AI #34962 Gnf20170001

MSR10 7 3 5 4

(NUMBER TO BE ASSIGNED BY STATE)

APPLICANT IS THE:				
OWNER CONTACT INFORMATION				
OWNER CONTACT PERSON: Brad Waldrop				
OWNER COMPANY LEGAL NAME: Forest Ridge LLC				
OWNER STREET OR P.O. BOX: 10 780 Huy 178				
OWNER CITY: Olive Branch STATE: MS ZIP: 38654				
OWNER PHONE #: (901) 489-4553 OWNER EMAIL: Stoney brook homes a yahoo.com				
PRIME CONTRACTOR CONTACT INFORMATION				
PRIME CONTRACTOR CONTACT PERSON: David Moneymaker				
PRIME CONTRACTOR COMPANY LEGAL NAME: DBA MONEYMAKEr Construction				
PRIME CONTRACTOR STREET OR P.O. BOX: 938 East Cox Road				
PRIME CONTRACTOR CITY: Byhalia STATE: MS ZIP: 3861/				
PRIME CONTRACTOR PHONE #: (901) 853 - 6183 PRIME CONTRACTOR EMAIL:				
FACILITY SITE INFORMATION				
FACILITY SITE NAME: Forrest Ridge Subdivision				
FACILITY SITE ADDRESS (If the physical address is not available, please indicate the nearest named road. For linear projects indicate the beginning of the project and identify all counties the project traverses.)				
STREET: South of College Rd, West of Bethel Rd				
CITY: STATE: COUNTY: De 50 to ZIP: 38654				
FACILITY SITE TRIBAL LAND ID (N/A If not applicable): ///A				
LATITUDE: 34 degrees 54 minutes 44.76 seconds LONGITUDE: 789 degrees 48 minutes 13.32 seconds				
LAT & LONG DATA SOURCE (GPS (Please GPS Project Entrance/Start Point) or Map Interpolation): TOTAL ACREA CE THAT WILL BE DISTURBED ! STACE TOTAL ACREA CE THAT WILL BE DISTURBED!				
TOTAL ACKEAGE THAT WILL BE DISTURDED :				
IS THIS PART OF A LARGER COMMON PLAN OF DEVELOPMENT? YES NAME OF LARGER COMMON PLAN OF DEVELOPMENT: Was name of Larger Common Plan of Development: Was name of Larger Common Plan of Development:				
IF YES, NAME OF LARGER COMMON PLAN OF DEVELOPMENT: //// 4/// - Woolsey AND PERMIT COVERAGE NUMBER: MSR10				
ESTIMATED CONSTRUCTION PROJECT START DATE: YYYY-MM-DD 2017				
ESTIMATED CONSTRUCTION PROJECT END DATE: YYYY-MM-DD				
DESCRIPTION OF CONSTRUCTION ACTIVITY: Existing ditcht Road Repair; homes				
PROPOSED DESCRIPTION OF PROPERTY USE AFTER CONSTRUCTION HAS BEEN COMPLETED: Residential				
SIC Code				

NEAREST NAMED RECEIVING STREAM: Coldwater River
IS RECEIVING STREAM ON MISSISSIPPI'S 303(d) LIST OF IMPAIRED WATER YES NOD BODIES? (The 303(d) list of impaired waters and TMDL stream segments may be found on MDEQ's web site: http://www.deq.state.ms.us/MDEQ.nsf/page/TWB_Total_Maximum_Daily_Load_Section)
HAS A TMDL BEEN ESTABLISHED FOR THE RECEIVING STREAM SEGMENT? YES□ NO
ARE THERE RECREATIONAL STREAMS, PRIVATE/PUBLIC PONDS OR LAKES YES□ NO▼ WITHIN ½ MILE DOWNSTREAM OF PROJECT BOUNDRY THAT MAY BE IMPACTED BY THE CONSTRUCTION ACTIVITY?
EXISTING DATA DESCRIBING THE SOIL (for linear projects please describe in SWPPP): See SWPPP
WILL FLOCCULANTS BE USED TO TREAT TURBIDITY IN STORM WATER? YES□ NO
IF YES, INDICATE THE TYPE OF FLOCCULANT. ANIONIC POLYACRYLIMIDE (PAM) OTHER
IF YES, DOES THE SWPPP DESCRIBE THE METHOD OF INTRODUCTION, THE LOCATION OF INTRODUCTION AND THE LOCATION OF WHERE FLOCCULATED MATERIAL WILL SETTLE? YES \square NO \square

¹Acreage for subdivision development includes areas disturbed by construction of roads, utilities and drainage. Additionally, a housesite of at least 10,000 ft² per lot (entire lot, if smaller) shall be included in calculating acreage disturbed.

DOCUMENTATION OF COMPLIANCE WITH OTHER REGULATIONS/REQUIREMENTS COVERAGE UNDER THIS PERMIT WILL NOT BE GRANTED UNTIL ALL OTHER REQUIRED MDEQ PERMITS AND APPROVALS ARE SATISFACTORILY ADDRESSED

TO THE PERSON AND THE PERSON OF THE PERSON O	TOE OTHER DEDMITS?	\/		
IS LCNOI FOR A FACILITY THAT WILL REQUI	IRE OTHER PERMITS:	YES □ NO 🄼		
IF YES, CHECK ALL THAT APPLY: AIR	☐ HAZARDOUS WASTE	□ PRETREATMENT		
\square water state operating \square	INDIVIDUAL NPDES	OTHER:		
IS THE PROJECT REROUTING, FILLING OR CROSSING A WATER CONVEYANCE OF ANY KIND? (If yes, contact the U.S. Army Corps of Engineers' Regulatory Branch for permitting requirements.) Permit NW 67 FR 6692-6695 IF THE PROJECT REQUIRES A CORPS OF ENGINEER SECTION 404 PERMIT, PROVIDE APPROPRIATE DOCUMENTATION THAT:				
The project has been approved by individual	permit, or			
 The work will be covered by a nationwide permit and NO NOTIFICATION to the Corps is required, or 				
The work will be covered by a nationwide or general permit and NOTIFICATION to the Corps is required				
IS A LAKE REQUIRING THE CONSTRUCTION OF A DAM BEING PROPOSED? (If yes, provide appropriate approval documentation from MDEQ Office of Land and Water, Dam Safety.)				
IF THE PROJECT IS A SUBDIVISION OR A COMMERCIAL DEVELOPMENT, HOW WILL SANITARY SEWAGE BE DISPOSED? Check one of the following and attach the pertinent documents.				
Existing Municipal or Commercial System. Please attach plans and specifications for the collection system and the associated "Information Regarding Proposed Wastewater Projects" form or approval from County Utility Authority in Hancock, Harrison, Jackson, Pearl River and Stone Counties. If the plans and specifications can not be provided at the time of LCNOI submittal, MDEQ will accept written acknowledgement from official(s) responsible for wastewater collection and treatment that the flows generated from the proposed project can and will be transported and treated properly. The letter must include the estimated flow.				
Collection and Treatment System will be Constructed. Please attach a copy of the cover of the NPDES discharge permit from MDEQ or indicate the date the application was submitted to MDEQ (Date:)				
☐ Individual Onsite Wastewater Disposal Systems for Subdivisions Less than 35 Lots. Please attach a copy of the Letter of General Acceptance from the Mississippi State Department of Health or certification from a registered professional engineer that the platted lots should support individual onsite wastewater disposal systems.				
☐ Individual Onsite Wastewater Disposal Syste feasibility of installing a central sewage collectoresponse from MDEQ concerning the feasibility is not feasible, then please attach a copy of the certification from a registered professional endisposal systems.	ction and treatment system must the lity study must be attached. If a case Letter of General Acceptance fr	entral collection and wastewater system om the State Department of Health or		
indicate any Local Storm Water Ordi	INANCE WITH WHICH THE PI	ROJECT MUST COMPLY:		

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.

Signature of Applicant (owner or prime contractor)

Dead Woldes

Printed Name¹

/-25-/7
Date Signed

Dwner

¹This application shall be signed 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, mayor, or ranking elected official

Please submit the LCNOI form to:

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

Jackson, Mississippi 39225

PRIME CONTRACTOR CERTIFICAT

LARGE CONSTRUCTION GENERAL PERMIT N

Coverage No. MSR10

County

(Fill in your Certificate of Coverage Number and County)



By completing and submitting this form to MDEQ, the prime contractor is certifying that (1) they have operational control over the erosion and sediment control specifications (including the ability to make modifications to such specifications) or (2) they have day-to-day operational control of those activities at the site necessary to ensure compliance with the SWPPP and applicable permit conditions.

The owner(s) of the property and the prime contractor associated with regulated construction activity on the property have joint and severable responsibility for compliance with the permit. Notwithstanding any permit condition to the contrary, the coverage recipient and any person who causes pollution of waters of the state or places waste in a location where they are likely to cause pollution of any waters of the state shall remain responsible under applicable federal and state laws and regulations and applicable permits.

PRIME CONTRACTOR INFORMATION				
PRIME CONTRACTOR CONTACT PERSON: David Movey Make PHONE NUMBER: (90) 853-6183				
PRIME CONTRACTOR COMPANY: DBA MONEY MIKER CONSTRUCTION				
The same and the same of the s				
PRIME CONTRACTOR STREET (P.O. BOX): 12 FOT STATE: MS ZIP: 38611				
E-MAIL ADDRESS:				
OWNER INFORMATION				
OWNER CONTACT PERSON: Brad Waldrop PHONE NUMBER: (901) \$ 489-4583 OWNER COMPANY NAME: Forest Ridge, LLC				
PROJECT INFORMATION				
PROJECT NAME: Force + Ridge Subdivision DESCRIPTION OF CONSTRUCTION ACTIVITY: Road + Ditch Repair; home building				
PHYSICAL SITE ADDRESS (If the physical address is not available indicate the nearest named road. For linear projects, indicate the beginning of the project and identify all counties the project traverses.)				
STREET: South of Gollege Rd, West of Bethel Rd, CITY: COUNTY: Desoto				
CITY:COUNTY:				
I certify that I am the prime contractor for this project and will comply with all the requirements in the above referenced general NPDUS permit. I further 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. Prime Contractor Signature Date Signed				
David Moneymaker Printed Name Title				
This annication shall be vigned as follows:				

application shall be signed 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, mayor, or ranking elected official.

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

Revised: 10/25/16