AI #69644 GnP20160001





## HYDROSTATIC TEST NOTICE OF INTENT (HTNOI)

# FOR COVERAGE UNDER MISSISSIPPI'S HYDROSTATIC TEST GENERAL PERMIT GENERAL PERMIT MSG13 0 4 7 4

(Number to be assigned by MDEQ)

#### INSTRUCTIONS

The Hydrostatic Test Notice of Intent (HTNOI) is for coverage under the Hydrostatic Test General Permit to discharge hydrostatic test water and storm water associated with land disturbing activities of one (1) acre or greater; or for land disturbing activities, which are part of a larger common plan of development or sale that are initially less than one (1) acre but will ultimately disturb one (1) or more acres. Applicant must be the owner or operator. The coverage recipient is responsible for compliance with the conditions of the general permit.

Completed HTNOIs should be filed at least thirty (30) days prior to the commencement of regulated activity. <u>Discharge of hydrostatic test</u> water or storm water from regulated construction activities without written notification of coverage is a violation of state law.

A USGS quadrangle map or copy is a required submittal. The map shall extend at least one-half of a mile beyond the facility/ project property boundary. In the case of linear pipeline projects the map shall extend at least one-half of a mile beyond the pipeline right-of-way. The site location and outfalls must be outlined and labeled. Quad maps can be obtained from the Office of Geology (601-961-5523). If a copy is submitted, provide the name of the quadrangle map that is found in upper right hand corner.

Additional submittals may include the following:

- A site-specific Storm Water Pollution Prevention Plan (SWPPP) developed in accordance with ACT8 of the General Permit, if the project includes regulated construction activity disturbing five (5) acres or more
- · A description of proposed water treatment additives as outlined in ACT4, S-4 of the General Permit
- · Appropriate Section 404 documentation from U.S. Army Corps of Engineers
- Written authorization from the MDEQ, Office of Land and Water, if water withdrawal from surface waters or ground waters is to be used for the testing. For information call the Office of Land and Water at 601/961-5202

## ALL REQUESTED INFORMATION MUST BE PROVIDED (Answer "NA" if not applicable)

APPLICANT IS THE:	<b>✓</b> OWNER	☐ OPERATOR	(Must check	c one or both)
	OW	NER INFORMATION		
OWNER CONTACT NAME &	& POSITION: Toya	Campbell (Environme	ental Project Mar	nager)
OWNER COMPANY NAME:	Tennessee Gas Pip	eline Company		
OWNER STREET (P.O. BOX)	: 1001 Louisiana S	Street, Ste. 1465A		
OWNER CITY: Houston			STATE: Texas	ZIP: 77002

#### OPERATOR INFORMATION

_		OPERATOR INFORMATI	ON	
,	OPERATOR CONTACT NAME & POS	SITION: Toya Campbell (Env	vironmental Proje	ct Manager)
7	OPERATOR COMPANY: Tennessee			
	OPERATOR STREET (P.O. BOX): 100	01 Louisiana St., 1465A		
	OPERATOR CITY: Houston		_STATE: _TX	zip: _77002
	OPERATOR PHONE # (INCLUDE ARI	EA CODE): 713-420-5622		
		FACILITY/PROJECT INFORM	1ATION	
	FACILITY/PROJECT NAME: MLV 5	58-3 and MLV 60-3 Hydrosta	atic Test Project	SIC Code: 4 9 2 2
	PIPELINE, STORAGE TANK OR FLO	WLINE BEING TESTED IS:	☐ NEW	✓ USED
	IF USED, LIST PRIOR MATERIAL SE	ERVICE OF EQUIPMENT: Na	tural Gas Transp	ortation Pipeline
	IF REGULATED LAND DISTURBING (NOTE: A construction SWPPP must be	ACTIVITIES ARE TO OCCUR	R, LIST ACRES DISturbing five (5) ac	STURBED: less than 1 acre res or more).
	PHYSICAL SITE ADDRESS (If not ava	ilable, indicate nearest named ro	oad. Linear project	s indicate beginning of project):
	STREET: MS Highway 321		CITY: Vance	
	COUNTY: Tallahatchie	<u> </u>	ZIP: 38964	
	TYPE OF TREATMENT (IF PROVIDE	ED): Carbon filtration and file	tration through ha	y bale energy dissipation
pe th in	certify under penalty of law that this document ystem designed to assure that qualified personnerson or persons who manage the system, or the best of my knowledge and belief, true, accuration including the possibility of fines and belief that the best of my knowledge and belief true, accuration including the possibility of fines and belief that the besigned by operator when the besigned by operator when the best of the besigned by operator when the best of t	nel properly gathered and evaluated ose persons directly responsible for ate and complete. I am aware that the door imprisonment for knowing viole	the information subm gathering the informa here are significant p	itted. Based on my inquiry of the ation, the information submitted is, to
-	Gina B. Dorsey			S Project Permitting
	Printed Name <sup>1</sup> This application shall be signed according	tto ACT12 T 7 of the Concret D	Title	
	<ul> <li>For a corporation, by a responsible cor</li> <li>For a partnership, by a general partne</li> <li>For a sole proprietorship, by the proprietorship is application of the proprietorship.</li> </ul>	rporate officer. er. rietor.		ranking elected official.
]	HTNOI forms must be submitted to:	Chief, Environmental Permits MS Dept of Environmental Qu P.O. Box 2261 Jackson, Mississippi 39225		ntion Control

Revised: 06/01/11

### **OUTFALL INFORMATION**

(To be submitted with HTNOI and Major Modification Forms)

### **INSTRUCTIONS:**

- 1. For each outfall, complete the information in the table below (NOTE: Complete the last column of this form, only if it is being submitted with a Major Modification Form).
- 2. All outfalls must be spotted and labeled on a USGS quadrangle map.

OUTALL		te production and a series		NEAREST RECEIVING STREAM <sup>2</sup>					STATUS OF TANK,		HIMFUEL	INDICATE	
		LONGITUDE 1			303 LIS	IDEQ I(D) I? 3	TME	AS DL? <sup>3</sup>	EST. TOTAL DISCHARGE (MIL GAL)	PIPE FLOV		EXPECTED TEST DATE(S) (mm/dd/yr)	WHETHER OUTFALL IS NEW OF EXISTING
NO.	(deg/min/sec)	(deg/min/sec)	FILL WATER	NAME	Yes	No	Yes	NO /	(MIL GAL)	New	Useu		Exactino
001	33°53'52.44"	90°24'38.52"	Water Well	Blue Lake		<b>✓</b>		✓	1		<b>V</b>	06/1/2016	
002	34°07'12.72"	90°12'59.76"	Water Well	Brushy Bayou		✓		✓	.5		✓	06/1/2016	
003	33°46'57.72"	90°31'22.08"	Water Well	Powell Bayou		<b>√</b>		<b>√</b>	1		<b>√</b>	06/1/2016	
004	33°59'29.4"	90°19'53.76"	Water Well	Cassidy Bayou		✓		✓	.5		✓	06/1/2016	
005													
006									-74				
007													
008													
009	3											-	
010													
011													
012												_416_6	

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<sup>&</sup>lt;sup>1</sup> List the latitude and longitude of its location to the nearest 15 seconds.

<sup>&</sup>lt;sup>2</sup> Name of the nearest named receiving stream as listed on a USGS Quad Map.

<sup>&</sup>lt;sup>3</sup> MDEQ's 303(d) List of Impaired Water Bodies and approved TMDLs can be found at: http://www.deq.state.ms.us/MDEQ.nsf/page/TWB\_Total\_Maximum\_Daily\_Load\_Section