

AI #26874
GinP20170001

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MDEQ



MISSISSIPPI DEPARTMENT OF
ENVIRONMENTAL QUALITY

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 0253

(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 INFORMATION

Owner Contact Name: Shiar Rahaim Position: President
Owner Company Name: Summit Environmental Group
Owner Street (P.O. Box): P.O. Box 3143
Owner City: Ridgeland State: MS Zip: 39158
Owner Phone Number (include area code): 601-927-4798

OPERATOR INFORMATION (if different than owner)

Operator Contact Name: _____ Position: _____
Operator Company Name: _____
Operator Street (P.O. Box): _____
Operator City: _____ State: _____ Zip: _____
Operator Phone Number (include area code): _____

PROJECT INFORMATION

Project Name: Fast Mart #20
Mississippi Groundwater Protection Trust Fund ID No. (if applicable): 3259
Physical Site Address (if not available indicate the nearest named road):
Street: 305 North Front Street City: Sandersville
County: Jones Zip: 39477
Latitude: 31 degrees 47 minutes 14 seconds Longitude: 89 degrees 01 minutes 55 seconds
Method Used to Determine Lat. & Long. (GPS (Please GPS Facility Entrance) or Map Interpolation): _____

WASTEWATER DISCHARGE INFORMATION

Where is the remediated groundwater proposed to be discharged? ☐ State Waters ☒ POTW/Collection System

Name of Nearest Receiving Stream: _____

Name of POTW: Town of Sandersville Water Department

POTW contact, title and telephone number: Wayne Dunston, Operator, 601-649-3068

Name of Wastewater Collection Authority (if different from POTW): _____

Wastewater Collection Authority contact, title and telephone number: Town of Sandersville, MS Water Dept.

Wayne Dunston, Operator 601-649-3068 P.O. Box 692, Sandersville, MS 39477 110 East Main Street

Proposed rate of flow (gallons/day): 15,000

Describe type of treatment: Air Stipping

CERTIFICATION

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.

Shiar Thomas Rahaim
Signature¹ (Must be signed by operator when different than owner)

5/25/17
Date Signed

Shiar Thomas Rahaim
Printed Name¹

President, Summit Environmental Group
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

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)

Summit Environmental Group, Inc. [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 305 North Front Street, Sandersville, MS
[complete address with county]. Approximately 10,000 [gallons per day] of treated groundwater will be discharged to Town of Sandersville [name of local POTW or Wastewater Collection Authority]. The treated groundwater will be discharged in accordance with the conditions, requirements and limitations of Mississippi's Underground Storage Tank Groundwater Remediation General Permit.

POTW and WASTEWATER COLLECTION AUTHORITY APPROVAL

I certify that I am a duly authorized representative of this POTW (or Collection Authority) and directly responsible for managing daily operations. I am familiar with the requirements of the above referenced General Permit and acknowledge that, by signing this form, I am providing MDEQ with written approval of this proposed discharge to our treatment works.

Wayne Dunston
POTW Authorized Signature

Wayne Dunston
Printed Name

Water and Sewer Supervisor
Title

5-4-17
Date Signed

601 649-3068
Daytime Telephone

C. Robert White
Collection Authority Authorized Signature

C. Robert White
Printed Name

Mayor Town of Sandersville
Title

5-4-17
Date Signed

601-283-0644
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

Revised: April 6, 2011