

AI #1374  
GNP20170001

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MDEQ



MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY

# READY-MIX CONCRETE NOTICE OF INTENT (RMCNOI) FOR COVERAGE UNDER MULTIMEDIA READY-MIX CONCRETE GENERAL NPDES PERMIT MSG11 0322

(NUMBER TO BE ASSIGNED BY STATE)

FILE AT LEAST 30 DAYS PRIOR TO THE COMMENCEMENT OF THE REGULATED INDUSTRIAL ACTIVITY

## INSTRUCTIONS

Applicant must be owner or operator (legal entity that controls the facility's operation, rather than the plant/site manager or environmental consultant). The owner or operator that receives coverage is responsible for permit compliance.

Submittals with this RMCNOI must include:

- A Storm Water Pollution Prevention Plan (SWPPP) addressing storm water associated with industrial activity, developed in accordance with the requirements of ACT13 of the General Permit
- A detailed site drawing showing the property layout and indicating the features outlined in ACT4, S-2 of the General Permit
- A United States Geological Survey (USGS) quadrangle map or photocopy, extending at least one-half mile beyond the facility property boundaries with the site location and outfalls outlined or highlighted. The name of the quadrangle map must be shown on all copies. Quadrangle maps can be obtained from the MDEQ, Office of Geology at 601-961-5523
- Plans and specifications for any wastewater treatment facilities necessary to achieve compliance with the requirements of this permit

Additional submittals that may be required with the RMCNOI:

- A Storm Water Pollution Prevention Plan (SWPPP) addressing storm water associated with construction activity, developed in accordance with the requirements of ACT19 of the General Permit.
- Appropriate Section 404 documentation
- If storm water discharges associated with construction activity are proposed, a detailed site drawing showing the property layout and indicating the features outlined in ACT4, S-3 of the General Permit.
- Where previous sampling and analyses have been performed, copies of any existing laboratory data for each process wastewater outfall and each stormwater outfall. If multiple sampling has been performed, provide a summary for each parameter, including sampling dates and the minimum, average and maximum values.

**ALL QUESTIONS MUST BE ANSWERED** (Answer "NA" if not applicable)

## OWNER INFORMATION

IS APPLICANT THE  OWNER  OPERATOR (Check one or both)

OWNER CONTACT NAME & POSITION: Mr. Les Howell, Vice President and Chief Engineer

OWNER COMPANY NAME: Delta Industries, Inc.

OWNER STREET OR P.O. BOX: P.O. Box 1292

OWNER CITY: Jackson STATE: MS ZIP: 39215

OWNER PHONE NUMBER (INCLUDE AREA CODE): 601-573-3933