



UNDERGROUND STORAGE TANK GROUNDWATER REMEDIATION NOTICE OF INTENT (USTNOI)

For Coverage under Mississippi's Underground Storage Tank (UST)
Groundwater Remediation General Permit
General Permit MSG12 \(\Omega \frac{248}{2} \)

(NUMBER TO BE ASSIGNED BY STATE)

INSTRUCTIONS

Applicant must be the owner or operator of the remediation system. To avoid unnecessary delays, please be sure that the USTNOI is signed in accordance with permit ACT9, T-7 of the General Permit. The owner or operator that receives coverage is responsible for permit compliance. File at least 30 days prior to proposed discharge.

Required Submittals with the USTNOI Include:

- A USGS quadrangle map or copy extending at least one-half of a mile beyond the site's property boundary.
 The site location and outfalls must be outlined or highlighted. Quad maps can be obtained from the Office of
 Geology at 601-961-5523. If a copy is submitted, provide the name of the quadrangle map that is found in
 upper right hand corner.
- A letter of approval or denial from an available POTW or Wastewater Collection Authority (see permit ACT4, S-6 and MDEQ Wastewater Regulations, Chapter One, Part I.C.1.a.).
- Certified-return receipts from contiguous landowner notifications (not required if the remediation system was operating under a previous permit or coverage see permit ACT4, S-7).
- A list of water treatment chemicals proposed to be used. Please submit the following information for each
 specific chemical: name and composition of the additive, discharge concentration, dosage addition rates,
 frequency of use, EPA registration (if applicable), aquatic species toxicological data and Material Safety Data
 Sheet (MSDS).

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

THE APPLICANT IS OWNER	OPERATOR (please check one or both)
OWNER I	NFORMATION
Owner Contact Name: Anju Walia	Position: Owner
Owner Company Name: A&J Food Store, LLC	
Owner Street (P.O. Box): 447 S. Extension Street	<u> </u>
Owner City: <u>Hazlehurst</u>	State: MS Zip: 39083
Owner Phone Number (include area code): 601-320-27	776
OPERATOR INFORMA	TION (if different than owner)
Operator Contact Name: William L. Burle	Position: President
	A.
Operator Company Name: W. L. Burle Engineers, P.	
Operator Company Name: W. L. Burle Engineers, P. Operator Street (P.O. Box): PO Box 1293	

PROJECT INFORMATION

Project Name: A&J's Food Store, LLC Mississippi Groundwater Protection Trust Fund ID No	(if applicable): 5152	
Physical Site Address (if not available indicate the nearest named road):		
Street: 447 S. Extension Street	City: Hazlehurst	
County: Copiah	Zip: 39083	
Latitude: 31 degrees 50 minutes 53 seconds	Longitude: 90 degrees 23 minutes 47 seconds	
Method Used to Determine Lat. & Long. (GPS (Please G	PS Facility Entrance) or Map Interpolation): Google Maps	

WASTEWATER DISCHARGE INFORMATION

Where is the remediated groundwater proposed to be discharged?	State Waters POTW/Collection System	
Name of Nearest Receiving Stream: N/A		
Name of POTW: Hazlehurst POTW, Lagoon		
POTW contact, title and telephone number: Jason Hilliard, Superintendent 601-894-2261		
Name of Wastewater Collection Authority (if different from POTW)):	
Wastewater Collection Authority contact, title and telephone number:		
Proposed rate of flow (gallons/day): 0.0144 MGD		
Describe type of treatment: Yes, the groundwater treatment system consists of an		
oil/water separator followed by an aeration chamber.		
CERTIFICATI	ION	
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.		
Jan and	10/17/16	
Signature (Must be signed by operator when different than owner)	Date Signed	
Jay Santucci	Treasurer	
Printed Name ¹	Title	

¹This application shall be signed according to the General Permit, ACT9, T-7 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, the mayor, or ranking elected official.

USTNOI forms must be submitted to:

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

Revised: April 6, 2011

CONTIGUOUS LANDOWNER NOTIFICATION OF CORRECTIVE ACTION AND SUBSEQUENT DISCHARGE OF TREATED GROUNDWATER DUE TO LEAKING



UNDERGROUND STORAGE TANK(S)
(see ACT4, S-7 of the USTGP)

Underground storage	tanks located at 447 S. Extension Street,	Hazlehurst, Copiah County, MS
		[street address with city and county]
have been determine	d to have released motor fuel. In order to p	protect the environment and public health, a
cleanup process mus	t be started. The cleanup involves bringing	g a trailer contained groundwater treatment
system to the site, pu	mping out the contaminated groundwater,	treating it and discharging the treated water
into the city wastewa	ter sewer to be further treated or, in rare ca	ises, to State waters. The recovered fuel is
disposed at an offsite	permitted facility. The time a unit is on si	te averages approximately three years.
W. L. Burle, Engine	ers, P.A.	[applicant's name]
	treet, Greenville, MS 38701	[address]
662-332-2619	[phone number] is proposing to begin	the cleanup process and discharge treated
groundwater to Hazl		[name of
receiving stream or I	Publicly Owned Treatment Works or Waste	ewater Collection Authority]. This
notification is to pro-	vide you with an opportunity to comment t	o the Mississippi Department of
Environmental Quali	ity Permit Board before the Board makes a	final decision regarding the matter. No
discharge of treated	groundwater will occur unless the Board gr	ants coverage of this activity under the
General Permit for U	Inderground Storage Tank Groundwater Re	emediation. This notice has been sent to you
by Certified Mail - R	Leturn Receipt Requested. If you have no o	comments regarding this proposed facility, no
response is necessary	y and the permitting process will continue.	If you have any comments, they must be
received by the Mississippi Department of Environmental Quality within 10 days of receipt of this		
correspondence. Th	e Department of Environmental Quality	is limited in its review of this project to
those environmenta	l issues in which statutory authority has	been given. If you have any questions you
may contact the Serv	vice and Miscellaneous Branch of MDEQ a	at (601) 961-5171. Any comments relative to
zoning or economic and social impacts are within the jurisdiction of local zoning and planning authorities		
and should be address	ssed to those authorities. Comments are to	be mailed to the following address:
	Chief, Environmental Perm	nits Division

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

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POTW AND WASTEWATER COLLECTION AUTHORITY NOTIFICATION AND APPROVAL FORM



INSTRUCTIONS

The Mississippi Department of Environmental Quality (MDEQ) must receive approval from the local POTW and Wastewater Collection Authority (if different entities) in order for the applicant to obtain coverage under Mississippi's Underground Storage Tank Groundwater Remediation General Permit (see permit ACT4, S-6). Once both sections of the form have been completed, it shall be submitted to the address below. Coverage is required prior to discharging remediated groundwater to a POTW or Wastewater Collection Authority. If you have any questions, please contact the Service and Miscellaneous Industries Branch at 601/961-5171.

APPLICANT (please print or type)

W.L. Burle, Engineers, P.A.	name of applicant] is applying for coverage under	
Mississippi's Underground Storage Tank Groundwater Remediation General Permit (copy attached). Remediated		
groundwater, associated with a leaking underground petroleum storage tank, is proposed to be discharged from a		
site located at 447 S. Extension Street, Hazlehurst, M.		
[complete address with county]. Approximately 14,400	(0.0144 MGD) [gallons per day] of treated	
groundwater will be discharged to Hazlehurst POTW	[name of local POTW or	
Wastewater Collection Authority]. The treated groundwat	ter will be discharged in accordance with the conditions,	
requirements and limitations of Mississippi's Undergroun	d Storage Tank Groundwater Remediation General	
Permit.		
POTW and WASTEWATER COLLECTION AUTHORITY APPROVAL		
I certify that I am a duly authorized representative of this for managing daily operations. I am familiar with the req acknowledge that, by signing this form, I am providing Mour treatment works.	POTW (or Collection Authority) and directly responsible uirements of the above referenced General Permit and IDEQ with written approval of this proposed discharge to	
POTW Authorized Signature	Collection Authority Authorized Signature	
Henry Banks Printed Name	Printed Name	
May of Title	Title	
Date Signed Daytime Telephone	Date Signed Daytime Telephone	

This form shall be submitted to:

Chief, Environmental Permits Division

MS Dept of Environmental Quality, Office of Pollution Control

P.O. Box 2261

Jackson, Mississippi 39225