AT#53304

Environmental Permits for Industrial Facilities Request for Transfer of Permit, General Permit Coverage and/or Name Change

Instructions: For Ownership Change-Complete all Items on Page 1 (except Item VIII) and Page 2 (reverse side).

Note-This form should be submitted to MDEO when a transferred data is facility.

Item I. Note-This form should be submitted to MDEO whe	en a transferal date is finalized but prior to the actual transfer.
Facility Nome:	Item II.
7 70113 31.	
Docation. (Do Not Use P.O. Box)	Responsible official after transfer or name change: Michael Gowdy
Street: County Road 992	Name: Marker WG Construction Company, Inc
City: +VKQ State: MS Zin: 38952	
County: Tishomingo	Mailing Address: Street/P.O. Box: 12051 Hwy 4 Fast
Telephone:	City: Lipley State: US Zip: 38663 Telephone 662 - 837 - 8811 Item IV.
Item III.	Telephone 662 - 827 - 881
Previous Permittee! George Lyons, Jr.	
Mailing Address:	New Permittee': WG Construction Company, Inc.
	Mailing Address:
Street/P.O. Box: Po Box 272	
City: Planters ville State: MS Zip: 38862	Street/P.O. Box: 12051 Hwy 4 Eqst
Telephone: (662) 871-1502	State: MS Zip: 38663
Item V	receptione:
Industrial Activity SIC Code: 1442	Item VI.
Brief Description: Corrently inactive clay	Will Facility Operations Change? Yes No
3	If yes, the appropriate applications and permits may require modification prior to change.
Item VII.	
Will Facility Name Change? Yes No	Item VIII
If Yes, Provide New Name for Permit Coverage	Signature for Name Change
New Name: WG Tishomingo	Print Name:
112.0	Authorized Signature ² :
Item IX	Title:
We the undersigned request transfer of permit(a)	Date:
We the undersigned request transfer of permit(s) and/or permit covering George Lyons, Jr. To: WG Construction Company, Inc. By signature below the recipients of the signature below the recipients.	rerage(s) listed on the backside of this form.
To: ING CONTINUES	
construction Company, Inc.	Acquisition Date: 9/20/17
By signature below, the recipient certifies that: 1) they are aware of the mount	420/11
By signature below, the recipient certifies that: 1) they are aware of the requirements of the permit(s). 2) the applicant can demonstrate to the Permit The transfer of the permit(s) or permit coverage(s) will be by written notification for the permit coverage(s) be transferred to the submittal of information.	
this document. By signature below, the previous permittee is requesting that the permit(s) and/or permit coverage(s) listed on the back of submittal of information regarding financial capability and past compliance history of the recipient.	
The compitance in	story of the recipient
Pr	int Previous Permittee' Name
- LILATINE VIOLATION	M Carrier Name
New Authorized Signature	evious Authorises see the
Vice-pres. 11/7/17	Tamorized Signature
Title Date Ti	Owner 11/7/17
A Permittee is a company or individual that has been issued an individual	Date
A Permittee is a company or individual that has been issued an individual permit or coverage under a general permit. Authorized Signature must be owner or in the case of a corporation, a corporate officer as defined in Regulations APC-S-2 and WPC-1. Page 1 of 2	
Page 1 of 2	SEPTEMBER 2000
	SELLEVIDER Z000

Mississippi Department of Environmental Quality/Office of Pollution Control P.O. Box 2261 Jackson, Mississippi 39225

(601) 961-5171

(601) 701-31/1	
Item X. Storm Water	Item XI. Hazardous Waste ID Number
(Check One)	Number Number
A Storm Water Pollution Prevention Plan (SWPPP) is not required for the site.	EPA ID No.
The recipient certifies that they have received a copy of the Office of Pollution Control approved SWPPP from the original owner. The recipient is submitting a new SWPPP, which is attached to this form. A copy of the SWPPP cannot be obtained from the original owner.	(Check One) An EPA Hazardous Waste ID Number is not required for the site. The site's EPA ID Number is listed above and a Notification of Regulated Waste Activity Form is attached.
Item XII. Permit(s) and/or	Coverage(s) to be Transferred
Permit Type: Mining Stormwater GeneralPerm:	Permit Type:
Permit/Coverage No.: MSR 321995	Permit/Coverage No.:
Permit Issuance Date: 5/26/2010	Permit Issuance Date:
Date of General Permit Coverage: 5/26/2010	Date of General Permit Coverage:
Permit Expiration Date: 8/31/2017	Permit Expiration Date:
Permit Type:	Permit Type:
Permit/Coverage No.:	Permit/Coverage No.:
Permit Issuance Date:	Permit Issuance Date:
Date of General Permit Coverage:	Date of General Permit Coverage:
Permit Expiration Date:	Permit Expiration Date:
Permit Type:	Permit Type:
Permit/Coverage No.:	Permit/Coverage No.:
Permit Issuance Date:	Permit Issuance Date:
Date of General Permit Coverage:	Date of General Permit Coverage:
Permit Expiration Date:	Permit Expiration Date:
Permit Type:	OTHER INFORMATION:
Permit/Coverage No.:	
Permit Issuance Date:	
Date of General Permit Coverage:	
Permit Expiration Date:	
Page 2 o	f2 SEPTEMBER 2000