

AT 7102

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FEB 02 2021

Environmental Permits for Industrial Facilities

Request for Transfer of Permit, General Permit Coverage and/or Name Change

MSG 201529

Instructions: For Ownership Change-Complete all Items on Page 1 (except Item VIII) and Page 2 (reverse side).

For Name Change Only-Complete Items I, II, V, VI, VII, VIII, and Page 2 (reverse side).

Note-This form should be submitted to MDEQ when a transferal date is finalized but prior to the actual transfer.

<p>Item I. <u>Owner Now</u> <u>CYBELLE</u></p> <p>Facility Name: <u>CYBELLE FARMS (NGUYEN)</u></p> <p>Location: (Do Not Use P.O. Box)</p> <p>Street: <u>188 CONERLY RD</u></p> <p>City: <u>OAK VALE</u> State: <u>MS</u> Zip: <u>39656</u></p> <p>County: <u>LAWRENCE</u></p> <p>Telephone: (<u>512</u>) <u>586-7102</u></p>	<p>Item II. <u>New Owner</u></p> <p>Responsible official after transfer or name change:</p> <p>Name: <u>Yubini David Munoz</u></p> <p>Title: <u>Owner</u></p> <p>Mailing Address::</p> <p>Street/P.O. Box: <u>31 W.B. Speights Rd</u></p> <p>City: <u>Oak Vale</u> State: <u>MS</u> Zip: <u>39656</u></p> <p>Telephone (<u>240</u>) <u>286-8578</u></p>		
<p>Item III.</p> <p>Previous Permittee: _____</p> <p>Mailing Address: _____</p> <p>Street/P.O. Box: _____</p> <p>City: _____ State: _____ Zip: _____</p> <p>Telephone: (_____) _____</p>	<p>Item IV.</p> <p>New Permittee: <u>188 Conerly Rd</u></p> <p>Mailing Address: _____</p> <p>Street/P.O. Box: _____</p> <p>City: <u>Oak Vale</u> State: <u>MS</u> Zip: <u>39656</u></p> <p>Telephone: (<u>240</u>) <u>286-85-78</u></p>		
<p>Item V.</p> <p>Industrial Activity SIC Code: _____</p> <p>Brief Description: <u>Broiler Breeder (4) houses</u></p>	<p>Item VI.</p> <p>Will Facility Operations Change? Yes _____ No <input checked="" type="checkbox"/></p> <p>If yes, the appropriate applications and permits may require modification prior to change.</p>		
<p>Item VII.</p> <p>Will Facility Name Change? Yes <input checked="" type="checkbox"/> No _____</p> <p>If Yes, Provide New Name for Permit Coverage.</p> <p>New Name: <u>Munoz & Daughters Farm</u></p>	<p>Item VIII.</p> <p>Signature for Name Change</p> <p>Print Name: <u>Yubini David Munoz</u></p> <p>Authorized Signature: <u>[Signature]</u></p> <p>Title: <u>Owner</u> Date: <u>1-29-21</u></p>		
<p>Item IX.</p> <p>We the undersigned request transfer of permit(s) and/or permit coverage(s) listed on the backside of this form.</p> <p>From: <u>CYBELLE NGUYEN</u></p> <p>To: <u>[Signature]</u> Acquisition Date: <u>1-29-21</u></p> <p>By signature below, the recipient that they are aware of the requirements of the permit(s) and agrees to accept responsibility and liability for the permit(s) listed on the back of this document. By signature below, the previous permittee is requesting that the permit(s) and/or permit coverage(s) be transferred to the recipient. The transfer of the permit(s) or permit coverage(s) will be by written notification from the Office of Pollution Control (OPC). The OPC may require submittal of information regarding financial capability and past compliance history of the recipient.</p> <table> <tr> <td> <u>Yubini David Munoz</u> Print New Permittee Name <u>[Signature]</u> New Authorized Signature <u>Owner</u> Title Date <u>1-29-21</u> </td> <td> <u>CYBELLE NGUYEN</u> Print Previous Permittee Name <u>[Signature]</u> Previous Authorized Signature <u>OWNER</u> Title Date <u>1/29/21</u> </td> </tr> </table> <p><small>1 A Permittee is a company or individual that has been issued an individual permit or coverage under a general permit. 2 Authorized Signature must be owner or in the case of a corporation, a corporate officer as defined in Regulations APC-S-2 and WPC-1.</small></p>		<u>Yubini David Munoz</u> Print New Permittee Name <u>[Signature]</u> New Authorized Signature <u>Owner</u> Title Date <u>1-29-21</u>	<u>CYBELLE NGUYEN</u> Print Previous Permittee Name <u>[Signature]</u> Previous Authorized Signature <u>OWNER</u> Title Date <u>1/29/21</u>
<u>Yubini David Munoz</u> Print New Permittee Name <u>[Signature]</u> New Authorized Signature <u>Owner</u> Title Date <u>1-29-21</u>	<u>CYBELLE NGUYEN</u> Print Previous Permittee Name <u>[Signature]</u> Previous Authorized Signature <u>OWNER</u> Title Date <u>1/29/21</u>		

Mississippi Department of Environmental Quality/Office of Pollution Control
P.O. Box 2261
Jackson, Mississippi 39225-2261
(601) 961-5171

<p>Item X. Storm Water</p> <p>(Check One)</p> <p><input type="checkbox"/> A Storm Water Pollution Prevention Plan (SWPPP) is not required for the site.</p> <p><input type="checkbox"/> The recipient certifies that they have received a copy of the Office of Pollution Control approved SWPPP from the original owner.</p> <p><input type="checkbox"/> The recipient is submitting a new SWPPP, which is attached to this form.</p> <p><input type="checkbox"/> A copy of the SWPPP cannot be obtained from the original owner.</p>	<p>Item XI. Hazardous Waste ID Number</p> <p>EPA ID No. _____</p> <p>(Check One)</p> <p><input type="checkbox"/> An EPA Hazardous Waste ID Number is not required for the site.</p> <p><input type="checkbox"/> The site's EPA ID Number is listed above. There is no change in the type or amount of hazardous waste generated on site.</p> <p><input type="checkbox"/> There is a change in the type or amount of hazardous waste generated and a Notification of Regulated Waste Activity Form is attached.</p>
<p align="center">Item XII. Permit(s) and/or Coverage(s) to be Transferred</p>	
<p>Permit Type: <u>Poultry</u></p> <p>Permit/Coverage No.: <u>MSG201529</u></p> <p>Permit Issuance Date: <u>7/1/2020</u></p> <p>Date of General Permit Coverage: <u>October 2020</u></p> <p>Permit Expiration Date: <u>October 2025</u></p>	<p>Permit Type: _____</p> <p>Permit/Coverage No.: _____</p> <p>Permit Issuance Date: _____</p> <p>Date of General Permit Coverage: _____</p> <p>Permit Expiration Date: _____</p>
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