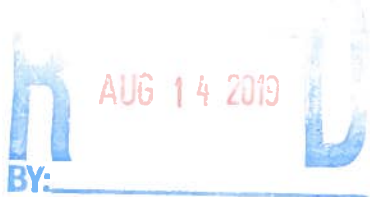


AI 26034



MISSISSIPPI DEPARTMENT OF
ENVIRONMENTAL QUALITY

UNDERGROUND STORAGE TANK GROUNDWATER REMEDIATION NOTICE OF INTENT (USTNOI)

For Coverage under Mississippi's Underground Storage Tank (UST)
Groundwater Remediation General Permit
General Permit MSG12 _____

(NUMBER TO BE ASSIGNED BY STATE)

INSTRUCTIONS

Applicant must be the owner or operator of the remediation system. To avoid unnecessary delays, please be sure that the USTNOI is signed in accordance with permit ACT9, T-7 of the General Permit. The owner or operator that receives coverage is responsible for permit compliance. File at least 30 days prior to proposed discharge.

Required Submittals with the USTNOI Include:

- A USGS quadrangle map or copy extending at least one-half of a mile beyond the site's property boundary. The site location and outfalls must be outlined or highlighted. Quad maps can be obtained from the Office of Geology at 601-961-5523. If a copy is submitted, provide the name of the quadrangle map that is found in upper right hand corner.
- A letter of approval or denial from an available POTW or Wastewater Collection Authority (see permit ACT4, S-6 and MDEQ Wastewater Regulations, Chapter One, Part I.C.1.a.).
- Certified-return receipts from contiguous landowner notifications (not required if the remediation system was operating under a previous permit or coverage - see permit ACT4, S-7).
- A list of water treatment chemicals proposed to be used. Please submit the following information for each specific chemical: name and composition of the additive, discharge concentration, dosage addition rates, frequency of use, EPA registration (if applicable), aquatic species toxicological data and Material Safety Data Sheet (MSDS).

ALL INFORMATION REQUESTS MUST BE ANSWERED (answer "NA" if not applicable)

August 14, 2019

Mississippi Department of Environmental Quality
Attn: Chief, Environmental Permits Division
Office of Pollution Control
P.O. Box 2261
Jackson, MS 39225

**Re: Application for Certificate of Coverage under the Mississippi UST
Groundwater Remediation General Permit**
Rydell's
413 Veterans Boulevard
Calhoun City, Calhoun County, Mississippi 38916
MGPTF No. 8647

To Whom It May Concern:

Enclosed is an "Underground Storage Tank Groundwater Remediation Notice of Intent (USTNOI)", for the above-referenced facility, along with other attachments required to apply for a Certificate of Coverage under the Mississippi UST Groundwater Remediation General Permit. One copy has also been submitted to Ms. Heather Pitts, UST Project Manager.

Thank you for your assistance. If you have any questions or need additional information, please do not hesitate to contact me at (601) 956-8233.

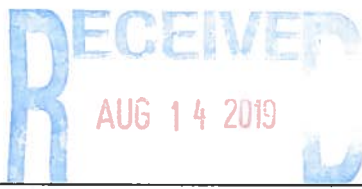
Sincerely,
PPM Consultants, Inc.



Conner McCluer
Project Manager

Enclosures:

RECEIVED
AUG 14 2019
Dept. of Environmental Quality



BY: _____
THE APPLICANT IS ☐ OWNER ☒ OPERATOR (please check one or both)

OWNER INFORMATION

Owner Contact Name: Allen Schrepferman Position: Operations Manager
Owner Company Name: Dutch Oil Company
Owner Street (P.O. Box): Post Office Box 2323
Owner City: Columbus State: MS Zip: 39704
Owner Phone Number (include area code): 662-327-5202

OPERATOR INFORMATION (if different than owner)

Operator Contact Name: Conner McCluer Position: Project Manager
Operator Company Name: PPM Consultants, Inc.
Operator Street (P.O. Box): 289 Commerce Park Drive, Suite D
Operator City: Ridgeland State: MS Zip: 39157
Operator Phone Number (include area code): 601-956-8233

PROJECT INFORMATION

Project Name: Rydell's
Mississippi Groundwater Protection Trust Fund ID No. (if applicable): 8647
Physical Site Address (if not available indicate the nearest named road):
Street: 413 Veterans Boulevard City: Calhoun City
County: Calhoun County Zip: 38916
Latitude: 33 degrees 51 minutes 19.7 seconds Longitude: 89 degrees 18 minutes 22.6 seconds
Method Used to Determine Lat. & Long. (GPS (Please GPS Facility Entrance) or Map Interpolation): Google Earth Pro.

WASTEWATER DISCHARGE INFORMATION

Where is the remediated groundwater proposed to be discharged? ☐ State Waters ☒ POTW/Collection System

Name of Nearest Receiving Stream: NA

Name of POTW: Calhoun City Public Water System

POTW contact, title and telephone number: Kenneth Langford, Waste Water Operator, 662-628-0520

Name of Wastewater Collection Authority (if different from POTW): NA

Wastewater Collection Authority contact, title and telephone number: NA

Proposed rate of flow (gallons/day): 7,200

Describe type of treatment: Soil Vapor Extraction System (SVE) with a liquid ring pump, air water separator, and oil/water separator.

CERTIFICATION

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.

Signature¹ (Must be signed by operator when different than owner)

Date Signed

Printed Name¹

Title

¹This application shall be signed according to the General Permit, ACT9, T-7 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, the mayor, or ranking elected official.

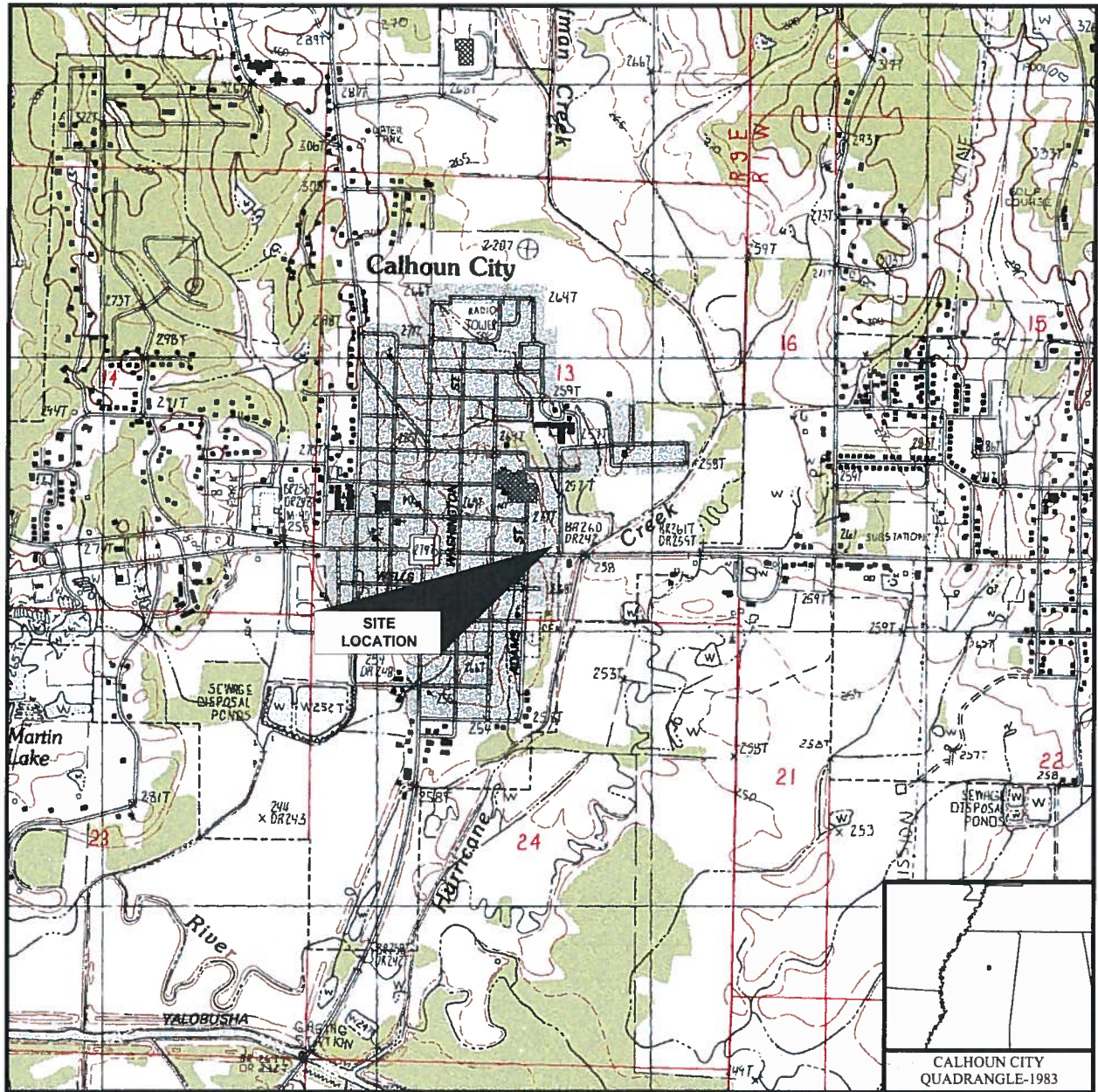
USTNOI forms must be submitted to:

Chief, Environmental Permits Division
MS Dept of Environmental Quality, Office of Pollution Control
P.O. Box 2261
Jackson, Mississippi 39225

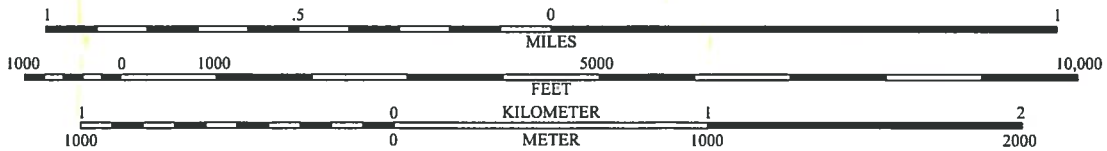
Revised: April 6, 2011

ATTACHMENTS

ATTACHMENT A
SITE LOCATION MAP



SCALE: 1 : 24,000



PPM PPM CONSULTANTS, INC. www.ppmco.com	
DRAWN BY: BWH	DRAWN DATE: 02/06/17
PROJECT NUMBER: 316725	BILLING GROUP:

**DUTCH OIL COMPANY
RYDELL'S**
413 VETERANS AVENUE
CALHOUN CITY, MISSISSIPPI
MGPTF NO. 8647

SITE LOCATION MAP

FIGURE
NUMBER

1

ATTACHMENT B
POTW NOTIFICATION AND APPROVAL FORM

POTW AND WASTEWATER COLLECTION AUTHORITY NOTIFICATION AND APPROVAL FORM



INSTRUCTIONS

The Mississippi Department of Environmental Quality (MDEQ) must receive approval from the local POTW and Wastewater Collection Authority (if different entities) in order for the applicant to obtain coverage under Mississippi's Underground Storage Tank Groundwater Remediation General Permit (see permit ACT4, S-6). Once both sections of the form have been completed, it shall be submitted to the address below. Coverage is required prior to discharging remediated groundwater to a POTW or Wastewater Collection Authority. If you have any questions, please contact the Service and Miscellaneous Industries Branch at 601/961-5171.

APPLICANT (please print or type)

PPM Consultants, Inc. [name of applicant] is applying for coverage under Mississippi's Underground Storage Tank Groundwater Remediation General Permit (**copy attached**). Remediated groundwater, associated with a leaking underground petroleum storage tank, is proposed to be discharged from a site located at 413 Veterans Boulevard, Calhoun City, Calhoun County, Mississippi [complete address with county]. Approximately 7,200 [gallons per day] of treated groundwater will be discharged to the Calhoun City Public Water System [name of local POTW or Wastewater Collection Authority]. The treated groundwater will be discharged in accordance with the conditions, requirements and limitations of Mississippi's Underground Storage Tank Groundwater Remediation General Permit.

POTW and WASTEWATER COLLECTION AUTHORITY APPROVAL

I certify that I am a duly authorized representative of this POTW (or Collection Authority) and directly responsible for managing daily operations. I am familiar with the requirements of the above referenced General Permit and acknowledge that, by signing this form, I am providing MDEQ with written approval of this proposed discharge to our treatment works.

Kenneth Langford
POTW Authorized Signature

KENNETH LANGFORD
Printed Name

WASTOR WATER OPERATOR
Title

8-8-91 662 628 0620
Date Signed Daytime Telephone

Collection Authority Authorized Signature

Printed Name

Title

Date Signed

Daytime Telephone

This form shall be submitted to:

Chief, Environmental Permits Division
MS Dept of Environmental Quality, Office of Pollution Control
P.O. Box 2261
Jackson, Mississippi 39225

Revised: April 6, 2011

ATTACHMENT C
CONTIGUOUS LANDOWNER NOTIFICATIONS

**CONTIGUOUS LANDOWNER NOTIFICATION OF
CORRECTIVE ACTION AND SUBSEQUENT DISCHARGE
OF TREATED GROUNDWATER DUE TO LEAKING
UNDERGROUND STORAGE TANK(S)**
(see ACT4, S-7 of the USTGP)



Underground storage tanks located at Rydehl's (413 East Veteran Avenue, Calhoun City,
Calhoun County, Mississippi) [street address with city and county]
have been determined to have released motor fuel. In order to protect the environment and public health, a
cleanup process must be started. The cleanup involves bringing a trailer contained groundwater treatment
system to the site, pumping out the contaminated groundwater, treating it and discharging the treated water
into the city wastewater sewer to be further treated or, in rare cases, to State waters. The recovered fuel is
disposed at an offsite permitted facility. The time a unit is on site averages approximately three years.

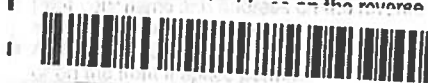
PPM Consultants, Inc. [applicant's name]
289 Commerce Park Drive, Suite D, Ridgeland, Mississippi 39157 [address]
(601) 956-8233 [phone number] is proposing to begin the cleanup process and discharge treated
groundwater to the Calhoun City Water Works System [name of
receiving stream or Publicly Owned Treatment Works or Wastewater Collection Authority]. This
notification is to provide you with an opportunity to comment to the Mississippi Department of
Environmental Quality Permit Board before the Board makes a final decision regarding the matter. No
discharge of treated groundwater will occur unless the Board grants coverage of this activity under the
General Permit for Underground Storage Tank Groundwater Remediation. This notice has been sent to you
by Certified Mail - Return Receipt Requested. If you have no comments regarding this proposed facility, no
response is necessary and the permitting process will continue. If you have any comments, they must be
received by the Mississippi Department of Environmental Quality within 10 days of receipt of this
correspondence. **The Department of Environmental Quality is limited in its review of this project to
those environmental issues in which statutory authority has been given.** If you have any questions you
may contact the Service and Miscellaneous Branch of MDEQ at (601) 961-5171. Any comments relative to
zoning or economic and social impacts are within the jurisdiction of local zoning and planning authorities
and should be addressed to those authorities. Comments are to be mailed to the following address:

Chief, Environmental Permits Division
MS Department of Environmental Quality, Office of Pollution Control
P. O. Box 2261
Jackson, Mississippi 39225

Revised: April 6, 2011

SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired.



1. Article Addressed to:

Ms. Melissa Griffin
38 CR 420
Calhoun City, MS 38916

2. Article Number
(Transfer from service label)

7016 1970 0000 0168 2783

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x *Melissa Griffin* ☐ Agent ☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

Melissa Griffin 5.23.19

D. Is delivery address different from Item 1? ☐ Yes

If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

316725 PMT

SENDER: COMPLETE THIS SECTION

- Complete Items 1, 2, and 3. Also, complete Item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse



1. Article Addressed to:

Mr. Damon Scott Parker
Mr. Joshua Craig Parker
PO Box 1124
Calhoun City, MS 38916

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x *Damon Scott Parker*

☐ Agent

☐ Addressee

B. Received by (Printed Name)

Tanya Parker

C. Date of Delivery

5-23-19

D. Is delivery address different from Item 1?

☐ Yes

If YES, enter delivery address below:

☒ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Number

(Transfer from service label)

7016 1970 0000 0168 2769

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1840

613119 Received Dutch Oil - Rydell's 316725

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- ... this card to the back of the mailpiece.



Mr. John Charles Stewart, Jr.
PO Box 333
Walthall, MS 39771

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Agent
x Linda Stewart ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
Linda Stewart *5-31-19*

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No
Walthall P.O.

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number
(Transfer from service label)

7016 1970 0000 0168 2776

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

ATTACHMENT D
WATER TREATMENT CHEMICALS LIST

NO CHEMICALS WILL BE REQUIRED
