

Att 18118



**DRY LITTER POULTRY ANIMAL FEEDING
OPERATION GENERAL PERMIT
NOTICE OF INTENT (DLPNOI)**



COVERAGE NUMBER: MSG200975. For re-coverage, the coverage number must be completed for your specific project or this form will be considered incomplete and returned. The coverage number can be found at the bottom left corner of your previous Certificate of Coverage or in the subject heading of the Letter of Instruction for Re-coverage.

I. GENERAL INFORMATION

RECEIVED

JUL 18 2019

Dept. of Environmental Quality

A. CONTACT AND FACILITY INFORMATION

Name of Owner: John Cannon
Facility Name: Cannon Hill Farms, Inc.
Mailing Address:

Street or P.O. Box: 520 CR 2N
City: Bay Springs State: MS Zip: 39422

Physical Site Address:
Street (can not be a P.O. Box): 520 CR 2N
City: Bay Springs State: MS Zip: 39422
County: Jasper

(For new facilities) Latitude (degrees/min/sec): _____ Longitude: _____

(For new facilities) Nearest named receiving stream: _____

Facility Telephone No. (Include Area Code): 601-764-7166

Facility Fax No. (Include Area Code): _____

Contact Cell Phone No. (Include Area Code): 601-764-7166

Other Contact Phone Numbers (Include Area Code): 601-764-7924

Contact Email: dinacan@hughes.net

B. ACTIVITY TYPE (Check all that apply)

☒ Existing operation NOT proposing expansion. Number of existing houses: 5

☒ Existing operation of an incinerator(s). Number of existing incinerator(s): 1

☐ New or expanding operation. Number of proposed houses: _____ Number of proposed incinerators: _____

5/13/2014

THE UNIVERSITY OF TEXAS AT AUSTIN
INSTITUTIONAL RESEARCH
AND EVALUATION

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The purpose of this study was to determine the impact of the University of Texas at Austin's Institutional Research and Evaluation (IRE) department on the university's academic and administrative performance. The study was conducted using a mixed-methods approach, including surveys, interviews, and document analysis.

The results of the study indicate that the IRE department has had a positive impact on the university's performance, particularly in the areas of academic and administrative efficiency. The study also identified several areas for improvement, including the need for more data-driven decision-making and the need for more communication between the IRE department and other university departments.

The study was conducted by a team of researchers from the IRE department and other university departments. The study was funded by the University of Texas at Austin's Institutional Research and Evaluation department.

The study was published in the Journal of Institutional Research and Evaluation, Volume 1, Number 1, 2014. The study is available for free download at the following URL: <http://www.ire.utexas.edu/publications>

The study was conducted in accordance with the University of Texas at Austin's Institutional Research and Evaluation department's research ethics policy. The study was approved by the University of Texas at Austin's Institutional Research and Evaluation department's research ethics committee.

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II. DRY LITTER POULTRY FEEDING OPERATION CHARACTERISTICS

A. TYPE AND AMOUNT OF CHICKENS

For Existing Facilities:

Has the facility changed the number of houses or animal type (ie. broilers or layers)?

☒ No ☐ Yes – Identify Changes: _____

For New Facilities:

Check type and indicate amount

☐ Broiler (SIC 0251): _____ ☐ Pullet/Breeder (0252): _____

B. CONTRACT INFORMATION

Is this facility a contract operation? ☐ No ☒ Yes- Integrator Name: PCO

C. TYPE OF DRY LITTER STORAGE AND CAPACITY

For Existing Facilities:

Has the facility changed the litter storage type or the capacity?

☒ No ☐ Yes – Identify Changes: _____

For New Facilities:

List type of dry litter storage and capacity (tons): _____

D. NUTRIENT MANAGEMENT PLAN

If you do not have a current Comprehensive Nutrient Management Plan then one must be submitted, if your CNMP is current then complete the dates below:

Development Date: _____ Expiration Date: _____

The comprehensive nutrient management plan (CNMP) identified above expires five years from the date it was developed and an updated nutrient management plan must be submitted to MDEQ prior to its expiration date.

THE UNIVERSITY OF CHICAGO

PHYSICS DEPARTMENT

REPORT OF THE PHYSICS DEPARTMENT

FOR THE YEAR 1960-1961

CHICAGO, ILLINOIS

1961

CHICAGO, ILLINOIS

CHICAGO, ILLINOIS

CHICAGO, ILLINOIS

CHICAGO, ILLINOIS

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III. CONSTRUCTION AND/OR OPERATION OF A POULTRY MORTALITY INCINERATOR

- ☐ No, there is no poultry mortality incineration equipment located at the facility. If at a future date you wish to construct and/or operate poultry mortality incineration equipment, you must submit an updated DLPNOI by completing Sections IA, III and IV. Constructing and operating poultry mortality incineration equipment without a modified coverage or issuance of individual permits is a violation of state law.

☒ Yes, there is mortality incineration equipment located at the facility. Complete section below:

MORTALITY INCINERATION EQUIPMENT

For Existing Facilities:

Has the facility changed the number or type of incinerators, or the fuel type burned?

☒ No ☐ Yes -- Identify Changes: _____

For New Facilities:

Manufacturer Name: _____ Model Number: _____

Capacity (tons/hour): _____ Fuel Type: _____

IV. CERTIFICATION

Note: This NOI shall be signed according to Conditions T-17 and T-18 found in ACT 6 of the Dry Litter Poultry Animal Feeding Operations Multimedia General Pollution Control Permit No. MSG20.

- For a corporation, by a responsible corporate officer.
- For a partnership, by a general partner.
- For a sole proprietorship, by the proprietor.

I understand that my nutrient management plan identified Section II. D. expires five years from the date it was developed and that an updated nutrient management plan must be submitted to MDEQ prior to its expiration date.

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.

I further certify that the project continues as described in the original notice of intent. Also, I certify that I understand when coverage is terminated I am no longer authorized to operate activities identified under this general permit and to do so without proper permit coverage is in violation of state law.

John Cannon

Signature of Responsible Official

JOHN CANNON

Printed Name

7-15-19

Date

President

Title