

		119 109				
APPLICANT IS THE:	✓ OWNER	PRIME CO	NTRACTOR			
	OWNER CO	NTACT INFO	RMATION			
OWNER CONTACT PERSON:_	Mr. Chad Coffey	/				
OWNER COMPANY LEGAL NA	AME: Union Cou	inty Board of S	Supervisors			
OWNER STREET OR P.O. BOX				7.115-167-177-178-178-178-178-178-178-178-178-17		
OWNER CITY: New Albany		STATE:	MS	ZIP: 38	652	
OWNER CITY: New Albany OWNER PHONE #: (662) 26	6-3566	OWNER EMAI	L:			
			T INFORMATIO			
PRIME CONTRACTOR CONTA	ACT PERSON:	,				
PRIME CONTRACTOR COMP						
PRIME CONTRACTOR STREE						
PRIME CONTRACTOR CITY:						
PRIME CONTRACTOR PHONE						
	FACILITY	SITE INFORM	MATION	- 1		
FACILITY SITE NAME: Martin	town North Industrial	Park Access Road,	, Project Number MS-1	19247		
FACILITY SITE ADDRESS (If the indicate the beginning of the project	ne physical address is and identify all coun	not available, pleas ties the project trav	se indicate the nearest verses.)	named road. For line		
STREET: MS Highway 30 CITY: New Albany	West					
CITY: New Albany	STATE: MS	CC	DUNTY: Union	ZIP:	38652	
FACILITY SITE TRIBAL LAND	ID (N/A If not appl	licable):N\A				
LATITUDE: 34 degrees 29 n						
LAT & LONG DATA SOURCE (GPS (Please GPS Project	Entrance/Start Point)	or Map Interpolation): M	lap Interpolatior	<u> </u>	
TOTAL ACREAGE THAT WILI	L BE DISTURBED	:_+/-10.0 Acre	es .			
IS THIS PART OF A LARGER (COMMON PLAN O	F DEVELOPMEN	NT?	YES 🗆	NO 🗵	
IF YES, NAME OF LARGER CO AND PERMIT COVERAG	OMMON PLAN OF E NUMBER: MSR I	DEVELOPMENT	Γ:			
ESTIMATED CONSTRUCTION PROJECT START DATE:		2019-04-01				
ESTIMATED CONSTRUCTION PROJECT EN		DATE.		YYYY-MM-DD 2020-04-01	2020-04-01	
ESTIMATED CONSTRUCTION	TROJECT END DA			YYYY-MM-DD		
DESCRIPTION OF CONSTRUC	TION ACTIVITY:	Construction of	new two (2) lane roa	ad		
PROPOSED DESCRIPTION OF To provide access to a proposed I	PROPERTY USE Andustrial Park as a C	AFTER CONSTRU County Road	UCTION HAS BEEN	COMPLETED:		
SIC Code N	AICS Code					

NEAREST NAMED RECEIVING STREAM: Hell Creek							
IS RECEIVING STREAM ON MISSISSIPPI'S 303(d) LIST OF BODIES? (The 303(d) list of impaired waters and TMDL stream http://www.deq.state.ms.us/MDEQ.nsf/page/TWB_Total_Maximum	n segments may be found on MDI	YES□ EQ's web site:	NOE				
HAS A TMDL BEEN ESTABLISHED FOR THE RECEIVING	STREAM SEGMENT?	YES□	NO				
ARE THERE RECREATIONAL STREAMS, PRIVATE/PUBI WITHIN ½ MILE DOWNSTREAM OF PROJECT BOUNDRY ACTIVITY?	LIC PONDS OR LAKES Y THAT MAY BE IMPACTED B	YES□ Y THE CONS	NO TRUCTION				
EXISTING DATA DESCRIBING THE SOIL (for linear projects please describe in SWPPP): Ar - Arkabutla slit Loam, FaB - Falkener slit Loam, TpC2-Tippah slit Loam, WaB2 - Wilcox slity Loam 2 to 5 percent slope, and WaC2 - Wilcox slity Loam 5 to 8 percent slope							
WILL FLOCCULANTS BE USED TO TREAT TURBIDITY I	N STORM WATER?	YES□	NO€				
IF YES, INDICATE THE TYPE OF FLOCCULANT.	☐ ANIONIC POLYACRYLIM☐ OTHER	IDE (PAM)					
IF YES, DOES THE SWPPP DESCRIBE THE METHOD OF AND THE LOCATION OF WHERE FLOCCULATED MATE	INTRODUCTION, THE LOCATI RIAL WILL SETTLE?	ON OF INTRO	ODUCTION NO				

¹Acreage 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

IS LC	NOI FOR A FACILITY THAT WI	LL REOL	HRE OTHER PERMITS?					
	The state of the s	DD KEQ	THE OTHER LERWING.	YES 🗆	NO 🗹			
IF YI	S, CHECK ALL THAT APPLY:		☐ HAZARDOUS WASTE	□ PRETREAT	MENT			
	☐ WATER STATE OPERATING	; –	INDIVIDUAL NPDES	□ OTHER: _				
IS THE PROJECT REROUTING, FILLING OR CROSSING A WATER CONVEYANCE YES NO OF ANY KIND? (If yes, contact the U.S. Army Corps of Engineers' Regulatory Branch for permitting requirements.)								
IF TH DOC	IE PROJECT REQUIRES A CORP UMENTATION THAT:	S OF EN	GINEER SECTION 404 PERMI	T, PROVIDE APPROPI	RIATE			
•	The project has been approved by i	ndividual	permit, or					
•	The work will be covered by a natio	nwide pe	rmit and NO NOTIFICATION to	o the Corps is required,	or			
•	The work will be covered by a natio	nwide or	general permit and NOTIFICAT	TION to the Corps is req	uired			
IS A I	AKE REQUIRING THE CONSTR , provide appropriate approval doc	UCTION umentatio	OF A DAM BEING PROPOSE n from MDEQ Office of Land an	D? YES 🗆 nd Water, Dam Safety.)	NO 🗹			
IF TH BE D	E PROJECT IS A SUBDIVISION (SPOSED? Check one of the following	OR A CO	MMERCIAL DEVELOPMENT, ach the pertinent documents.	HOW WILL SANITAR	RY SEWAGE			
	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 Stone 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	ill be Con date the a	structed. Please attach a copy of application was submitted to MD	the cover of the NPDES EQ (Date:	discharge)			
	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 platted 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 platted lots should support individual onsite wastewater disposal systems.							
INDI	CATE ANY LOCAL STORM WAT	ER ORDI	NANCE WITH WHICH THE P	ROJECT MUST COMF	PLY:			

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.

Date Signed /

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