AT#75852



$MSR10 \ \underline{\cancel{6}} \ \underline{\cancel{0}} \ \underline{\cancel{0}} \ \underline{\cancel{0}}$ (number to be assigned by state)

APPLICANT IS THE:	✓ OWNER □ PR	IME CONTRACTOR		8)			
OWNER CONTACT INFORMATION							
owner contact person: Kate Slattery							
OWNER COMPANY LEGAL N	NAME: Medline Indus	stries, Inc.					
OWNER STREET OR P.O. BOX	$_{\mathrm{X}:}$ Three Lakes Driv	ve					
owner CITY: Northfield	**	STATE: Illinois	_{ZIP:} 60	093			
OWNER CITY: Northfield OWNER PHONE #: (847)	43-4397 own	ER EMAIL: kslattery	@medline.com				
PRIME CONTRACTOR CONTACT INFORMATION							
PRIME CONTRACTOR CONT							
PRIME CONTRACTOR COM	PANY LEGAL NAME: Als	ton Construction					
PRIME CONTRACTOR STREET OF BOX BOX. 180 Raritan Center Parkway							
PRIME CONTRACTOR CITY:	Edison	_{STATE:} New Je	rsey ZIP: 08	3837			
PRIME CONTRACTOR CITY: PRIME CONTRACTOR PHON	TE #: (⁷³²) 379-5723 PRI	ME CONTRACTOR EMAI	L: JDeOliveira@alst	onco.com			
FACILITY SITE INFORMATION							
FACILITY SITE NAME. Medi		INFORMATION					
FACILITY SITE NAME: Medline Southaven FACILITY SITE ADDRESS (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.)							
				ar projects			
STREET: Northeast of	Star Landing Rd at Hig	ghway 51					
				38654			
FACILITY SITE TRIBAL LAN LATITUDE: 34 degrees 54	D ID (N/A If not applicable)	:	0 44				
LATITUDE: 34 degrees 34	minutes 39 seconds LC	NGITUDE: 89 degrees 5	minutes 44 second	ls			
LAT & LONG DATA SOURCE			Google Maps				
TOTAL ACREAGE THAT WIL	LL BE DISTURBED 1: 74.	97±					
IS THIS PART OF A LARGER	COMMON PLAN OF DEV	ELOPMENT?	YES \square	NO 🗹			
IF YES, NAME OF LARGER C AND PERMIT COVERAGE	OMMON PLAN OF DEVEL GE NUMBER: MSR10	LOPMENT:					
ESTIMATED CONSTRUCTION PROJECT START DATE:		:	2019-09-01				
ESTIMATED CONSTRUCTION DROVECT END DATE.			YYYY-MM-DD 2020-11-01				
ESTIMATED CONSTRUCTION PROJECT END DATE:			YYYY-MM-DD				
DESCRIPTION OF CONSTRUCTION ACTIVITY: Site development for Medline industrial facility							
PROPOSED DESCRIPTION OF Medline industrial facility	F PROPERTY USE AFTER	CONSTRUCTION HAS BI	EEN COMPLETED:				
SIC Code 3 9 9 9 N	NAICS Code 3 3 9 9 9 9	9_					



NEAREST NAMED RECEIVING STREAM: Hurricane 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 MDEQ's web site: http://www.deq.state.ms.us/MDEQ.nsf/page/TWB_Total_Maximum_Daily_Load_Section)							
HAS A TMDL BEEN ESTABLISHED FOR THE RECEIVING STREAM SEGMENT? YES□ NO□							
ARE THERE RECREATIONAL STREAMS, PRIVATE/PUBLIC PONDS OR LAKES YES \square NO \square WITHIN ½ MILE DOWNSTREAM OF PROJECT BOUNDRY THAT MAY BE IMPACTED BY THE CONSTRUCTION ACTIVITY?							
EXISTING DATA DESCRIBING THE SOIL (for linear projects please describe in SWPPP): See Appendix I - Web Soil Survey Data in SWPPP.							
WILL FLOCCULANTS BE USED TO TREAT TURBIDITY IN STORM WATER? YES□ NO☑							
IF YES, INDICATE THE TYPE OF FLOCCULANT. ANIONIC POLYACRYLIMIDE (PAM) OTHER							
IF YES, DOES THE SWPPP DESCRIBE THE METHOD OF INTRODUCTION, THE LOCATION OF INTRODUCTION AND THE LOCATION OF WHERE FLOCCULATED MATERIAL WILL SETTLE? YES \square NO \square							

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	CNOI FOR A FACILITY THAT WILL REQUIRE OTHER PERMITS?		YES 🗹	NO □		
IF YI	ES, CHECK ALL THAT APPLY: AIR HAZARDOUS WASTE		PRETREAT			
	□ WATER STATE OPERATING □ INDIVIDUAL NPDES	Ø	OTHER: N	ationwide Permit_		
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 THE PROJECT REQUIRES A CORPS OF ENGINEER SECTION 404 PERMIT, PROVIDE APPROPRIATE DOCUMENTATION THAT:						
•	The project has been approved by individual permit, or					
 The work will be covered by a nationwide permit and NO NOTIFICATION to the Corps is required, or 						
•	The work will be covered by a nationwide or general permit and NOTIFICATI	ON to th	e Corps is re	quired		
	LAKE REQUIRING THE CONSTRUCTION OF A DAM BEING PROPOSED s, provide appropriate approval documentation from MDEQ Office of Land and		YES □ Dam Safety.)	NO 🗹		
IF THE PROJECT IS A SUBDIVISION OR A COMMERCIAL DEVELOPMENT, HOW WILL SANITARY SEWAGE BE DISPOSED? Check one of the following and attach the pertinent documents.						
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 will be Constructed. Please attach a copy of t permit from MDEQ or indicate the date the application was submitted to MDE	he cover Q (Date:	of the NPDE	S 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 WATER ORDINANCE WITH WHICH THE PR	OJECT	MUST COM	PLY:		
Desoto County Stormwater Ordinance						
						

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 for accordance with a system designed to assure that qualified personnel properly gathered and evaluated yresponsible for submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that 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

Aver Via Pundert

Title

Signature of Applicant¹ (owner or prime contractor)

Printed Name

¹This application shall be signed as follows:

- For a corporation, by a responsible corporate officer.

For a municipal, state or other public facility, by principal executive officer, mayor, or ranking elected official

Please submit the LCNOI form to:

MS Department of Environmental Quality, Office of Pollution Control

P.O. Box 2261

Jackson, Mississippi 39225

