

RECEIVED DEC 19 2017

Dept. of Environmental Quality

LARGE CONSTRUCTION NOTICE OF INTENT (LCNOI) FOR COVERAGE UNDER THE LARGE CONSTRUCTION STORM WATER GENERAL NPDES PERMIT

INSTRUCTIONS

The Large Construction Notice of Intent (LCNOI) is for coverage under the Large Construction General Permit for land disturbing activities of five (5) acres or greater; or for land disturbing activities, which are part of a larger common plan of development or sale that are initially less than five (5) acres but will ultimately disturb five (5) or more acres. Applicant must be the owner or operator. For construction activities, the operator is typically the prime contractor. The owner(s) of the property and the prime contractor associated with regulated construction activity on the property have joint and severable responsibility for compliance with the Large Construction Storm Water General Permit MSR10.

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.

Completed LCNOIs should be filed at least thirty (30) days prior to the commencement of construction. Discharge of storm water from large construction activities without written notification of coverage is a violation of state law.

Submittals with this LCNOI must include:

- · A site-specific Storm Water Poliution Prevention Plan (SWPPP) developed in accordance with ACT5 of the General Permit
- A detailed site-specific scaled drawing showing the property layout and the features outlined in ACT5 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.

Additional submittals may include the following, if applicable:

- Appropriate Section 404 documentation from U.S. Army Corps of Engineers
- Appropriate documentation concerning future disposal of sanitary sewage and sewage collection system construction
- Appropriate documentation from the MDEQ Office of Land & Water concerning dam construction and low flow requirements
- · Approval from County Utility Authority in Hancock, Harrison, Jackson, Pearl River and Stone Counties

ALL QUESTIONS MUST BE ANSWERED (Answer "NA" if the question is not applicable)

MSR10 7 606

(NUMBER TO BE ASSIGNED BY STATE)

| | ✓ OWNER | | | |
|--|--|--|---|----------------------|
| | OWNER CO | NTACT INFORMATION | | |
| OWNER CONTACT PERSON: Se | cott Gideon | | | |
| OWNER COMPANY LEGAL NAI | | Development, LLC | | |
| OWNER STREET OR P.O. BOX: | | | | |
| Madison | | 1.24 | 0. | 0440 |
| OWNER CITY: Madison OWNER PHONE #: (601) 750- | 5111 | STATE: MS | ZIP: 3! | 9110 |
| OWNER PHONE #: | | OWNER EMAIL: 910001122 | 70@gmail.com | |
| | | OR CONTACT INFORMA | ATION | |
| PRIME CONTRACTOR CONTAC | T PERSON: Sco | tt Gideon | | |
| PRIME CONTRACTOR COMPAN | Y LEGAL NAME | . Westlake Development, Li | LC | |
| PRIME CONTRACTOR STREET | OR P.O. BOX: 12 | 24 Madison Plaza, Ste. 15 | 000 | |
| PRIME CONTRACTOR CITY: M. PRIME CONTRACTOR PHONE # | adison | STATE: MS | 71p. 3 | 9110 |
| PRIME CONTRACTOR PHONE # | (601) 750-5111 | PRIME CONTRACTOR EM | au gideon2270@g | mail.com |
| | | | | |
| | FACILITY: | SITE INFORMATION | | |
| | | The state of the s | | |
| FACILITY SITE NAME: Westiake, | Phase 1 | | | |
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| IS RECEIVING STREAM ON MISSISSIPPI'S 303(d) L BODIES? (The 303(d) list of impaired waters and TMDI http://www.deq.state.ms.us/MDEQ.nsf/page/TWB_Total_M | IST OF IMPAIRED WATER stream segments may be found on faximum Daily Load Section) | YES MDEQ's web site: | NO |
|---|---|-------------------------|------------|
| HAS A TMDL BEEN ESTABLISHED FOR THE RECE | IVING STREAM SEGMENT? | YES | NO |
| ARE THERE RECREATIONAL STREAMS, PRIVATE WITHIN ½ MILE DOWNSTREAM OF PROJECT BOUACTIVITY? | PUBLIC PONDS OR LAKES UNDRY THAT MAY BE IMPACTE | YES Z ED BY THE CONS | NO TRUCTIO |
| | | | |
| EXISTING DATA DESCRIBING THE SOIL (for linear | | | |
| EXISTING DATA DESCRIBING THE SOIL (for linear sity Clay (CL) WILL FLOCCULANTS BE USED TO TREAT TURBID | projects please describe in SWPPP) | | NOZ |
| EXISTING DATA DESCRIBING THE SOIL (for linear Silty Clay (CL) | projects please describe in SWPPP) | : YES□ | |

Acreage for subdivision development includes areas disturbed by construction of roads, utilities and drainage. Additionally, a housesite of at least 10,000 ft² per lot (entire lot, if smaller) shall be included in calculating acreage disturbed.

DOCUMENTATION OF COMPLIANCE WITH OTHER REGULATIONS/REQUIREMENTS COVERAGE UNDER THIS PERMIT WILL NOT BE GRANTED UNTIL ALL OTHER REQUIRED MDEQ PERMITS AND APPROVALS ARE SATISFACTORILY ADDRESSED

| IS LCNO | OI FOR A FACILITY THAT WILL | REOL | IRE OTHER PERMITS? | | | |
|----------------|--|---------------------|--|----------------------------|---|---------------------|
| | | | THE OTHER PERMITS: | | YES 🗆 | NO Z |
| IF YES, | CHECK ALL THAT APPLY: | AIR | ☐ HAZARDOUS WASTE | | PRETREATME | NT |
| | WATER STATE OPERATING | | INDIVIDUAL NPDES | | | |
| IS THE I | PROJECT REROUTING, FILLING KIND? (If yes, contact the U.S. Ar | G OR Comy Cor | ROSSING A WATER CONVE ps of Engineers' Regulatory Br | YANCE anch for po | | NO 🗆 |
| IF THE I | PROJECT REQUIRES A CORPS (ENTATION THAT: | F ENG | SINEER SECTION 404 PERMI | T, PROVI | DE APPROPRIAT | |
| • Th | e project has been approved by indi | vidual p | permit, or | | | |
| | e work will be covered by a nationw | | | | | |
| • The | e work will be covered by a nationw | ide or g | eneral permit and NOTIFICAT | TON to the | e Corps is required | 1 |
| IS A LAK | E REQUIRING THE CONSTRUCTION OF THE CONSTRUCTI | TION | OF A DAM BEING PROPOSE | | | NO 🖸 |
| IF THE P | ROJECT IS A SUBDIVISION OR OSED? Check one of the following a | A COM | MEDCIAL DEVELOPMENT | | | EWAGE |
| Han of L | sting Municipal or Commercial Systemation Regarding Proceeds, Harrison, Jackson, Pearl River as CNOI submittal, MDEQ will accept and treatment that the flows perly. The letter must include the experience of the commercial systematics and treatment that the flows perly. | d Stone t writte | Counties. If the plans and speci n acknowledgement from officia | pproval fri fications c | om County Utility A an not be provided | at the time |
| Coli | lection and Treatment System will be mit from MDEQ or indicate the date | e Const | tructed. Please attach a copy of plication was submitted to MDI | the cover of Q (Date: | of the NPDES disch | arge |
| □ Indi of G | vidual Ousite Wastewater Disposal eneral Acceptance from the Mississ neer that the platted lots should sup | System | s for Subdivisions Less than 35 | Lots. Pleas | e attach a copy of | |
| is no certi | vidual Onsite Wastewater Disposal ibility of installing a central sewage onse from MDEQ concerning the fet feasible, then please attach a copy fication from a registered professional systems. | asibility | study must be attached. If a co | e made by entral colle | MDEQ. A copy of ction and wastewa | f the ter system |
| INDICATE | E ANY LOCAL STORM WATER (| PRDINA | ANCE WITH WHICH THE PR | OJECT M | IUST COMPLY: | |
| | | | | | | |
| | | | | | | |

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 imprisonments.

Signature of Applicant (owner or prime contractor)

10-23-17

Date Signed

Scott Gideon

Printed Name

Manager

Title

This application shall be signed 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

Please submit the LCNOI form to:

Chief, Environmental Permits Division

MS Department of Environmental Quality, Office of Pollution Control

P.O. Box 2261

Jackson, Mississippi 39225

PRIME CONTRACTOR CERTIFICATION

LARGE CONSTRUCTION GENERAL PERMIT

Coverage No. MSR10

County

(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 severable responsibility for compliance with the permit. Notwithstanding any permit condition to the contrary, the coverage recipient 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.

| abburrane teneral and state | taws and regulations and applicable permits. |
|---|--|
| PRIME CONTRAC | TOR INFORMATION |
| PRIME CONTRACTOR CONTACT PERSON: Scott Gid | eon PHONE NUMBER: (801) 750-5111 |
| PRIME CONTRACTOR COMPANY: Westlake Develo | pment, LLC |
| PRIME CONTRACTOR STREET (P.O. BOX): 124 One | |
| PRIME CONTRACTOR CITY: Madison | STATE: MS ZIP: 39110 |
| E-MAIL ADDRESS: gideon2270@gmail.com | STATE: ZIP: JOHN |
| OWNER IN | FORMATION |
| OWNER CONTACT PERSON: Scott Gideon | PHONE NUMBER: (601) 750-5111 |
| OWNER COMPANY NAME: Westlake Development, | LLC |
| PROJECT IN | FORMATION |
| PROJECT NAME: Westlake, Phase 1 | |
| & utilities PHYSICAL SITE ADDRESS (If the physical address is not avindicate the beginning of the project and identify all counties the | |
| indicate the beginning of the project and identify all counties the STREET: Dewees Road | e project traverses.) |
| CITY: Madison COUN | TY: Madison |
| I certify that I am the prime contractor for this project and will complete permit. I further certify under penalty of law that this document and accordance with a system designed to assure that qualified personnel pmy inquiry of the person or persons who manage the system, or those information afformitted is, to the best of my knowledge and belief, true, penalties for submitting falsy information, including the possibility of false. | roperly gathered and evaluated the information submitted. Based on sersons directly responsible for gathering the information, the accurate and complete. I am aware that there are significant ine and imprisonment for knowing violations. |
| Prime Contractor Signature | 10-23-17 |
| Scott Gideon | Date Signed |
| Printed Name ¹ | Member |
| This application shall be signed 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. | This Prime Contractors Certification form shall be submitted to: Chief, Environmental Permits Division MS Department of Environmental Quality, Office of Pollution Control P.O. Box 2261 Jackson, Mississippi 39225 |

Revised: 10/25/16