



MISSISSIPPI DEPARTMENT OF  
ENVIRONMENTAL QUALITY

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MAR 21 2013

MDEQ

# BASELINE STORM WATER GENERAL PERMIT RE-COVERAGE FORM

FOR COVERAGE UNDER MISSISSIPPI'S REISSUED  
BASELINE GENERAL PERMIT MSR00  
GENERAL NPDES COVERAGE NO. MSR00 2 0 6 4

## INSTRUCTIONS

The submittal of this form is required to receive coverage under the reissued Baseline General Permit. This form must be completed and returned to the address printed at the bottom of page 2 within 45 days of the date of the Letter of Instruction for Re-Coverage.

The signatory of this form must be the owner or operator who is the current coverage recipient (i.e., not the environmental consultant). The coverage recipient is responsible for permit compliance.

Re-submittal of the Storm Water Pollution Prevention Plan (SWPPP) is not required, even if amendments must be added to meet new permit conditions. However, amendments to the SWPPP must be submitted with the "Re-Coverage Form" if there has been a change in design, construction, operation, or maintenance of the facility, which may increase the discharge of pollutants to waters of the State or the SWPPP proves to be ineffective in controlling storm water pollutants.

If the facility is out of business or no longer a regulated facility, please request termination of coverage by completing the Request for Termination (RFT) Form found in the Baseline Forms Package. Facilities that continue to discharge wastewater without applicable permit coverage are in violation of state law.

Do not submit this form if submitting a "Request for Termination" (RFT).

Do not submit this form if submitting a "No Exposure Certification."

**ALL FORM BLANKS MUST BE COMPLETED** (enter "NA" if not applicable).

The Certificate of Coverage should be mailed to: ☒ owner/operator ☐ facility (please check one)

## COVERAGE RECIPIENT INFORMATION

CONTACT NAME & POSITION: Stephen Castleman

COMPANY NAME: Warren Paving, Inc.

STREET OR P.O. BOX: P.O. Box 572

CITY: Hattiesburg

STATE: MS

ZIP: 39503

PHONE NUMBER (601) 544-7811

EMAIL: scastleman@warrenpaving.com

## FACILITY INFORMATION

FACILITY NAME: Warren Paving Inc. Vicksburg Aggregate Site

CONTACT NAME & POSITION: Stephen Castleman

CONTACT PHONE NUMBER (601) 544-7811

EMAIL: scastleman@warrenpaving.com

PRIMARY STANDARD INDUSTRIAL CLASSIFICATION (SIC) CODE & DESCRIPTION OF INDUSTRIAL ACTIVITY:

3 2 8 1 Construction and Building Materials

PHYSICAL SITE ADDRESS: STREET: Warrenton Road

CITY: Vicksburg COUNTY: Warren

ZIP: 39180

PROVIDE THE COORDINATES OF THE PLANT ENTRANCE:

LATITUDE: 32 degrees 17 minutes 4.5 seconds

LONGITUDE: 90 degrees 55 minutes 11 seconds

NEAREST NAMED RECEIVING STREAM FOR STORM WATER LEAVING THE SITE: Mississippi River

IS RECEIVING STREAM ON MDEQ's 303(d) LIST?

☐ YES ☒ NO

HAS A TMDL BEEN ESTABLISHED FOR THE RECEIVING STREAM SEGMENT?

☐ YES ☒ NO

## STORM WATER POLLUTION PREVENTION PLAN (SWPPP)

1. IS A COPY OF THE SWPPP AT THE PERMITTED SITE?

☒ YES ☐ NO

2. IS THE SWPPP UP-TO-DATE AND EFFECTIVE IN CONTROLLING STORM WATER POLLUTANTS?

☒ YES ☐ NO

IF NO, PLEASE ATTACH REQUIRED SWPPP AMENDMENTS (see Instructions on front page).

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.

I further certify that I understand when coverage is terminated the facility is no longer authorized to discharge storm water associated with industrial activity under this general permit. I understand that discharging pollutants in storm water associated with industrial activity to waters of the state without NPDES coverage is in violation of state law.



Signature<sup>1</sup>

Date

Stephen Castleman

Printed Name<sup>1</sup>

Safety Director, Responsible Official

Title

<sup>1</sup>This form shall be signed according to ACT14, T-9 of the General Permit, 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.

After signing please mail to:

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



CONTRACTORS & ENGINEERS

POST OFFICE BOX 572  
HATTIESBURG, MISSISSIPPI 39403  
TELEPHONE (601) 544-7811 • FAX (601) 544-2005

POST OFFICE BOX 2545  
GULFPORT, MISSISSIPPI 39503  
TELEPHONE (228) 896-8003 • FAX (228) 896-8155

March 16, 2016

Certified Mail Number: 7015 1520 0002 6357 0934

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

RECEIVED  
MAR 21 2016  
Dept. of Environmental Quality

Re: Warren Paving/ FMT Dry Cargo (current Permittee)  
Baseline General Permit Recoverage MSR002064

Chief:

Warren Paving is submitting the attached Baseline General Permit Re-coverage Forms for the facility listed above. Warren Paving transferred the permit to FMT Dry Cargo in July of 2015. Warren Paving request permit to be transfered to FMT Dry cargo per transfer forms on file at MDEQ.

If you have any questions concerning any of these facilities, please call me (601) 544-7811.

Sincerely,

Stephen Castleman,  
Safety Director

Enclosures



