



LARGE CONSTRUCTION GENERAL PERMIT FOR LAND DISTURBING ACTIVIES OF FIVE (5) OR MORE ACRES

RE-COVERAGE FORM

INSTRUCTIONS

The submittal of this form is required to receive coverage under the reissued Large Construction General Permit. This form must be completed and returned to the address printed at the bottom of the back page of this form within 30 days of the date of the Letter of Instruction for Re-Coverage.

The signatory of this form must be the owner or operator (prime contractor) who is the current coverage recipient (rather than the project manager or environmental consultant).

If the company seeking coverage is a corporation, a limited liability company, a partnership, or a business trust, attach proof of its registration with the Mississippi Secretary of State and/or its Certificate of Good Standing. This registration or Certificate of Good Standing must be dated within twelve (12) months of the date of the submittal of this coverage form.

Coverage will be issued in the company name as it is registered with the Mississippi Secretary of State.

Amendments to the Storm Water Pollution Prevention Plan (SWPPP) are required to be attached if the plan is not current or is ineffective in controlling storm water pollutants. <u>SWPPP amendments with the sole intent of incorporating new permit conditions do not need to be submitted to MDEO for review and/or approval.</u>

If the project is complete and final stabilization has been achieved, please request termination of coverage by completing the Request for Termination (RFT) Form found in the Large Construction Forms Package. Projects that continue to discharge storm water associated with construction activity without applicable permit coverage are in violation of state law.

Do not submit this form if submitting a Request for Termination (RFT) Form.

ALL INFORMATION REQUESTS MUST BE ANSWERED (Answer "NA" if not applicable)

COVERAGE RECIPIENT INFORMATION		
CONTACT NAME & POSITION: Mark D.	Utley, Managing Member	
COMPANY LEGAL NAME: WW3, LLC		
STREET OR P.O. BOX: P.O. Box 866		
CITY: Olive Branch	STATE: MS	ZIP: 38654
PHONE NUMBER: (662) 895-0099 E-MAIL: mark@utleyproperties.com		

FACILITY SITE INFORMATION	
FACILITY SITE NAME: Shady Oaks Subdivision Phase II	
CONTACT NAME & POSITION: Felix Rutledge, Jr. (Contractor)	
CONTACT PHONE NUMBER: (_662) 401-3180	
FACILITY PHYSICAL SITE ADDRESS (IF NOT AVAILABLE INDICATE NEAREST NAMED ROA	D):
STREET: Vermelle Drive	
CITY: Tupelo COUNTY: Lee	ZIP: 38804
PROVIDE THE COORDINATES OF THE PROJECT ENTRANCE OR START POINT:	
LATITUDE: 34 degrees 15 minutes 46.5 Geconds LONGITUDE: 88 degrees 48 minutes 48.5 LAT & LONG DATA SOURCE (GPS (Please GPS Project Entrance/Start Point) or Map Interpolation): TOTAL ACREAGE DISTURBED: 7.36 ESTIMATED CONSTRUCTION PROJECT EN	Map Interpolation ND DATE: _12/31/2017
	YYYY-MM-DD
STORM WATER POLLUTION PREVENTION PLAN (SWI THE GENERAL PERMIT REQUIRES THE SWPPP TO BE ONSITE, UP-TO-DATE AND EFFECTIVE WATER POLLUTANTS. ACCORDINGLY, THE FOLLOWING QUESTIONS MUST BE ANSWERED RECOVERAGE.	E IN CONTROLLING STORM
1. IS A COPY OF THE SWPPP AT THE PERMITTED SITE OR LOCALLY AVAILABLE?	X YES NO
2. DOES SWPPP CONTAIN AN UP-TO-DATE ASSESSMENT OF POTENTIAL STORM WATER POLLUTANT SOURCES AND IDENTIFY BMPS TO EFFECTIVELY CONTROL THEM?	X. YES NO
 IF A SEDIMENT BASIN IS A PROJECT BMP, IS IT EQUIPPED WITH AN OUTLET STRUCTURE THAT DISCHARGES <u>ONLY</u> FROM THE SURFACE OF THE BASIN (ACT5, T-6 (A))? 	X YES OF N.A. NO
4. DOES SWPPP PROHIBIT THE DISCHARGES LISTED IN ACT2, T-3 (3) OF THE PERMIT?	X YES NO
5. DOES THE SWPPP REQUIRE VEGETATIVE PRACTICES TO BE INITIATED IMMEDIATELY WHEN A DISTURBED AREA WILL BE LEFT FOR 14 DAYS (ACT5, T-4 (1)), INSTEAD OF 7 DAYS AS REQUIRED BY THE PREVIOUS PERMIT?	X YESNO
certify under penalty of law that this document and all attachments were prepared under my direction or system designed to assure that qualified personnel properly gathered and evaluated the information submitted erson or persons who manage the system, or those persons directly responsible for gathering the information best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penaltormation, including the possibility of fines and imprisonment for knowing violations. Surther certify that the project continues as described in the original notice of intent. Also, I certify that I werminated I am no longer authorized to discharge storm water associated with construction activity under that discharging pollutants associated with construction activity to waters of the State without proper permitive.	ed. Based on my inquiry of the on, the information submitted is, to alties for submitting false understand when coverage is his general permit. I understand
am aware of the significant changes in the renewed Large Construction Storm Water General Permit and cas been modified to incorporate these changes. Date Signed	certify the SWPPP for this project
Mark D. Utley Managing Men	nber
Inted Name ¹ Title	
his application for re-coverage shall be signed according to ACT11, T-7 of the General Permit, 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.

After signing please mail to:

Chief, Environmental Permits Division, MS Department of Environmental Quality, Office of Pollution Control P.O. Box 2261 Jackson, Mississippi 39225

Revised: 02/28/2017