## AI#23748 GnP20180001

## MSR10 779 |

(NUMBER TO BE ASSIGNED BY STATE)

APPLICANT IS THE:  OWNER  PRIM	TE CONTRACTOR	NECERV	71E ក					
		N -						
OWNER CONTACT	INFORMATION	AUG 2 0 20	110					
OWNER CONTACT PERSON: Trey Evans		BY:						
OWNER COMPANY LEGAL NAME: H & H Development, LLC								
owner street or p.o. Box: 8525 West Oaklawn Drive								
OWNER CITY: Vancleave st	ATE: MS	ZIP: 39	532					
OWNER CITY: Vancleave STATE: MS ZIP: 39532  OWNER PHONE #: (228) 861-8986 OWNER EMAIL: trey@holdenearth.com								
PRIME CONTRACTOR CON								
PRIME CONTRACTOR CONTACT PERSON: N/A			,					
PRIME CONTRACTOR COMPANY LEGAL NAME:								
PRIME CONTRACTOR STREET OR P.O. BOX:								
PRIME CONTRACTOR CITY:								
PRIME CONTRACTOR PHONE #: () PRIME	CONTRACTOR EMAIL:							
FACILITY SITE INFORMATION								
FACILITY SITE NAME: Hillcrest Estates Subdivision, Phas	se 4							
FACILITY SITE ADDRESS (If the physical address is not available indicate the beginning of the project and identify all counties are project and identification are project are project ar			r projects					
CITY: Vancleave STATE: MS	COUNTY: Jackson	ZIP: 3	9565					
FACILITY SITE TRIBAL LAND ID (N/A If not applicable):	HTUDE: 88 degrees 39 n	inutes 31 seconds						
LAT & LONG DATA SOURCE (GPS (Please GPS Project Entrance/Start Point) or Map Interpolation):								
TOTAL ACREAGE THAT WILL BE DISTURBED 1: 12.22								
IS THIS PART OF A LARGER COMMON PLAN OF DEVELO		3/70						
		YES	NO 🏕					
IF YES, NAME OF LARGER COMMON PLAN OF DEVELOP AND PERMIT COVERAGE NUMBER: MSR10	MENT:							
ESTIMATED CONSTRUCTION PROJECT START DATE:		2018-09-01						
The state of the control of the cont		YYYY-MM-DD 2019-08-01						
ESTIMATED CONSTRUCTION PROJECT END DATE:		YYYY-MM-DD						
DESCRIPTION OF CONSTRUCTION ACTIVITY: Construction of residential subdivision								
PROPOSED DESCRIPTION OF PROPERTY USE AFTER CONSTRUCTION HAS BEEN COMPLETED: Residential subdivision								
PROPOSED DESCRIPTION OF PROPERTY USE AFTER COR Residential subdivision	NSTRUCTION HAS BEEN	COMPLETED:						

NEAREST NAMED RECEIVING STREAM: Moungers Creek						
IS RECEIVING STREAM ON MISSISSIPPI'S 303(d) LIST OF IMPAIRED WATER BODIES? (The 303(d) list of impaired waters and TMDL stream segments may be found http://www.deq.state.ms.us/MDEQ.nsf/page/TWB_Total_Maximum_Daily_Load_Section)	YES□ NO  nd on MDEQ's web site:					
HAS A TMDL BEEN ESTABLISHED FOR THE RECEIVING STREAM SEGMENT	? YES□ NO₩					
ARE THERE RECREATIONAL STREAMS, PRIVATE/PUBLIC PONDS OR LAKE WITHIN ½ MILE DOWNSTREAM OF PROJECT BOUNDRY THAT MAY BE IMPACTIVITY?	S YES□ NO ② ACTED BY THE CONSTRUCTION					
EXISTING DATA DESCRIBING THE SOIL (for linear projects please describe in SWPPP): Sandy Loam						
WILL FLOCCULANTS BE USED TO TREAT TURBIDITY IN STORM WATER?	YES NO ₹					
IF YES, INDICATE THE TYPE OF FLOCCULANT.  ANIONIC POLYMON OTHER	ACRYLIMIDE (PAM)					
IF YES, DOES THE SWPPP DESCRIBE THE METHOD OF INTRODUCTION, THE AND THE LOCATION OF WHERE FLOCCULATED MATERIAL WILL SETTLE?	E LOCATION OF INTRODUCTION YES □ NO□					

<sup>&</sup>lt;sup>1</sup>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 L	CNOI FOR A FACILITY THAT W	ILL RE	QUIR	RE OTHER PERMITS?		······································		
						YES	NO 🗳	
IFY	ES, CHECK ALL THAT APPLY:		R	☐ HAZARDOUS WASTE		PRETREATME	NT	
	☐ WATER STATE OPERATIN	G		NDIVIDUAL NPDES		OTHER:		
IS TO	HE PROJECT REROUTING, FILL NY KIND? (If yes, contact the U.S.	ING OR . Army C	R CRC Corps	OSSING A WATER CONVEYAL s of Engineers' Regulatory Brancl	NCE h for per	YES □ mitting requirer	NO 🗷 nents.)	
IF T	IE PROJECT REQUIRES A CORI UMENTATION THAT:	PS OF E	NGI	neer Section 404 Permit, I	PROVIE	E APPROPRIA	TE	
•	The project has been approved by	individu	al pe	rmit, or				
<ul> <li>The work will be covered by a nationwide permit and NO NOTIFICATION to the Corps is required, or</li> </ul>								
•	The work will be covered by a nation	onwide o	or gen	neral permit and NOTIFICATIO	N to the	Corps is require	d	
IS A (If ye	LAKE REQUIRING THE CONSTR s, provide appropriate approval doc	RUCTIO umentat	N OF	F A DAM BEING PROPOSED? From MDEQ Office of Land and V	Vater, D	YES □ am Safety.)	NO 🗷	
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 Stene Counties. If the plans and specifications can not be provided at the time of LCNOI 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 w permit from MDEQ or indicate the	vill be Co	onstra e appl	ucted. Please attach a copy of the lication was submitted to MDEQ	cover of (Date: _	f the NPDES disc	harge )	
	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 platted lots should support individual onsite wastewater disposal systems.							
INDIC	CATE ANY LOCAL STORM WATE	ER ORD	INA	NCE WITH WHICH THE PROJ	IECT M	UST COMPLY:		
					<del> </del>			

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

Jac Signed

Urce President

<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