

(NUMBER TO BE ASSIGNED BY STATE)

DV.					
APPLICANT IS THE:					
OWNER CONTACT INFORMATION					
OWNER CONTACT PERSON: Bill Gray					
OWNER COMPANY LEGAL NAME: Bill Gray, Inc.					
OWNER STREET OR P.O. BOX: PO Box 784					
OWNER CITY: New Albany STATE: MS ZIP: 39652  OWNER PHONE #: (662 ) 489-1198 OWNER EMAIL: bill@billgrayinc.com					
OWNER PHONE #: (662 ) 489-1198 OWNER EMAIL: bill@billgra	yinc.com				
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PRIME CONTRACTOR CONTACT INFORMATION					
PRIME CONTRACTOR CONTACT PERSON: Adam Stubblefield	11.0				
PRIME CONTRACTOR COMPANY LEGAL NAME: AHS Construction Company,	LLC				
PRIME CONTRACTOR STREET OR P.O. BOX: 5255 Hwy 346		00000			
PRIME CONTRACTOR CITY: Pontotoc STATE: MS	ZIP: _	38863			
PRIME CONTRACTOR PHONE #: (662)419-0841 PRIME CONTRACTOR EMAIL:					
FACILITY SITE INFORMATION					
FACILITY SITE NAME: Wild Bill #4					
	med road. For li	ngar projects			
<b>FACILITY SITE ADDRESS</b> (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: 365 Hwy 45 North Alt.  CITY: Starkville STATE: MS COUNTY: Lowndes					
CITY: Starkville STATE: MS COUNTY: Lowndes	ZII	2 <u>39759</u>			
FACILITY SITE TRIBAL LAND ID (N/A If not applicable):  N/A					
LATITUDE: 33 degrees 29 minutes 32 seconds LONGITUDE: -88 degrees 39 minutes		nds			
of the political (of the fire of the project Emiliance Share Form) of the political politi	GPS				
TOTAL ACREAGE THAT WILL BE DISTURBED : about 9 acres	<del>, , , , , , , , , , , , , , , , , , , </del>				
IS THIS PART OF A LARGER COMMON PLAN OF DEVELOPMENT?	YES □	NO 🗹			
IF YES, NAME OF LARGER COMMON PLAN OF DEVELOPMENT: AND PERMIT COVERAGE NUMBER: MSR10					
ESTIMATED CONSTRUCTION PROJECT START DATE:	2019-08-19				
FSTIMATED CONSTRUCTION PROJECT END DATE: 2020-05-30					
ESTIMATED CONSTRUCTION PROJECT END DATE:	YYYY-MM-D				
DESCRIPTION OF CONSTRUCTION ACTIVITY: clearing & grubbing; cut & fill earthwork operations; driveway & building site grading					
PROPOSED DESCRIPTION OF PROPERTY USE AFTER CONSTRUCTION HAS BEEN COMPLETED: truck stop with gasoline and diesel fueling station, convenience store and deli.					
SIC Code 5 4 1 2 NAICS Code 4 4 7 1 1 0					

NEAREST NAMED RECEIVING STREAM: unnamed tributaries to Catalpa 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 on Mhttp://www.deq.state.ms.us/MDEQ.nsf/page/TWB_Total_Maximum_Daily_Load_Section)	YES□ DEQ's web site:	NO⊡
HAS A TMDL BEEN ESTABLISHED FOR THE RECEIVING STREAM SEGMENT?	YES□	NO
ARE THERE RECREATIONAL STREAMS, PRIVATE/PUBLIC PONDS OR LAKES WITHIN ½ MILE DOWNSTREAM OF PROJECT BOUNDRY THAT MAY BE IMPACTED ACTIVITY?	YES□ BY THE CONS	NO TRUCTION
EXISTING DATA DESCRIBING THE SOIL (for linear projects please describe in SWPPP): 92% of soil is KpB2 and 8% KpC2, Kipling silty clay loam. See Wetland Assessment Survey done by Headwaters, Inc., dated April 5, 2019.		
WILL FLOCCULANTS BE USED TO TREAT TURBIDITY IN STORM WATER?	YES□	NO
IF YES, INDICATE THE TYPE OF FLOCCULANT. ☐ ANIONIC POLYACRYL OTHER		
IF YES, DOES THE SWPPP DESCRIBE THE METHOD OF INTRODUCTION, THE LOCAL AND THE LOCATION OF WHERE FLOCCULATED MATERIAL WILL SETTLE?	TION OF INTR YES □	ODUCTION 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 LC	NOI FOR A FACILITY THAT WILL REQUIRE OTHER PERMITS?		YES 🗹	C	
				NO 🗀	
IF YI	ES, CHECK ALL THAT APPLY:   AIR HAZARDOUS WASTE		PRETREATM		
	$\square$ WATER STATE OPERATING $\square$ INDIVIDUAL NPDES		OTHER: MDEQ	Discharge Permit	
IS TH OF A	IE PROJECT REROUTING, FILLING OR CROSSING A WATER CONVEYANC NY KIND? (If yes, contact the U.S. Army Corps of Engineers' Regulatory Branch for	E or pe	YES  ermitting require	NO □ ements.)	
IF TH	IE PROJECT REQUIRES A CORPS OF ENGINEER SECTION 404 PERMIT, PR UMENTATION THAT:	OVI	DE APPROPRI	ATE	
•	The project has been approved by individual permit, or				
•	The work will be covered by a nationwide permit and NO NOTIFICATION to the	Corp	s is required, or		
	The work will be covered by a nationwide or general permit and NOTIFICATION	to th	e Corps is requi	red	
IS A I	LAKE REQUIRING THE CONSTRUCTION OF A DAM BEING PROPOSED? s, provide appropriate approval documentation from MDEQ Office of Land and Wa	ter,	YES 🗆 Dam Safety.)	NO 🗹	
IF TH BE D	IE PROJECT IS A SUBDIVISION OR A COMMERCIAL DEVELOPMENT, HOV ISPOSED? Check one of the following and attach the pertinent documents.	V W	LL SANITARY	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.				
V	Collection and Treatment System will be Constructed. Please attach a copy of the copermit from MDEQ or indicate the date the application was submitted to MDEQ (D	ver late:	of the NPDES di	scharge )	
	Individual Onsite Wastewater Disposal Systems for Subdivisions Less than 35 Lots. of General Acceptance from the Mississippi State Department of Health or certifica engineer that the platted lots should support individual onsite wastewater disposal s	tion	from a registere	of the Letter d professional	
	Individual Onsite Wastewater Disposal Systems for Subdivisions Greater than 35 L feasibility of installing a central sewage collection and treatment system must be ma response from MDEQ concerning the feasibility study must be attached. If a centra is not feasible, then please attach a copy of the Letter of General Acceptance from the certification from a registered professional engineer that the platted lots should supplishosal systems.	de b l col 1e St	y MDEQ. A cop lection and wast ate Department	y of the ewater system of Health or	
INDI	CATE ANY LOCAL STORM WATER ORDINANCE WITH WHICH THE PROJE	CT	MUST COMPL	Y:	
		-			

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)	Date Signed			
Printed Name <sup>1</sup>	Title			

<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

## PRIME CONTRACTOR CERTIFICATION

## LARGE CONSTRUCTION GENERAL PERMIT

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.

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PRIVIE CONTRACTO	JR INFORMATION					
PRIME CONTRACTOR CONTACT PERSON: Adam Stubblefield PHONE NUMBER: 419 0841 PRIME CONTRACTOR COMPANY: AHC Construction Company, LLC						
PRIME CONTRACTOR STREET (P.O. BOX): 5255 Highway 346						
PRIME CONTRACTOR CITY: Pontotoc	STATE: MS ZIP: 38863					
E-MAIL ADDRESS:						
OWNER INFO	DRMATION					
OWNER CONTACT PERSON: Bill Gray	PHONE NUMBER: (662) 489-1198					
OWNER COMPANY NAME: Bill Gray, Inc.						
PROJECT INFORMATION						
PROJECT NAME: Wild Bill #4						
DESCRIPTION OF CONSTRUCTION ACTIVITY: clearing and grubbing operations; cut and fill earthwork operations; driveway construction; site development.						
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: 365 Hwy 45 North Alt.						
	Y: Lowndes					
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.						
Prime Contractor Signature <sup>1</sup>	Date Signed					
Printed Name <sup>1</sup>	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 Permits Division MS Department of Environmental Quality, Office of Pollution Control P.O. Box 2261 Jackson, Mississippi 39225					

Revised: 10/25/16