

## MSR10 7 6 4 0

(NUMBER TO BE ASSIGNED BY STATE)

			OR .		
		CT INFORMATION		7-1	
OWNER CONTACT PERSON: Mr. Ke	eith Jones				
OWNER COMPANY LEGAL NAME:	MS Construct	ion, LLC			
OWNER STREET OR P.O. BOX: 569			)		
				ZIP: 354	73
OWNER PHONE #: (205)469-152	29 own	NER EMAIL:			
PRIME CO	ONTRACTOR (	CONTACT INFORM	IATION		
PRIME CONTRACTOR CONTACT PE	RSON: (Same	as Above)			
PRIME CONTRACTOR COMPANY LI					
PRIME CONTRACTOR STREET OR F					
PRIME CONTRACTOR CITY:					
PRIME CONTRACTOR PHONE #: (					
J	FACILITY SITE	INFORMATION			
FACILITY SITE NAME: The Vista - St	arkville				
FACILITY SITE ADDRESS (If the physical indicate the beginning of the project and ide	ical address is not ava	ailable, please indicate the project traverses.)	nearest named ro	ad. For lines	ar projects
STREET: 703 University Drive	Э				
CITY: Starkville S	TATE: MS		beha	ZIP:3	9759
		NI/A			
LATITUDE: 33 degrees 27 minutes  LAT & LONG DATA SOURCE (GPS (Ple	38 seconds LO	ONGITUDE: 88 degree			S
LATITUDE: 33 degrees 27 minutes  LAT & LONG DATA SOURCE (GPS (Ple  TOTAL ACREAGE THAT WILL BE D	seconds LC asse GPS Project Entrance ISTURBED 1: 7.2	ONGITUDE: 88 degree	ation): Google		
LATITUDE: 33 degrees 27 minutes  LAT & LONG DATA SOURCE (GPS (Ple  TOTAL ACREAGE THAT WILL BE D  IS THIS PART OF A LARGER COMM	38 seconds LO rase GPS Project Entrance ISTURBED 1: 7.2 ON PLAN OF DEVE N PLAN OF DEVE	ONGITUDE: 88 degree de/Start Point) or Map Interpola	ation): Google	Earth	
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MEAREST NAMED RECEIVING STREAM: CHITCHIE	Tributary to Sand Creek		
IS RECEIVING STREAM ON MISSISSIPPI'S 303(d) LIS BODIES? (The 303(d) list of impaired waters and TMDL shttp://www.deq.state.ms.us/MDEQ.nsf/page/TWB_Total_Max	troom comments may be f. 1	YES□ MDEQ's web site:	NO
HAS A TMDL BEEN ESTABLISHED FOR THE RECEIVE	VING STREAM SEGMENT?	YES□	NO
ARE THERE RECREATIONAL STREAMS, PRIVATE/PWITHIN ½ MILE DOWNSTREAM OF PROJECT BOUN ACTIVITY?	PUBLIC PONDS OR LAKES IDRY THAT MAY BE IMPACTE	YES□ D BY THE CONS	NO □ TRUCTION
FXISTING DATA DESCRIPING THE SOUL OF THE			
EXISTING DATA DESCRIBING THE SOIL (for linear processity clay loam, Oktibbeha soils	rojects please describe in SWPPP):		
Oktibbeha silty clay loam, Oktibbeha soils  WILL FLOCCULANTS BE USED TO TREAT TURBIDIT		YES₽	NO 🗆
say way roun, shabona sons		YES₽	NO

Acreage for subdivision development includes areas disturbed by construction of roads, utilities and drainage. Additionally, a housesite of at least 10,000 ft<sup>2</sup> 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 LCNOI FOR A FACILITY THAT WILL REQUIRE OTHER PERMITS?	
	YES □ NO Ø
IF YES, CHECK ALL THAT APPLY: AIR HAZARDOUS WAS	STE PRETREATMENT
□ WATER STATE OPERATING □ INDIVIDUAL NPDES	OTHER:
IS THE PROJECT REROUTING, FILLING OR CROSSING A WATER CON- OF ANY KIND? (If yes, contact the U.S. Army Corps of Engineers' Regulatory	
IF THE PROJECT REQUIRES A CORPS OF ENGINEER SECTION 404 PER DOCUMENTATION THAT:	MIT, PROVIDE APPROPRIATE
<ul> <li>The project has been approved by individual permit, or</li> </ul>	
The work will be covered by a nationwide permit and NO NOTIFICATION	N to the Corps is required, or
The work will be covered by a nationwide or general permit and NOTIFIC	ATION to the Corps is required
IS A LAKE REQUIRING THE CONSTRUCTION OF A DAM BEING PROPOSITION (If yes, provide appropriate approval documentation from MDEQ Office of Land	and Water, Dam Safety.)
IF THE PROJECT IS A SUBDIVISION OR A COMMERCIAL DEVELOPMEN BE DISPOSED? Check one of the following and attach the pertinent documents.	NT, HOW WILL SANITARY SEWAGE
Existing Municipal or Commercial System. Please attach plans and specific associated "Information Regarding Proposed Wastewater Projects" form of Hancock, Harrison, Jackson, Pearl River and Stone Counties. If the plans and sp of LCNOI submittal, MDEQ will accept written acknowledgement from off collection and treatment that the flows generated from the proposed project properly. The letter must include the estimated flow.	ecifications can not be provided at the time
Collection and Treatment System will be Constructed. Please attach a copy permit from MDEQ or indicate the date the application was submitted to M	DEQ (Date:
Individual Onsite Wastewater Disposal Systems for Subdivisions Less than of General Acceptance from the Mississippi State Department of Health or engineer that the platted lots should support individual onsite wastewater disposal support individual	35 Lots. Please attach a conv of the Letter
Individual Onsite Wastewater Disposal Systems for Subdivisions Greater the feasibility of installing a central sewage collection and treatment system must response from MDEQ concerning the feasibility study must be attached. If it is not feasible, then please attach a copy of the Letter of General Acceptance certification from a registered professional engineer that the platted lots should be a systems.	an 35 Lots. A determination of the at be made by MDEQ. A copy of the a central collection and wastewater system.
INDICATE ANY LOCAL STORM WATER ORDINANCE WITH WHICH THE	PROJECT MUST 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

Signature of Applicant<sup>1</sup> (owner or prime contractor)

Date Signed

Printed Name

Manage -

<sup>1</sup>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



#### DELBERT HOSEMANN Secretary of State

#### Office of the Secretary of State Jackson, Mississippi

### Certificate of Good Standing

I, C. DELBERT HOSEMANN, JR., Secretary of State of the State of Mississippi, and as such, the legal custodian of the records as required by The Mississippi Registration of Foreign Limited Liabilities Company Act to be filed in my office do hereby certify:

#### THE VISTA - STARKVILLE, LLC

Registered the 18th day of December, 2017

A Delaware LIMITED LIABILITY COMPANY has filed the necessary documents in this office and has obtained a certificate of registration to do business in this state, under the provisions of The Mississippi Registration of Foreign Limited Liability Companies Act as shown by the records in this office.

I further certify that said Limited Liability Company has filed in this office an appointment of registration for service of process, with written acceptance endorsed thereon, and/or power of attorney, designating its agent and/or attorney for service of process in this State

NATIONAL REGISTERED AGENTS INC 645 Lakeland East Drive, Suite 101 Flowood, MS 39232

I further certify that said Limited Liability Company has paid the fees for filing the above papers required by law as shown by the records of this office, and that said Limited Liability Company is in good standing to do business in Mississippi at this time.

> Given under my hand and seal of office the 8th day of February, 2018

C. Delbert Hosemann, IR

Secretary of State

Certificate Number: CN18048103

Verify this certificate online at http://corp.sos.ms.gov/corpconv/verifycertificate.aspx