



WET DECK LOG SPRAY WITH RECIRCULATION NOTICE OF INTENT

FOR COVERAGE UNDER WET DECK LOG SPRAY WITH RE-CIRCULATION GENERAL NPDES PERMIT MSG17 0 0 9 6

(NUMBER TO BE ASSIGNED BY STATE)

FILE AT LEAST 30 DAYS PRIOR TO THE COMMENCEMENT OF THE REGULATED INDUSTRIAL ACTIVITY

INSTRUCTIONS

Submittals with this Notice of Intent (NOI) must include an United States Geological Survey (USGS) quadrangle map (or a copy) showing site location and extending at least ½ mile beyond the site's property boundary and a drawing showing the dimensions of the wet deck recirculation pond(s) and the timber wet storage area(s). Maps can be obtained from the MDEQ, Office of Geology at 601-961-5523.

For new or expanding facilities, detailed plans and specifications must be submitted for the wet deck log spray recirculation pond(s) by a registered Professional Engineer. Also, contiguous landowner notification forms, the proof of publication in a local newspaper, and the acceptance letter from a local library must also be provided as outlined in Activity 4, Conditions S-2 and S-3 of the general permit.

As part of this NOI, if applicable, all previously approved boiler chemical additive approval notifications must be submitted. At a minimum, the exact name of the chemical, the date of the facility's notification submittal, and MDEQ's approval letter must be provided.

If the company seeking permit coverage is a corporation, a limited liability company, a partnership, or a business trust, then 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 this submittal. Coverage will be issued to the company name as it is registered with the Mississippi Secretary of State.

All INFORMATION REQUESTS MUST BE ANSWERED (answer "NA" if not applicable)

THE APPLICANT IS OWNER OR OPERATOR? (CHECK ONE OR BOTH)

OWNER INFORMATION

O WITE THE STATE OF THE STATE O
Owner Contact Name & Position: Dipen Shah - Managing membel.
Owner Company Name: _ Maple Land and timber LLC
Owner Street or (P.O. Box): 257 Highway 36
Owner City: Baldwan State: MS _ Zip: 38824
Owner Phone Number (Include Area Code): _ 617-550-5152, 462-365-8155

WET DECK LOG SPRAY RECIRCULATION SYSTEM INFORMATION

F0108

2018135507

Fee: \$



DELBERT HOSEMANN Secretary of State

Secretary of State

Business ID: 1008927 Filed: 04/07/2018 02:16 PM C. Delbert Hosemann, Jr. Secretary of State

TELEPHONE: (601) 359-1633

2018 LLC Annual Report

Business Information

Business ID: 1008927

Business Name: Maple Land and Timber LLC

State of Incorporation: MS

P.O. BOX 136

JACKSON, MS 39205-0136

Business Email: rathin@aol.com

Phone: (***)***-***

FEIN: **_*****

Principal Address:

257 Hwy 30 West

Baldwyn, MS 38824

Registered Agent

Name:

Smallwood, William C, III

Address:

209 North Madison Street PO Box936

Tupelo, MS 38802

Managers and Members

Managers

Name:

Address:

Dipen Shah Manager 10576 ARCOLE COURT WELLINGTON, FL 33449

Officers		
Title/Name:	Address:	Director:
President:		
Vice President:		
Secretary:		
Treasurer:		
☐ This LLC has a written Operation	ng Agreement.	
NAICS Code/Nature of Business		
321113 - Sawmills		
321113 - Sawmills		
321113 - Sawmills		

Signature

Officare

By entering my name in the space provided, I certify that I am authorized to file this document on behalf of this entity, have examined the document and, to the best of my knowledge and belief, it is true, correct and complete as of this day 04/07/2018.

Name:	Address:	
Dipen Shah	10576 Arcole Court	
Manager	Wellington, FL 33449	

Officers List

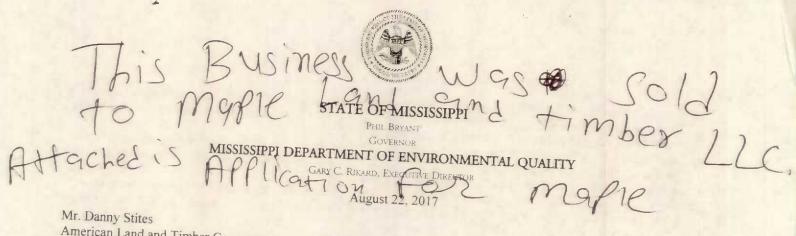
Name:

Dipen M Shah Organizer

Dipen Shah Manager Address:

10576 ARCOLE COURT WELLINGTON, FL 33449

10576 ARCOLE COURT WELLINGTON, FL 33449



American Land and Timber Company 257 Highway 30 West Baldwyn, MS 38824

Dear Mr. StiteRFCEIVED APR 1 2 2018

Dept. of Environmental Quality

American Land and Timber Company

Wet Deck Log Spray General Permit Letter of Instruction for

Recoverage

Ref. No. MSG170096

Prentiss County

The Mississippi Department of Environmental Quality's Permit Board has reissued the Wet Deck Log Spray with Recirculation General NPDES Permit (MSG17) on July 31, 2017. This General Permit authorizes discharges from wet deck log spray recirculation ponds, including water which is sprayed onto the timber, storm water run-off from the timber wet deck storage area, boiler blowdown, and exterior equipment and exterior vehicle washwater where no internal washing or engine washing is occurring and where no detergents or chemicals are being used. The above referenced facility has coverage under the previous general permit which expired on April 30, 2016.

The reissued general permit contains significant changes from the previous permit. The reissued general permit no longer covers permitting for storm water runoff associated with construction of log spray ponds and yards. No changes were made to the monitoring requirements found in the previous permit.

A wet decking operation that has been operating under the former Wet Deck Log Spray General Permit has three options: re-coverage, termination, or application for an individual permit. Please read the following instructions carefully:

Re-coverage. In order for the above referenced project to remain covered under a valid NPDES permit, the coverage recipient must complete the enclosed Re-coverage Form and send it to the indicated address within 45 days of the date of this letter. For proposed expansion activities, the coverage recipient must also complete the enclosed Recoverage Form Addendum and send it along with any required submittals to the indicated address within 45 days of the date of this letter. An updated Certificate of Permit Coverage will be issued by MDEQ after

If the company seeking permit coverage is a corporation, a limited liability company, a partnership, or a business trust, then 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 the application(s). Coverage will be issued in the company name as it is registered with the

A new Certificate of Permit Coverage will not be mailed to the coverage recipient. Coverage recipients should access and print their Certificate of Coverage from the MDEQ website by following the steps listed below. Please allow at least 60 days from the submittal of the "Re-Coverage Form" before attempting to access the new Certificate of Coverage. This will give MDEQ time to complete the review and administrative process of re-

DOCUMENTATION OF COMPLIANCE WITH OTHER 'REGULATIONS/REQUIREMENTS

REGULATIONS/REQUIREMENTS
Is this notice for a facility that will require other permits? Yes No If yes, circle which one(s): Air, Hazardous Waste, Pretreatment, Water State Operating, Individual NPDES, or Other(s):
How will sanitary sewage be collected and treated?
Will the facility route boiler blowdown, exterior equipment or exterior vehicle washwater, or any other type wastewater to the wet deck log spray recirculation pond(s)? Yes No If yes, please indicate in gallons per day the volume of each wastestream. (Please be aware that facilities which route exterior equipment or exterior vehicle washwater where detergents or other chemicals are being used are not eligible to obtain coverage under this general permit.):
CERTIFICATION 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 imprisonment for knowing violations.
Signature (Must be signed by operator when different than owner) Date Signed
Signature (Must be signed by operator when different than owner) Date Signed Printed Name Title
This form shall be signed by the current coverage recipient according to ACT6, T-30 of the General Permit.
After signing please mail to: Environmental Permits Division, Office of Pollution Control

P.O. Box 2261

Jackson, MS 39225-2261

OPERATOR INFORMATION (if different than owner)

Operator Contact Name & Position:
Operator Company:
Operator Street (P.O. Box):
Operator City:State:Zip:
Operator Phone Number (Include Area Code):
FACILITY INFORMATION
Facility Name: _ Mafle Land and Timber LLC.
Nature of Business (Include 4 – digit Standard Industrial Classification Code (SIC) and description):
SIC Code: 242]
Physical Site Address (if not available indicate the nearest named road):
Street: 257 Highway 30 City: B9/2wyn County: Prentiss Zip: M9 38824
Geographic Position:
Latitude: degrees minutes seconds
Longitude: degrees minutes seconds