

AI #74042
Gnp20180001

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JUL 24 2018

Dept. of Environmental Quality

MSR10 7774

(NUMBER TO BE ASSIGNED BY STATE)

APPLICANT IS THE: ☒ OWNER ☐ PRIME CONTRACTOR

OWNER CONTACT INFORMATION

OWNER CONTACT PERSON: Blake Roberts

OWNER COMPANY LEGAL NAME: Roberts Trucking, LLC

OWNER STREET OR P.O. BOX: Hwy. 15 N.

OWNER CITY: New Albany

STATE: MS

ZIP: 38652

OWNER PHONE #: (662) 316-7677

OWNER EMAIL: br Roberts@robts-truckingllc.com

PRIME CONTRACTOR CONTACT INFORMATION

PRIME CONTRACTOR CONTACT PERSON: Scott Stubbs

PRIME CONTRACTOR COMPANY LEGAL NAME: Steel-Conn. Inc.

PRIME CONTRACTOR STREET OR P.O. BOX: 808 Hwy. 15 North

PRIME CONTRACTOR CITY: New Albany

STATE: MS

ZIP: 38652

PRIME CONTRACTOR PHONE #: (662) 534-0532 PRIME CONTRACTOR EMAIL: scott@steel-conn.com

FACILITY SITE INFORMATION

FACILITY SITE NAME: Roberts Trucking, LLC

FACILITY SITE ADDRESS (If the physical address is not available, please indicate the nearest named road. For linear projects indicate the beginning of the project and identify all counties the project traverses.)

STREET: Hwy. 15 North

CITY: New Albany

STATE: MS

COUNTY: Union

ZIP: 38652

FACILITY SITE TRIBAL LAND ID (N/A if not applicable): N/A

LATITUDE: 34 degrees 31 minutes 44 seconds LONGITUDE: 88 degrees 54 minutes 28 seconds

LAT & LONG DATA SOURCE (GPS (Please GPS Project Extremities) or Map Interpolation): Google Map

TOTAL ACREAGE THAT WILL BE DISTURBED: 16

IS THIS PART OF A LARGER COMMON PLAN OF DEVELOPMENT? YES ☐ NO ☒

IF YES, NAME OF LARGER COMMON PLAN OF DEVELOPMENT: n/a
AND PERMIT COVERAGE NUMBER: MSR10

ESTIMATED CONSTRUCTION PROJECT START DATE: 2018-07-15

YYYY-MM-DD

ESTIMATED CONSTRUCTION PROJECT END DATE: 2018-31-12

YYYY-MM-DD

DESCRIPTION OF CONSTRUCTION ACTIVITY: Construction of a trucking facility

PROPOSED DESCRIPTION OF PROPERTY USE AFTER CONSTRUCTION HAS BEEN COMPLETED:

Area will contain a truck terminal building and parking

SIC Code _____ NAICS Code _____

NEAREST NAMED RECEIVING STREAM: Jasper Creek

IS RECEIVING STREAM ON MISSISSIPPI'S 20040 LIST OF IMPAIRED WATER BODIES? (The 20040 list of impaired waters and TMDL stream segments may be found on MDEQ's web site: http://www.deq.state.ms.us/MDEQ.nsf/page/TWB_Total_Maximum_Daily_Load_Section)

YES ☐

NO ☒

HAS A TMDL BEEN ESTABLISHED FOR THE RECEIVING STREAM SEGMENT?

YES ☐

NO ☒

ARE THERE RECREATIONAL STREAMS, PRIVATE/PUBLIC PONDS OR LAKES WITHIN 1/2 MILE DOWNSTREAM OF PROJECT BOUNDARY THAT MAY BE IMPACTED BY THE CONSTRUCTION ACTIVITY?

YES ☐

NO ☒

EXISTING DATA DESCRIBING THE SOIL (for larger projects please describe in SWPPP):
See SWPPP

WILL FLOCCULANTS BE USED TO TREAT TURBIDITY IN STORM WATER?

YES ☐

NO ☒

IF YES, INDICATE THE TYPE OF FLOCCULANT.

☐ ANIONIC POLYACRYLAMIDE (PAM)

☐ OTHER _____

IF YES, DOES THE SWPPP DESCRIBE THE METHOD OF INTRODUCTION, THE LOCATION OF INTRODUCTION AND THE LOCATION OF WHERE FLOCCULATED MATERIAL WILL SETTLE?

YES ☐

NO ☒

¹ Acreage for subdivision development includes areas disturbed by construction of roads, utilities and drainage. Additionally, a housewife 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 ADDRESSSED

IS LCONOT FOR A FACILITY THAT WILL REQUIRE OTHER PERMITS?

YES ☐ NO ☒

IF YES, CHECK ALL THAT APPLY: ☐ AIR ☐ HAZARDOUS WASTE ☐ PRETREATMENT
☐ WATER STATE OPERATING ☐ INDIVIDUAL NPDES ☐ OTHER: _____

IS THE PROJECT REROUTING, FILLING OR CROSSING A WATER CONVEYANCE OF ANY KIND? (If yes, contact the U.S. Army Corps of Engineers' Regulatory Branch for permitting requirements.) YES ☐ NO ☒

IF THE PROJECT REQUIRES A CORPS OF ENGINEERS SECTION 404 PERMIT, PROVIDE APPROPRIATE DOCUMENTATION THAT:

- The project has been approved by individual permit, or
- The work will be covered by a nationwide permit and NO NOTIFICATION to the Corps is required, or
- The work will be covered by a nationwide or general permit and NOTIFICATION to the Corps is required

IS A LAKE REQUIRING THE CONSTRUCTION OF A DAM BEING PROPOSED? YES ☐ NO ☒
 (If yes, provide appropriate approval documentation from MDEQ Office of Land and Water, Dam Safety.)

IF THE PROJECT IS A SUBDIVISION OR A COMMERCIAL DEVELOPMENT, HOW WILL SANITARY SEWAGE BE DISPOSED? Check one of the following and attach the pertinent documents.

- ☒ Existing Municipal or Commercial System. Please attach plans and specifications for the collection system and the associated "Information Regarding Proposed Wastewater Projects" form or approval from County Utility Authority in Hancock, Harrison, Jackson, Pearl River and those Counties. If the plans and specifications can not be provided at the time of LCONOT submittal, MDEQ will accept written acknowledgement from official(s) responsible for wastewater collection and treatment that the flows generated from the proposed project can and will be transported and treated properly. The letter must include the estimated flow.
- ☐ Collection and Treatment System will be Constructed. Please attach a copy of the cover of the NPDES discharge permit from MDEQ or indicate the date the application was submitted to MDEQ (Date: _____).
- ☐ Individual Onsite Wastewater Disposal Systems for Subdivisions Less Than 35 Lots. Please attach a copy of the Letter of General Acceptance from the Mississippi State Department of Health or certification from a registered professional engineer that the plotted lots should support individual onsite wastewater disposal systems.
- ☐ Individual Onsite Wastewater Disposal Systems for Subdivisions Greater than 35 Lots. A determination of the feasibility of installing a central sewage collection and treatment system must be made by MDEQ. A copy of the response from MDEQ concerning the feasibility study must be attached. If a central collection and wastewater system is not feasible, then please attach a copy of the Letter of General Acceptance from the State Department of Health or certification from a registered professional engineer that the plotted lots should support individual onsite wastewater disposal systems.

INDICATE ANY LOCAL STORM WATER ORDINANCE WITH WHICH THE PROJECT MUST COMPLY:

None

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.

Blake Roberts
Signature of Applicant (owner or prime contractor)

6/29/18
Date Signed

Blake Roberts
Printed Name

safety
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 LCONI form to:

Chief, Environmental Permits Division
MS Department of Environmental Quality, Office of Pollution Control
P.O. Box 2361
Jackson, Mississippi 39225

PRIME CONTRACTOR CERTIFICATION

LARGE CONSTRUCTION GENERAL PERMIT

Coverage No. MSR10 _____ County _____
(Fill in your Certificate of Coverage Number and County)



MISSISSIPPI DEPARTMENT OF
ENVIRONMENTAL QUALITY

By completing and submitting this form, the prime contractor certifies that the project is a large construction project as defined in the Mississippi Code of Annotated Statutes, Title 26, Chapter 17, Section 26-17-01(1) and that the project is a large construction project as defined in the Mississippi Code of Annotated Statutes, Title 26, Chapter 17, Section 26-17-01(1) and that the project is a large construction project as defined in the Mississippi Code of Annotated Statutes, Title 26, Chapter 17, Section 26-17-01(1).

PRIME CONTRACTOR INFORMATION

PRIME CONTRACTOR CONTACT PERSON: Scott Stubbs PHONE NUMBER: 662 534-0532
PRIME CONTRACTOR COMPANY: Steel-Con, Inc.
PRIME CONTRACTOR STREET (P.O. BOX): 808 Hwy. 15 North
PRIME CONTRACTOR CITY: New Albany STATE: MS ZIP: 38652
E-MAIL ADDRESS: _____

OWNER INFORMATION

OWNER CONTACT PERSON: Blake Roberts PHONE NUMBER: (662) 316-7877
OWNER COMPANY NAME: Roberts Trucking, LLC

PROJECT INFORMATION

PROJECT NAME: Roberts Trucking, LLC
DESCRIPTION OF CONSTRUCTION ACTIVITY: Construction of trucking terminal building and parking and drives to serve the facility.
PHYSICAL SITE ADDRESS (If the physical address is not available indicate the nearest named road. For linear projects, indicate the beginning of the project and identify all counties the project traverses.)
STREET: Hwy 15 N.
CITY: New Albany COUNTY: Union

I certify that I am the prime contractor for this project and will comply with all the requirements in the above referenced general NPDES permit. I further 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.

Scott Stubbs
Prime Contractor Signature

Scott Stubbs
Printed Name

6-29-18
Date Signed
Estimote / Project 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.

This Prime Contractors Certification form shall be submitted to:

Chief, Environmental Permit Division
Miss. Department of Environmental Quality, Office of Pollution Control
P.O. Box 3261
Jackson, Mississippi 39205

Revised: 10/25/16