



HYDROSTATIC TEST NOTICE OF INTENT (HTNOI)

FOR COVERAGE UNDER MISSISSIPPI'S HYDROSTATIC TEST GENERAL PERMIT GENERAL PERMIT MSG13 0504

(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 check	c one or both)
	OWI	NER INFORMATION		
WNER CONTACT NAME &	POSITION: Miran	nda G. Briones-Garza, I	P.E.	
WNER COMPANY NAME:	Valero Parkway P	ipeline, LLC		
WNER STREET (P.O. BOX)	: One Valero Way	(MC E2A)		
WNER CITY: San Antonio			TATE: Texas	ZIP: 78249

	OPERATOR INFORMATI	ON					
OPERATOR CONTACT NAME & POSI	TION: Miranda G. Briones-	Garza, P.E.					
OPERATOR COMPANY: Valero Park							
OPERATOR STREET (P.O. BOX): One							
OPERATOR CITY: San Antonio		STATE: Texas	ZIP: 78249				
OPERATOR PHONE # (INCLUDE ARE	A CODE): (210) 345-1690						
F	ACILITY/PROJECT INFORM	IATION					
ELON MENON DO TECT NA ME. Parkuya	y to Colonial I ateral Project		SIC Code: 4 6 1 3				
	CILITY/PROJECT NAME: Parkway to Colonial Lateral Project PELINE, STORAGE TANK OR FLOWLINE BEING TESTED IS:						
IF USED, LIST PRIOR MATERIAL SER							
IF REGULATED LAND DISTURBING			STURBED: 21.5				
(NOTE: A construction SWPPP must be	attached with this HTNOI, if di	isturbing five (5) acr	res or more).				
PHYSICAL SITE ADDRESS (If not avail	able, indicate nearest named ro	oad. Linear projects	indicate beginning of project):				
STREET: 68 Kola Road		CITY: Kola					
COUNTY: Covington							
TYPE OF TREATMENT (IF PROVIDE); <u>N/A</u>						
I certify under penalty of law that this document a system designed to assure that qualified personnel person or persons who manage the system, or those the best of my knowledge and belief, true, accurate information, including the possibility of fines and signature (Must be signed by operator whe	properly gathered and evaluated se persons directly responsible for se and complete. I am aware that t for imprisonment for knowing viol	the information subm gathering the informa here are significant pe	itted. Based on my inquiry of the tion, the information submitted is, to				
Fred Hampton		Vice President					
Printed Name		Title					
 This application shall be signed according to For a corporation, by a responsible corporation. For a partnership, by a general partner. For a sole proprietorship, by the proprious For a municipal, state or other public farms must be submitted to: 	oorate officer. etor.	ficer, the mayor, or	ranking elected official.				
	MS Dept of Environmental Qua P.O. Box 2261 Jackson, Mississippi 39225		tion Control				

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Revised: 06/01/11



(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		SA SECTION S		
				NAME	303	IDEQ S(D) T? 3	TME	AS DL? ³	EST. TOTAL DISCHARGE (MIL GAL)	TANK, PIPELINE, FLOWLINE ETC. New Used		EXPECTED TEST DATE(S) (mm/dd/yr)	INDICATE WHETHER OUTFALL IS NEW OF EXISTING
001	31° 38' 50.38"	-89° 31' 34.3"	Private pond	Okatoma Creek	✓		1		0.031593	√		5/30/2017	N/A
002	31° 38' 11.79"	-89° 32' 05.0"	Private pond	Okatoma Creek	√		1		0.041296	1		5/30/2017	N/A
003	31° 37' 23.72"	-89° 32' 07.4"	Private pond	Okatoma Creek	√		1		0.131376	1		5/30/2017	N/A
004													
005							1						
006	Y distribution												
007													
008													
009													
010													
011							1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 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