

Operator Street (P.O. Box): P.O. Box 879

Operator City: Grenada **State:** MS **Zip:** 38901

Operator Phone Number (Include Area Code): 662-809-1888

FACILITY INFORMATION

Facility Name: Duck Hill Bank Yard Wet Deck

Nature of Business (Include 4 – digit Standard Industrial Classification Code (SIC) and description):

SIC Code: 2 4 1 1 Logging (Piling wood; Untreated)

Physical Site Address (if not available indicate the nearest named road):

Street: 44 Highway 51 South **City:** Grenada

County: Grenada **Zip:** 38901

Geographic Position: At entrance

Latitude: 33 **degrees** 40 **minutes** 50 **seconds**

Longitude: -89 **degrees** 44 **minutes** 27 **seconds**

WET DECK LOG SPRAY RECIRCULATION SYSTEM INFORMATION

How many outfalls/release points are eligible for coverage? 2

Siting Criteria (For New Construction Only):

MDEQ considers wet deck log spray recirculation systems to be wastewater treatment systems. According to the "State of Mississippi Wastewater Regulations", wastewater treatment systems must be 150 feet from the nearest adjoining property line unless the property is zoned for commercial or industrial use or is being used as such.

Will the pond(s) and timber wet storage area(s) meet the siting criteria: ☒ **Yes** ☐ **No**

If no, is adjoining property zoned for commercial or industrial use or being used as such? ☐ **Yes** ☐ **No**

If siting criteria cannot be met, please complete a Property Line Buffer Zone Waiver Form. This form can be found on MDEQ's website at MDEQ - Timber and Wood Products Branch webpage or be obtained from MDEQ Environmental Permits Division by calling (601) 961-5623.

Corps of Engineer Section 404 Permit Criteria (For New Construction Only):

Is the project rerouting, filing or crossing a water conveyance of any kind (Yes or No)? No **(If yes, contact the U.S. Army Corps of Engineers' Regulatory Branch for permitting requirements).**

If the project requires a Corps of Engineer Section 404 Permit, provide appropriate documentation with this application that:

- **The project has been approved by individual permit, or**
- **The work will covered by a nationwide permit and NO NOTIFICATION to the Corps is required, or**
- **The work will be covered by a nationwide or general permit and NOTIFICATION to the Corps is required**

Geographic Position for outfall(s) from Wet Deck Log Spray Recirculation Pond(s)(If the applicant has more than one outfall/release point eligible for coverage, please use the space to the right.):

Outfall 001:

Latitude: 33 **degrees** 41 **minutes** 00 **seconds**

Longitude: -89 **degrees** 44 **minutes** 15 **seconds**

Outfall 002:

Latitude: 33 degrees 40 minutes 54 seconds

Longitude: -89 degrees 44 minutes 39 seconds

Receiving Stream(s) (If more than one outfall is covered, indicate the respective receiving stream for each outfall.): Unnamed Tributary ultimately discharging into Batupan Creek

DOCUMENTATION OF COMPLIANCE WITH OTHER REGULATIONS/REQUIREMENTS

Is this notice for a facility that will require other permits? ☐ **Yes** ☒ **No If yes, circle which one(s): Air, Hazardous Waste, Pretreatment, Water State Operating, Individual NPDES, or Other(s):**

Not Applicable

How will sanitary sewage be collected and treated? No sanitary sewage treatment at the facility

Will the facility route boiler blowdown, exterior equipment or exterior vehicle washwater, or any other type wastewater to the wet deck log spray recirculation pond(s)? ☐ **Yes** ☒ **No If yes, please indicate in gallons per day the volume of each wastestream. (Please be aware that facilities which route exterior equipment or exterior vehicle washwater where detergents or other chemicals are being used are not eligible to obtain coverage under this general permit.):**

Not Applicable

CERTIFICATION

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.

Hugh Lewing — **Signature[1] (Must be signed by operator when different than owner)**

7/1/15 — **Date Signed**

Hugh Lewing — **Printed Name[1]**

Group Manager — **Title**

[1]This application shall be signed as follows:

- **For a corporation, by a responsible corporate officer.**
- **For a partnership, by a general partner.**
- **For a sole proprietorship, by the proprietor.**

After signing please mail to: **Environmental Permits Division, Office of Pollution Control**
P.O. Box 2261
Jackson, MS 39225-2261