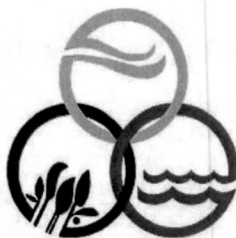


FILE #27081  
GNP20170001



MISSISSIPPI DEPARTMENT OF  
ENVIRONMENTAL QUALITY

RECEIVED  
JUL 21 2017  
Dept. 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 0256

(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 Activity (ACT) 9, T-4, page 19 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 Authority (see permit Activity 4, S-6, page 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 Activity 4, S-7, page 6.)
- 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), and aquatic species toxicological data.

We do not intend to use any water treatment chemicals. We will alert MDEQ if this changes.

**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: Mr. Clayton Hooks Position: Authorized Agent  
Owner Company Name: Blue Sky Corporation  
Owner Street (P.O. Box): Post Office Box 1578  
Owner City: Grenada, Mississippi State: MS Zip: 38902  
Owner Phone Number (include area code): (601) 551-5002

### OPERATOR INFORMATION (if different than owner)

Operator Contact Name: Walter E. Huff, P.E., BCEE Position: Senior Project Manager  
Operator Company Name: Neel-Schaffer, Inc.  
Operator Street (P.O. Box): 1022 Highland Colony Parkway, Suite 202  
Operator City: Ridgeland State: MS Zip: 39157  
Operator Phone Number (include area code): (601) 898-3358 (office)

### FACILITY INFORMATION

Facility Name: Blue Sky #709  
Mississippi Groundwater Protection Trust Fund Identification Number: 2170  
Physical Site Address (if not available indicate the nearest named road)  
Street: 7030 Highway 72 City: Walnut  
County: Tippah Zip: 38683  
Latitude: 34 degrees 57 minutes 06 seconds Longitude: 88 degrees 54 minutes 02 seconds  
Method Used to Determine Lat. & Long. (GPS (Please GPS Facility Entrance) or Map Interpolation): Map Interpolation

## WASTEWATER DISCHARGE INFORMATION

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

Name of Nearest Receiving Stream: NA

Name of Publicly Owned Treatment Works or Wastewater Authority: Town of Walnut

Proposed rate of flow (MGD): 0.003 to 0.02

POTW contact, title and telephone number: Mr. R. A. Scott, PE, Town Engineer, (662) 287-2436

treatment provided at any outfall? If so, describe: Dual Phase Remediation System-influent groundwater is initially treated by oil  
-water separator. Miscible phase impacted groundwater further treated by air stripping prior to discharge.

## 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.

B. Gregory Taylor

Signature<sup>1</sup> (Must be signed by operator when different than owner)

B. Gregory Taylor, RPG

Printed Name<sup>1</sup>

July 21, 2017

Date Signed

Senior Project Manager

Title

<sup>1</sup>This application shall be signed according to the General Permit, Activity 9, T-4, page 19, 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

April 29, 2008  
Page 3 of 3

# POTW OR WASTEWATER AUTHORITY NOTIFICATION AND APPROVAL FORM

POTW or Wastewater Authority notification and approval request to discharge remediated groundwater associated with a leaking Underground Storage Tank (UST) - see Activity 4, S-6, page 6.

## APPLICANT (please print or type)

Neel-Schaffer, Inc. \_\_\_\_\_ [name of applicant] is applying for coverage under Mississippi's Underground Storage Tank Groundwater Remediation General Permit [copy attached). Neel-Schaffer, Inc. \_\_\_\_\_ [name of applicant] is proposing to discharge remediated groundwater, associated with a leaking underground petroleum storage tank, from a site located at 7030 Highway 72, Tippah County, \_\_\_\_\_ Walnut, Mississippi 38683 \_\_\_\_\_ [complete address with county]. Approximately 0.003 to 0.02 \_\_\_\_\_ [proposed volume in MGD] of treated groundwater will be discharged to Town of Walnut \_\_\_\_\_ [name of local POTW or 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 or WASTEWATER AUTHORITY

The Mississippi Department of Environmental Quality (MDEQ) must receive approval from the local POTW or Wastewater Authority in order for the applicant to obtain coverage under Mississippi's Underground Storage Tank Groundwater Remediation General Permit. Coverage is required prior to discharging remediated groundwater to a POTW or Wastewater Authority. If you have any questions, please contact the Service and Miscellaneous Industries Branch at 601/961-5171.

I certify that I am a duly authorized representative of this POTW (or 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.

Vicki J. Skinner  
POTW (or Authority) Authorized Signature

6-15-17  
Date Signed

Vicki J. Skinner  
Printed Name

Mayor  
Title

662-223-4405  
Daytime Telephone