AI#37251 GnP20130001

REVISED

MSR10 6 3 4 2

(NUMBER TO BE ASSIGNED BY STATE)

			1 toma to	0 1 1/1	
APPLICANT IS THE:	☑ OWNER 🔲 I	PRIME CONTRACTOR	JUN	1 6 2017	
i Bair "Aradill	OWNER CONT.	ACT INFORMATION	Dept of Env	ironmental O	
OWNER CONTACT PERSON	: Duane Miller		3391.31 21171	neimental Q	
OWNER COMPANY LEGAL	NAME: D.R. Horton, Ir	nc Huntsville			
OWNER STREET OR P.O. BO					
OWNER CITY: Daphne		STATE: AL OWNER EMAIL: damiller@drhort		ZIP: 36526	
OWNER PHONE #: (251)	87-2327 ov	VNER EMAIL: damiller@drhc	orton.com		
		CONTACT INFORMATIO			
PRIME CONTRACTOR CONT	TACT PERSON: Duane	Miller			
PRIME CONTRACTOR COM					
PRIME CONTRACTOR STRE					
PRIME CONTRACTOR CITY	Daphne	STATE: AL	ZIP: 3	6526	
PRIME CONTRACTOR PHON	NE #: (²⁵¹) 487-2327 P	STATE: AL RIME CONTRACTOR EMAIL: C	damiller@drhor	ton.com	
	EACH ITV SI	TE INFORMATION			
FACILITY SITE NAME: D.R.		EINFORMATION			
		available, please indicate the nearest reproject traverses.)	named road. For lin	ear project	
CITY: Gulfport	STATE: MS	COUNTY:_Harrison	ZIP	: 39503	
FACILITY SITE TRIBAL LAN	D ID (N/A If not applicab	le):			
LAT & LONG DATA SOURCE	(GPS (Please GPS Project Entra	LONGITUDE: 88 degrees 8 nec/Start Point) or Map Interpolation): ht	tp://mapper.aci	me.com	
IS THIS PART OF A LARGER			YES □	NO E	
IF YES, NAME OF LARGER C AND PERMIT COVERA	OMMON PLAN OF DEV GE NUMBER: MSR10	ELOPMENT:			
ESTIMATED CONSTRUCTION PROJECT START DATE:		2013-03-07			
			YYYY-MM-DD		
ESTIMATED CONSTRUCTION PROJECT END DATE:		2021-12-31 YYYY-MM-DD			
DESCRIPTION OF CONSTRU	CTION ACTIVITY: Con	struction of Single Family Homes	in a Residential De	evelopmer	
	F PROPERTY USE AFTE	R CONSTRUCTION HAS BEEN			
	NAICS Code 2 3 6 1 1				

Levised MSR 1010342

	(1 st ()		1
NEAREST NAMED RECEIVING STREAM: Turkey Cre	ek and UT Turkey Creek	فسلفيف	
IS RECEIVING STREAM ON MISSISSIPPI'S 303(d) LIST BODIES? (The 303(d) list of impaired waters and TMDL st http://www.deq.state.ms.us/MDEQ.nsf/page/TWB_Total_Maxi	ream segments may be found on N	YES□ 1DEQ's web site:	NO☑
HAS A TMDL BEEN ESTABLISHED FOR THE RECEIV	ING STREAM SEGMENT?	YES□	NO☑
ARE THERE RECREATIONAL STREAMS, PRIVATE/POWITHIN 1/2 MILE DOWNSTREAM OF PROJECT BOUNDACTIVITY?	UBLIC PONDS OR LAKES DRY THAT MAY BE IMPACTE	YES□ D BY THE CONST	NO ☑ RUCTION
EXISTING DATA DESCRIBING THE SOIL (for linear prepareth fine sandy loom 2-5% slope, Ponzer and Smithton Soils	ojects please describe in SWPPP):		
WILL FLOCCULANTS BE USED TO TREAT TURBIDIT	Y IN STORM WATER?	YES□	No⊠
IF YES, INDICATE THE TYPE OF FLOCCULANT.	☐ ANIONIC POLYACRY	LIMIDE (PAM)	

 $^{^{1}}$ Acreage for subdivision development includes areas disturbed by construction of roads, utilities and drainage. Additionally, a housesite of at least 10,000 $\mathrm{ft^{2}}$ per lot (entire lot, if smaller) shall be included in calculating acreage disturbed.

Ruised NOR Ide 3412

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

IS LCNOI FOR A FACILITY THAT WILL REQUIRE 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 CONVEYANC OF ANY KIND? (If yes, contact the U.S. Army Corps of Engineers' Regulatory Branch for	E YES \(\square\) NO \(\square\) or permitting requirements.)
IF THE PROJECT REQUIRES A CORPS OF ENGINEER SECTION 404 PERMIT, PRODUMENTATION THAT:	OVIDE APPROPRIATE
 The project has been approved by individual permit, or 	
 The work will be covered by a nationwide permit and NO NOTIFICATION to the O 	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 Wa	YES □ NO ☑ ter, Dam Safety.)
IF THE PROJECT IS A SUBDIVISION OR A COMMERCIAL DEVELOPMENT, HOW BE DISPOSED? Check one of the following and attach the pertinent documents.	WWILL SANITARY SEWAGE
Existing Municipal or Commercial System. Please attach plans and specifications for associated "Information Regarding Proposed Wastewater Projects" form or approve Hancock, Harrison, Jackson, Pearl River and Stone Counties. If the plans and specification of LCNOI submittal, MDEQ will accept written acknowledgement from official(s) recollection and treatment that the flows generated from the proposed project can and properly. The letter must include the estimated flow.	val from County Utility Authority in ons can not be provided at the time esponsible for wastewater
☐ Collection and Treatment System will be Constructed. Please attach a copy of the copermit from MDEQ or indicate the date the application was submitted to MDEQ (D	over of the NPDES discharge olate:)
☐ Individual Onsite Wastewater Disposal Systems for Subdivisions Less than 35 Lots. of General Acceptance from the Mississippi State Department of Health or certifica engineer that the platted lots should support individual onsite wastewater disposal s	tion from a registered professional
Individual Onsite Wastewater Disposal Systems for Subdivisions Greater than 35 Le feasibility of installing a central sewage collection and treatment system must be ma response from MDEQ concerning the feasibility study must be attached. If a central is not feasible, then please attach a copy of the Letter of General Acceptance from the certification from a registered professional engineer that the platted lots should supplication systems.	de by MDEQ. A copy of the I collection and wastewater system ne State Department of Health or
INDICATE ANY LOCAL STORM WATER ORDINANCE WITH WHICH THE PROJE	CT MUST COMPLY:

Revised MSR Ich3412

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)

Date Signed

Duane Miller

NPDES Compliance Administrator

Title

Printed Name1

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