

AI #64394  
Gnp20160002

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**MAJOR MODIFICATION FORM  
FOR LARGE CONSTRUCTION GENERAL PERMIT**  
Coverage No. MSR10 6 4 4 3 County Forrest



**INSTRUCTIONS**

Coverage recipients shall notify the Mississippi Department of Environmental Quality at least 30 days in advance of the following activities (check all that apply). This form should be submitted with a modified Storm Water Pollution Prevention Plan (SWPPP), updated USGS topographic map, Corps of Engineers Section 404 documentation and wastewater collection and treatment information, as appropriate.

- ☒ SWPPP details have been developed and are ready for MDEQ review for subsequent phases of an existing, covered project.
- ☐ "Footprint" identified in the original LCNOI is proposed to be enlarged.

This form must be signed by the current coverage recipient under Mississippi's Large Construction General Permit. A different developer of new phases of existing subdivisions must apply for separate permit coverage through the submittal of a new complete LCNOI package. Coverage recipients are authorized to discharge storm water associated with proposed expansions of existing subdivisions or subsequent phases, under the conditions of the General Permit, only upon receipt of written notification of approval by MDEQ. All other modifications, such as changes of erosion and sediment controls used, must be in accordance with ACT6, S-1 (4) and (5) of the General Permit.

ALL INFORMATION MUST BE COMPLETED (indicate "N/A" where not applicable)

**COVERAGE RECIPIENT INFORMATION**

COVERAGE RECIPIENT CONTACT NAME: Paul J. McDonald, COL, EN, MSARNG TEL # (601) 313-6230  
COMPANY NAME: Mississippi Military Department  
STREET OR P.O. BOX: 1410 Riverside Drive  
CITY: Jackson STATE: MS ZIP: 39202

**PROJECT INFORMATION**

PROJECT NAME: Camp Shelby Sanitary Sewer Replacement - Phase 4  
CITY: Camp Shelby, MS  
ADDITIONAL ACREAGE TO BE DISTURBED: N/A TOTAL PROJECT ACREAGE: Approx. 190 Ac

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.

Paul J. McDonald  
Signature (must be signed by coverage recipient)

5 Jan 16  
Date

Paul J. McDonald  
Printed Name

Constr. and Facilities Mgt Officer.  
Title

Please submit this form to:

Chief, Environmental Permits Division  
MS Department of Environmental Quality, Office of Pollution Control  
P.O. Box 2261  
Jackson, Mississippi 39225

Revised: 12/16/10

# PRIME CONTRACTOR CERTIFICATION

## LARGE CONSTRUCTION GENERAL PERMIT

Coverage No. MSR10 6 4 4 3 County Forrest

(Fill in your Certificate of Coverage Number and County)

JAN 16 2016



By completing and submitting this form to MDEQ, the prime contractor is certifying that (1) they have operational control over the erosion and sediment control specifications (including the ability to make modifications to such specifications) or (2) they have day-to-day operational control of those activities at the site necessary to ensure compliance with the SWPPP and applicable permit conditions.

The owner(s) of the property and the prime contractor associated with regulated construction activity on the property have joint and several responsibility for compliance with the permit. Notwithstanding any permit condition to the contrary, the coverage recipient and any person who causes pollution of waters of the state or places waste in a location where they are likely to cause pollution of any waters of the state shall remain responsible under applicable federal and state laws and regulations and applicable permits.

### PRIME CONTRACTOR INFORMATION

PRIME CONTRACTOR CONTACT PERSON: Bobby Allen PHONE NUMBER: 628 297-1117  
PRIME CONTRACTOR COMPANY: Kappa Development & General  
PRIME CONTRACTOR STREET (P.O. BOX): 10480 Reichold Road  
PRIME CONTRACTOR CITY: Gulfport STATE: MS ZIP: 39503

### OWNER INFORMATION

OWNER CONTACT PERSON: Paul J. McDonald, COL, EN, MSAR PHONE NUMBER: (601) 313-6230  
OWNER COMPANY NAME: Mississippi Military Department

### PROJECT INFORMATION

PROJECT NAME: Camp Shelby Sewer Replacement - Phase 4  
DESCRIPTION OF CONSTRUCTION ACTIVITY: Construction of gravity main  
PHYSICAL SITE ADDRESS (If the physical address is not available indicate the nearest named road. For linear projects, indicate the beginning of the project and identify all counties the project traverses.)  
STREET: Motor Pool Access Road  
CITY: Camp Shelby COUNTY: Forrest

I certify that I am the prime contractor for this project and will comply with all the requirements in the above referenced general NPDES permit. I further 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.

Robert S. Allen  
Prime Contractor Signature

DEC 21, 2015  
Date Signed

ROBERT S ALLEN  
Printed Name

Vice-President  
Title

<sup>1</sup>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.
- For a municipal, state or other public facility, by principal executive officer, mayor, or ranking elected official.

This Prime Contractors Certification form shall be submitted to:

Chief, Environmental Permits Division  
MS Department of Environmental Quality, Office of Pollution Control  
P.O. Box 2261  
Jackson, Mississippi 39225

Revised: 12/16/10