MAJOR MODIFICATION FORM FOR LARGE CONSTRUCTION GENERAL PERMIT

INSTRUCTIONS



Coverage No. MSR10 8 3 6 1 County Montgomery

Coverage recipients shall notify the Mississippi Department of Environmental Quality at least 30 days in advance of the following activitie (check all that apply). This form should be submitted with a modified Storm Water Pollution Prevention Plan (SWPPP), updated USGs topographic map, Corps of Engineers Section 404 documentation and wastewater collection and treatment information, as appropriate.			
SWPPP details have been developed and are ready for MDEQ review for subsequent phases of an existing, covered project.			
"Footprint" identified in the original LCNOI is proposed to be enlarged.			
of new phases of existing subdivision Coverage recipients are authorized of phases, under the conditions of the G such as changes of erosion and sedim	s must apply for separate pe to discharge storm water ass eneral Permit, <u>only upon rec</u> ent controls used, must be in	ermit coverage throug sociated with propose eipt of written notifics accordance with ACT	Construction General Permit. A different developer the the submittal of a new complete LCNOI package. It expansions of existing subdivisions or subsequent ation of approval by MDEO. All other modifications, 76, S-1 (6) and S-2 (7) of the General Permit.
ALL INFORMATION MUST BE COMPLETED (indicate "N/A" where not applicable)			
COVERAGE RECIPIENT INFORMATION			
COVERAGE RECIPIENT CONTACT NAME: Dan Bowen			TEL#(803) 315-2408
Righer Sammill Wingra Inc			
STREET OR P.O. BOX: 331 Coli	seum Drive		
CITY: Newton	STATE: MS	ZIP: 39345	E-MAIL: dbowen@blewerlumber.com
PROJECT INFORMATION			
PROJECT NAME: Biewer Sawmill Winona			
CITY: Winona			
ADDITIONAL ACREAGE TO BE DISTURBED: 4.0 TOTAL			OTAL PROJECT ACREAGE: 108.0
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 (must be signed by coverage recipient)			
Timothy J. Blewer			President
Printed Name		_	Title
Please submit this form to: Chief, Environmental Permits Division MS Department of Environmental Quality, Office of Pollution Control P.O. Box 2261 Jackson, Mississippi 39225			

Revised: 12/12/16