AI#52570 GNP20180001





HYDROSTATIC TEST NOTICE OF INTENT (HTNOI)

FOR COVERAGE UNDER MISSISSIPPI'S HYDROSTATIC TEST GENERAL PERMIT GENERAL PERMIT MSG13 0 5 3 9

(Number to be assigned by MDEQ)

INSTRUCTIONS

The Hydrostatic Test Notice of Intent (HTNOI) is for coverage under the Hydrostatic Test General Permit to discharge hydrostatic test water and storm water associated with land disturbing activities of one (1) acre or greater; or for land disturbing activities, which are part of a larger common plan of development or sale that are initially less than one (1) acre but will ultimately disturb one (1) or more acres. Applicant must be the owner or operator. The coverage recipient is responsible for compliance with the conditions of the general permit.

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

A USGS quadrangle map or copy is a required submittal. The map shall extend at least one-half of a mile beyond the facility/project property boundary. In the case of linear pipeline projects the map shall extend at least one-half of a mile beyond the pipeline right-of-way. The site location and outfalls must be outlined and labeled. Quad maps can be obtained from the Office of Geology (601-961-5523). If a copy is submitted, provide the name of the quadrangle map that is found in upper right hand corner.

Additional submittals may include the following:

- A site-specific Storm Water Pollution Prevention Plan (SWPPP) developed in accordance with ACT8 of the General Permit, if the project includes regulated construction activity disturbing five (5) acres or more
- A description of proposed water treatment additives as outlined in ACT4, S-4 of the General Permit
- Appropriate Section 404 documentation from U.S. Army Corps of Engineers
- Written authorization from the MDEQ, Office of Land and Water, if water withdrawal from surface waters or ground waters is to be used for the testing. For information call the Office of Land and Water at 601/961-5202

ALL REQUESTED INFORMATION MUST BE PROVIDED (Answer "NA" if not applicable)

APPLICANT IS THE:	✓ OWNER	OPERATOR	(Must chec	ck one or both)
	OW	NER INFORMATION		
OWNER CONTACT NAME	& POSITION: TREY	FLEMING		
OWNER COMPANY NAME:	CF INDUSTRIES	NITROGEN LLC		
OWNER STREET (P.O. BOX): 4608 HWY 49 E	AST		
OWNER CITY: YAZOO CI	TY	S	TATE: MS	ZIP: 39194
OWNER PHONE # (INCLUD	F AREA CODE), 66		TAIL.	LIP: USIST

OPERATOR CO.	OPERATOR INFORM	MATION	
OPERATOR CONTACT NAME	& POSITION: SAME AS OW.	NER	
OPERATOR COMPANY:			
OPERATOR STREET (P.O. BOX)):		
OPERATOR CITY:OPERATOR PHONE # (INCLUME			
OPERATOR PHONE # (INCLUDE	E AREA CODE):	STATE:	ZIP:
	FACILITY/PROJECT INFO		
FACILITY/PROJECT NAME: CF			
PIPELINE, STORAGE TANK OR I	FLOWLINE BEING TESTED IS	NEW	SIC Code: 2 8 7 3
IF USED, LIST PRIOR MATERIAL IF REGULATED LAND DISTURDS	SERVICE OF EQUIPMENT:	UAN (URFA-AMA	USED WALLED
(NOTE: A construction SWPPP mus	NG ACTIVITIES ARE TO OCC st be attached with this HTNOL if	UR, LIST ACRES DIS	STURBED: NONE
PHYSICAL SITE ADDRESS (If not a	available, indicate nearest named	road Linear projects	es or more).
STREET: 702 LEVEE ROAD		CITY: YAZOO C	indicate beginning of project):
COUNTY: YAZOO			111
TYPE OF TREATMENT (IF PROVI		2311.	
ertify under penalty of law that this docume tem designed to assure that qualified person son or persons who manage the system, or best of my knowledge and belief, true, accurmation, including the possibility of fines a construction.	those persons directly responsible for trate and complete. I am aware that nd/or imprisonment for knowing viol	gathering the information	supervision in accordance with a ted. Based on my inquiry of the on, the information submitted is, to alties for submitting false
enature (Must be signed by operator w	hen different than owner)	Date Signed	
AUDIO NASCIMENTO nted Name		GENERAL MAN	NAGER
		Title	
For a corporation, by a responsible corporation, by a responsible corporation, by a general partnership, by a general partnership, by the property a municipal, state or other public	er.		aking elected official
NOI forms must be submitted to:	Chief, Environmental Permits D MS Dept of Environmental Qua P.O. Box 2261 Jackson, Mississippi 39225	livision	

Revised: 06/01/11

OUTFALL INFORMATION

(To be submitted with HTNOI and Major Modification Forms)

INSTRUCTIONS:

- 1. For each outfall, complete the information in the table below (NOTE: Complete the last column of this form, only if it is being submitted
- 2. All outfalls must be spotted and labeled on a USGS quadrangle map.

OUTALL LATITUDE 1 (deg/min/sec) 001 32deg 50' 34"				NEAREST RECEIVING STREAM ²									
	LONGITUDE 1 (deg/min/sec)	SOURCE OF FILL WATER		ON 30 LIS	ON MDEQ 303(D) LIST? 3		AS DL?3	EST. TOTAL DISCHARGE	STATUS OF TANK, PIPELINE, FLOWLINE		EXPECTED TEST	INDICATE WHETHER OUTFALL	
	32deg 50' 34"	90deg 26' 25"	Yazoo City Munic	NAME	Yes	No	Yes	No	(MIL GAL)	New	TC. Used	DATE(S) (mm/dd/yr)	IS NEW OF
002			1 dz.oo City Wildi	1 azoo River	-	1		1	1.4		1		Existing
003					-								
004													
005					+								
006					-			_					
007					+								
008					-			_					
009					-								
010					+	-		-					
011					+	-							
012					-			_					

Revised 06/01/11

Last the latitude and longitude of its location to the nearest 15 seconds.

Harne of the nearest named receiving stream as listed on a USGS Quad Map.

MOEO's 303(d) List of Impaired Water Bodies and approved TMDLs can be found at: http://www.deq.state.ms.us/MDEQ.nsf/page/TWB_Total_Maximum_Daily_Load_Section