AI #68169

## PRIME CONTRACTOR CERTIFICATI

## LARGE CONSTRUCTION GENERAL PERMIT

Coverage No. MSR10 7 7 2 6 County Alcom
(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.

PRIM	E CONTRACTOR INFORMATION
PRIME CONTRACTOR CONTACT PERSO	ON: Josh Hore PHONE NUMBER: (663) 643-7178
	chael Pettona (nstruction
PRIME CONTRACTOR STREET (P.O. BO	X): Sq P. McCost
PRIME CONTRACTOR CITY: Const	STATE: MS ZIP: 38834
E-MAIL ADDRESS: 5 HUT 5608 @	Juhoo. ion_
	OWNER INFORMATION
OWNER CONTACT PERSON: Clayton S	Stanley PHONE NUMBER: (662) 287-5269
OWNER COMPANY NAME: The Alliano	ce
2 2 1	PROJECT INFORMATION
PROJECT NAME: Railhub South - Site	e Access and Viewing Improvements 2
DESCRIPTION OF CONSTRUCTION ACT	Access and Viewing Improvements 2  TIVITY: Site earthwork
PHYSICAL SITE ADDRESS (If the physical indicate the beginning of the project and idenstrates: Barnstable Road	address is not available indicate the nearest named road. For linear projects, tify all counties the project traverses.)
	COUNTY: Alcorn
permit. I further certify under penalty of law that accordance with a system designed to assure that my inquiry of the person or persons who manage information submitted is, to the best of my knowled penalties for submitting false information, including Printed Contractor Signature  Printed Name  Printed Name  Output  Description:	roject and will comply with all the requirements in the above referenced general NPDES to this document and all attachments were prepared under my direction or supervision in qualified personnel properly gathered and evaluated the information submitted. Based on the system, or those persons directly responsible for gathering the information, the edge and belief, true, accurate and complete. I am aware that there are significant ing the possibility of fine and imprisonment for knowing violations.     O   O   O
<sup>1</sup> This application shall be signed as follows:	This Prime Contractors Certification form shall be submitted to:

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.

Chief, Environmental Permits Division

MS Department of Environmental Quality, Office of Pollution Control

P.O. Box 2261

Jackson, Mississippi 39225

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