AI #69932



## PRIME CONTRACTOR CERTIFICATION

## LARGE CONSTRUCTION GENERAL PERMIT

Coverage No. MSR10 7 1 8 5 County Covington

(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.

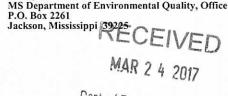
PRIME CONTRACTOR INFORMATION	
PRIME CONTRACTOR CONTACT PERSON: Clay Brocontine Contractor Company: T. L. Wallace Co	phone Number: 601,736-4525
PRIME CONTRACTOR COMPANY: 11 21 11 31 31 31 31 31 31 31 31 31 31 31 31	235 North
	MS 30420
PRIME CONTRACTOR CITY: Columbia	STATE: MS ZIP: 39429
E-MAIL ADDRESS: cbroom@tlwallace.com	
OWNER INF	FORMATION
OWNER CONTACT PERSON: John C. Taylor	PHONE NUMBER: (601)359-7250
OWNER COMPANY NAME: MDOT	
PROJECT IN	FORMATION
PROJECT NAME: HSIP-0008-02(105) US 49 Co	vington County
DESCRIPTION OF CONSTRUCTION ACTIVITY: Mainte	nance and Safety Upgrades
DESCRIPTION OF CONSTRUCTION ACTIVITY.	
PHYSICAL SITE ADDRESS (If the physical address is not ava indicate the beginning of the project and identify all counties the STREET: US 49 Covington County South to N	e project traverses.)
11. S. 10. Spanie	TY: Covington
I certify that I am the prime contractor for this project and will comply permit. I further certify under penalty of law that this document and a accordance with a system designed to assure that qualified personnel p my inquiry of the person or persons who manage the system, or those p information submitted is, to the best of my knowledge and belief, true, penalties for submitting false information, including the possibility of false.	all attachments were prepared under my direction or supervision in roperly gathered and evaluated the information submitted. Based on persons directly responsible for gathering the information, the accurate and complete. I am aware that there are significant
1/7/1	3-22-17
Prime Contractor Signature <sup>1</sup>	Date Signed
Clay Broom	Vice President
Printed Name <sup>1</sup>	Title
This application shall be signed as follows:	This Prime Contractors Cartification form shall be submitted to:

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



Revised: 10/25/16