AI #73847 Gnf 20180001





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 Pollution 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
- · 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)

(NUMBER TO BE ASSIGNED BY STATE)

APPLICANT IS THE:	R PRIME CONTRACTOR	
	CONTACT INFORMATION	
OWNER CONTACT PERSON: Robert Davis		
OWNER COMPANY LEGAL NAME: Miller Fa	arms, LLC	
OWNER STREET OR P.O. BOX: 190 Motor S	Scooter Drive	
OWNER CITY: Nesbit	GT ITE MS	20054
OWNER CITY: Nesbit OWNER PHONE #: (662) 429-7551	STATE: Me	ZIP: 38651
PRIME CONTRA	CTOR CONTACT INFORMATION	
PRIME CONTRACTOR CONTACT PERSON: _		
PRIME CONTRACTOR COMPANY LEGAL NA	ME:	
CONTRACTOR STREET OR P.O. BOX:		
PRIME CONTRACTOR CITY:	STATE:	710
PRIME CONTRACTOR PHONE #: ()_	PRIME CONTRACTOR EMAIL:	2/11 .
	Y SITE INFORMATION	
FACILITY SITE NAME: Camp Creek		
FACILITY SITE ADDRESS (If the physical address indicate the beginning of the project and identify all co	is not available, please indicate the nearest nar unties the project traverses.)	ned road. For linear projects
STREET: Located on the west side of Laugh CITY: Hernando STATE: MS	nter Road and south of Byhalia Road	
CTTY: Hernando STATE: MS	COUNTY: DeSoto	ZIP: 38632
FACILITY SITE TRIBAL LAND ID (N/A If not ap	plicable): N/A	
LATITUDE: 34 degrees 51 minutes 18 second	ds LONGITUDE: 89 degrees 54 min	outes 05 seconds
LAT & LONG DATA SOURCE (GPS (Please GPS Project	ct Entrance/Start Point) or Map Interpolation): GOO	gle Earth
TOTAL ACREAGE THAT WILL BE DISTURBED	1: 128 +/-	
IS THIS PART OF A LARGER COMMON PLAN (OF DEVELOPMENT?	YES□ NO Ø
IF YES, NAME OF LARGER COMMON PLAN OF AND PERMIT COVERAGE NUMBER: MSR	DEVEL OPTION	YES□ NO ☑
ESTIMATED CONSTRUCTION PROJECT START	Γ DATE:	2018-05-20
		YYYY-MM-DD
ESTIMATED CONSTRUCTION PROJECT END D	ATE:	2019-05-20
DESCRIPTION OF CONSTRUCTION ACTIVITY:	Residential Use	YYYY-MM-DD
PROPOSED DESCRIPTION OF PROPERTY USE A		MPLETED:
SIC Code NAICS Code		

NEAREST NAMED RECEIVING STREAM: Camp (Creek	
IS RECEIVING STREAM ON MISSISSIPPI'S 303(d) BODIES? (The 303(d) list of impaired waters and TMD http://www.deq.state.ms.us/MDEQ.nsf/page/TWB_Total_N	Assimum Daily Load Section)	NOE
HAS A TMDL BEEN ESTABLISHED FOR THE RECI	EIVING STREAM SEGMENT?	NOE
ARE THERE RECREATIONAL STREAMS, PRIVATI WITHIN ½ MILE DOWNSTREAM OF PROJECT BO ACTIVITY?	E/PUBLIC PONDS OR LAKES UNDRY THAT MAY BE IMPACTED BY THE COM	NOE
EXISTING DATA DESCRIBING THE SOIL (for linear Located in the SWPPP document.	projects please describe in SWPPP):	
	projects please describe in SWPPP):	
WILL FLOCCULANTS BE USED TO TREAT TURBII	projects please describe in SWPPP):	NO
	projects please describe in SWPPP):	

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

	TORAFACILITY THAT W	ILL REQUIRE OTHER PERMITS?	
			YES □ NO ☑
	HECK ALL THAT APPLY:	THE MEDOUS WAS	STE PRETREATMENT
	WATER STATE OPERATIN	THE PES	□ OTHER:
IS THE PROFESSION OF ANY K	ROJECT REROUTING, FILL KIND? (If yes, contact the U.S.	LING OR CROSSING A WATER CONV. Army Corps of Engineers' Regulatory	
IF THE PR	ROJECT REQUIRES A CORP NTATION THAT:	PS OF ENGINEER SECTION 404 PERI	MIT, PROVIDE APPROPRIATE
	project has been approved by i		
• The	work will be covered by a natio	onwide permit and NO NOTIFICATION	N to the Corps is required, or
• The v	work will be covered by a natio	onwide or general permit and NOTIFIC	ATION to the Corps is required
IS A LAKE (If yes, prov	REQUIRING THE CONSTR vide appropriate approval docu	RUCTION OF A DAM BEING PROPOS umentation from MDEQ Office of Land	SED? YES \(\square\) NO \(\square\)
IF THE PR	OJECT IS A STIPPHYTCHON	OR A COMMERCIAL DEVELOPMEN ng and attach the pertinent documents.	T, HOW WILL SANITARY SEWAGE
Existi associ Hanco of LC collect	ing Municipal or Commercial S lated "Information Regarding lock, Harrison, Jackson, Pearl Rive NOI submittal MDFO will be NOI submittal MDFO will be	System. Please attach plans and specific Proposed Wastewater Projects" form or er and Stone Counties. If the plans and spe except written acknowledgement from offi	r approval from County Utility Authority in
Collec permi	tion and Treatment System wi t from MDEQ or indicate the o	ill be Constructed. Please attach a copy of date the application was submitted to M	of the cover of the NPDES discharge
of Gen	dual Onsite Wastewater Disponeral Acceptance from the Missier	-16 /	35 Lots. Please attach a conv of the Letter
Individual feasibi responsis not f	dual Onsite Wastewater Dispos lity of installing a central sewa se from MDEQ concerning the feasible, then please attach	sal Systems for Subdivisions Greater that age collection and treatment system must e feasibility study must be attached. If a	
		R ORDINANCE WITH WHICH THE F	

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 Applicant¹ (owner or prime contractor)

Date Signed

Printed Name

Title

¹This 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.

PRIME CONTRACTOR INFORMATION

PRIME CONTRACTOR CONTACT PERSON:			
PRIME CONTRACTOR COMPANY:	PHONE NUM	PHONE NUMBER: ()_	
PRIME CONTRACTOR STREET (P.O. BOX):			
PRIME CONTRACTOR CITY.			
PRIME CONTRACTOR CITY: E-MAIL ADDRESS:	STATE:	ZIP:	
	NER INFORMATION		
OWNER CONTACT PERSON:OWNER COMPANY NAME:	DHOUS		
OWNER COMPANY NAME:	PHONE NUMBER: (
	ECT INFORMATION		
PROJECT NAME:	1011		
DESCRIPTION OF CONSTRUCTION ACTIVITY:			
PHYSICAL SITE ADDRESS (If the physical address in a dicate the beginning of the project and identify all contracts:	is not available indicate the nearest named road. unties the project traverses.)	For linear projects,	
CITY:	COUNTY	20145	
	- COUNTY:		
certify that I am the prime contractor for this project and wermit. I further certify under penalty of law that this docume coordance with a system designed to assure that qualified peny inquiry of the person or persons who manage the system, iformation submitted is, to the best of my knowledge and belienalties for submitting false information, including the possi	rill comply with all the requirements in the above refer nent and all attachments were prepared under my dire rsonnel properly gathered and evaluated the information	enced general NPDES ction or supervision in	
rime Contractor Signature ¹	D.A. Ci		
	Date Signed		
rinted Name ¹	The state of the s		
is application should	Title		
is application shall be signed as follows: For a corporation, by a responsible corporate officer. For a partnership, by a general posters.	This Prime Contractors Certification form shall be	submitted to:	

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 Jackson, Mississippi 39225