PRIME CONTRACTOR CERTIFICATION

LARGE CONSTRUCTION GENERAL PERMIT

Coverage No. MSR10 7 4 9 5 County LaFaye # e

(Fill in your Certificate of Coverage Number and County)



By completing and submitting this form to MDEQ, the prime contractor is certifying that (1) they have operational control over the erosion and sediment control specifications (including the ability to make modifications to such specifications) or (2) they have day-to-day operational control of those activities at the site necessary to ensure compliance with the SWPPP and applicable permit conditions.

The owner(s) of the property and the prime contractor associated with regulated construction activity on the property have joint and any person who causes pollution of waters of the state or places waste in a location where they are likely to cause pollution of any waters of the state shall remain responsible under applicable federal and state laws and regulations and applicable permits. PRIME CONTRACTOR INFORMATION

PRIME CONTRACTOR COMPANY: PRIME CONTRACTOR COMPANY: MALLE	faul'S PHONE NUMBER (12 CV CV
PRIME CONTRACTOR COMPANY: M+N Excava	tors . TNC
PRIME CONTRACTOR STREET (P.O. BOX): 2489	
PRIME CONTRACTOR CITY: Oxford	STATE MS 70 3015
E-MAIL ADDRESS: MN Excavators @ live. Com	JAIL. 713 ZIP: 38635
	FORMATION
OWNER CONTACT PERSON: Jeff Busby	PHONE MUMPER ///2 22/ 22/2
OWNER COMPANY NAME: Lafagette County	Board of Supervisors
PROJECT IN	FORMATION
PROJECT NAME: Sisk Avenue Extens	ded
DESCRIPTION OF CONSTRUCTION ACTIVITY: Gra	de, drain, base and pave for roadway
PHYSICAL SITE ADDRESS (If the physical address is not avais indicate the beginning of the project and identify all counties the STREET: Sisk Avenue	project traverses.)
CITY: Oxford COUNT	Y: Lafayette
l certify that I am the prime contractor for this project and will comply permit. I further certify under penalty of law that this document and al accordance with a system designed to assure that qualified personnel pr my inquiry of the person or persons who manage the system, or those peinformation submitted is, to the best of my knowledge and belief, true, a penalties for submitting false information, including the possibility of fin	operly gathered and evaluated the information submitted. Based on ersons directly responsible for gathering the information the
Prime Contractor Signature	1D-23-2017 Date Signed
/	Date Signed
Printed Name	Plesident Title
This application shall be signed as follows:	This Direction Co. 1
For a corporation, by a responsible corporate officer. For a partnership, by a general partner.	This Prime Contractors Certification form shall be submitted to:
For a sole proprietorship, by the proprietor. For a municipal, state or other public facility, by principal, and	Chief, Environmental Permits Division MS Department of Environmental Quality, Office of Pollution Control P.O. Roy 2261
officer, mayor, or ranking elected official.	P.O. Box 2261

Jackson, Mississippi 39225

Dept. of Environmental Quality