AI #6557 Gnpa0160001



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Dept. of Environmental Quality

HYDROSTATIC TEST NOTICE OF INTENT (HTNOI)

FOR COVERAGE UNDER MISSISSIPPI'S HYDROSTATIC TEST GENERAL PERMIT GENERAL PERMIT MSG13 0 499

(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. Discharge of hydrostatic test 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:	✓ OWNER	✓ OPERATOR	(Must chec	ck one or both)
	OWN	ER INFORMATION		<u> </u>
OWNER CONTACT NAME &	POSITION: Shive	r Nolan Senior Compl	iance Admini	strator
OWNER COMPANY NAME:	Enterprise Gas Pro	cessing, LLC., Pascago	oula Gas Proce	essing Plant
OWNER STREET (P.O. BOX)	P.O. BOX 4324 (C/O Environmental Dep	partment	
OWNER CITY: Houston		ST	TATE: TX	ZIP: 77210-4324
OWNER PHONE # (INCLUD)	E AREA CODE): (7)	13) 381-6595		

OPERATO	DR INFORMATION
OPERATOR CONTACT NAME & POSITION: Shive	er Nolan Senior Compliance Administrator
OPERATOR COMPANY: Enterprise Products Ope	rating, LLC., Pascagoula Gas Processing Plant
OPERATOR STREET (P.O. BOX): 6800 Stennis Bo	ulevard
OPERATOR CITY: Moss Point	STATE: MS ZIP: 39562
OPERATOR PHONE # (INCLUDE AREA CODE): (7	13) 381-6595

FACILITY/PROJECT NAME: Pascagoula Gas Prod	cessing Plant SIC Code: 1 3 2
PIPELINE, STORAGE TANK OR FLOWLINE BEING	G TESTED IS: \checkmark NEW \checkmark USED
F USED, LIST PRIOR MATERIAL SERVICE OF EQ	QUIPMENT: Gas Processing
NOTE: A construction SWPPP must be attached with	ARE TO OCCUR, LIST ACRES DISTURBED: <5 acres a this HTNOI, if disturbing five (5) acres or more). The inearest named road. Linear projects indicate beginning of projects.
GOOD Stannia Daylayard	CITY: Moss Point
STREET: 6800 Stennis Boulevard	CITY:CITY:

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 fines and/or imprisonment for knowing violations.

Signature (Must be signed by operator when different than owner)

11-23-20/6
Date Signed

Executive Vice Presionment
Title

GRAhAM BARON

¹This application shall be signed according to ACT12, T-7 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, the mayor, or ranking elected official.

HTNOI 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: 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 NO.	LATITUDE ¹ (deg/min/sec)	LONGITUDE 1 (deg/min/sec)	SOURCE OF FILL WATER	NEAREST RECEIVING STREAM ²					STATUS OF TANK.			INDICATE	
				NAME	30	MDEQ B(D) T?	H/ TMI Yes	AS DL? ³	EST. TOTAL DISCHARGE (MIL GAL)	PIPE FLO\ E	NK, LINE, WLINE TC. Used	EXPECTED TEST DATE(S) (mm/dd/yr)	WHETHER OUTFALL IS NEW OF EXISTING
001	30 22' 58.12"	88 29' 53.98"	Plant Water	Bayou Chico		1		✓	5000 GAL	1	1	11/14/16	
002	30 23' 1.10"	88 29' 56.18"	Plant Water	Bayou Chico		√		1	5000 GAL	√	√	11/14/16	
003	30 23' 0.44"	88 29' 47.28"	Plant Water	Bayou Chico		√		1	5000 GAL	1	1	11/14/16	
004	30 22' 49.11"	88 29' 59.75"	Plant Water	Bayou Chico		1		1	5000 GAL	1	1	11/14/16	
005	30 23' 1.13"	88 29' 52.51"	Plant Water	Bayou Chico		√		√	5000 GAL	√	1	11/14/16	
006												السيادات	
007												- 4:34	
008													
009			- 180-150										
010													
011									-1				
012													

Revised: 06/01/11

¹ List the latitude and longitude of its location to the nearest 15 seconds.

² Name of the nearest named receiving stream as listed on a USGS Quad Map.

³ 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