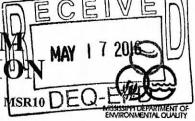
## MAJOR MODIFICATION FOR FOR RESIDENTIAL SUBDIVIS

LARGE CONSTRUCTION STORM WATER GENERAL NPDES PERMIT MSR10



## INSTRUCTIONS

Coverage recipients shall notify the Mississippi Department of Environmental Quality of plans to expand the "footprint" of an existing subdivision or add subsequent phases. This form and a modified Storm Water Pollution Prevention Plan (SWPPP), including COE 404, dam safety, and wastewater collection and treatment information, must be submitted when:

- SWPPP details have been developed and are ready for MDEQ review for subsequent phases of an existing, covered subdivision
- The foot print identified in the original SWPPP is proposed to be enlarged

This form must be signed by the original coverage recipient under Mississippi's Large Construction Storm Water General Permit. A different developer of new phases of existing subdivisions must apply for separate permit coverage. 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 the MDEQ. All other modifications, such as changes of erosion and sediment controls used, must be in accordance with ACT 7, S-1 (4) of Mississippi's Large Construction Storm Water General Permit.

CO	OVERAGE RECIPIENT INFORMAT	ION			
COVERAGE RECIPIENT CONTACT	PERSON: Pete Alman				MO
COMPANY NAME: Pinelands, LLC					
STREET OR P.O. BOX: 1855 Crane	Ridge Drive, Suite C				
CITY: Jackson	STATE: MS	ZIP: 39216			
PHONE # (INCLUDE AREA CODE):					
	PROJECT INFORMATION				
CONSTRUCTION STORM WATER G	GENERAL PERMIT COVERAGE NUMBER: $N$	MSR10 _2	0	7	2
ADDITIONAL ACREAGE TO BE DIS	STURBED:				
PROJECT NAME: Gardens of Mansi	hip Phase 5 & 6 - Residential Development				
CITY: Flowood	COUNTY: Rankin				
inquiry of the person or persons who mana information submitted is, to the best of my	ument and all attachments were prepared under m ified personnel properly gathered and evaluated thage the system, or those persons directly responsible knowledge and belief, true, accurate and completing including the possibility of fine and imprisonment	ble for gathering the	itted. I	n acc Based ation, e sign	ordance on my the nificant
Signature (must be signed by coverage rec.	sipient)	1-25-16 late			
Printed Name	<del></del>	gwyd itle			
Please submit this form to: Chief, MS De	Environmental Permits Division epartment of Environmental Quality, Office of Pollution Cont	rol			

P.O. Box 10385 Jackson, Mississippi 39289-0385