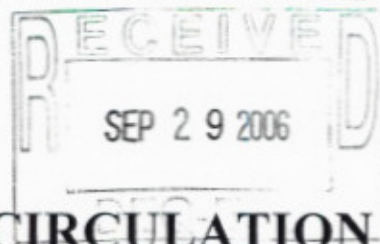


AI #24337
Grp 00060001



WET DECK LOG SPRAY WITH RECIRCULATION NOTICE OF INTENT

FOR COVERAGE UNDER WET DECK LOG SPRAY WITH RE-CIRCULATION
GENERAL NPDES PERMIT MSG170018
(NUMBER TO BE ASSIGNED BY STATE)

FILE AT LEAST 30 DAYS PRIOR TO THE COMMENCEMENT OF THE REGULATED INDUSTRIAL ACTIVITY

INSTRUCTIONS

Submittals with this Notice of Intent (NOI) must include an United States Geological Survey (USGS) quadrangle map (or a copy) showing site location and extending at least ½ mile beyond the site's property boundary and a drawing showing the dimensions of the wet deck recirculation pond(s) and the timber wet storage area(s). Maps can be obtained from the MDEQ, Office of Geology at 601-961-5523. For new or expanding facilities, detailed plans and specifications must be submitted for the wet deck log spray recirculation pond(s) by a registered Professional Engineer.

As part of this NOI, if applicable, all previously approved boiler chemical additive approval notifications must be submitted. At a minimum, the exact name of the chemical, the date of the facility's notification submittal, and MDEQ's approval letter must be provided.

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

THE APPLICANT IS ☐ OWNER OR ☐ OPERATOR? (CHECK ONE OR BOTH)

OWNER INFORMATION

Owner Contact Name & Position: Mr. Craig Pharr
Owner Company Name: Marietta Wood Supply, Inc.
Owner Street or (P.O. Box): 394 Highway 371 P.O. Box 225
Owner City: Marietta State: MS Zip: 38856
Owner Phone Number (Include Area Code): (662) 728-9874

OPERATOR INFORMATION (if different than owner)

Operator Contact Name & Position: _____
Operator Company: _____
Operator Street (P.O. Box): _____
Operator City: _____ State: _____ Zip: _____
Operator Phone Number (Include Area Code): _____

FACILITY INFORMATION

Facility Name: Marietta Wood Supply, Inc.

Nature of Business (Include 4 - digit Standard Industrial Classification Code (SIC) and description):

SIC Code: 2421 Sawmills and Planing Mills, General

Physical Site Address (if not available indicate the nearest named road):

Street: 349 Highway 371 City: Marietta

County: Prentiss Zip: 38856

Geographic Position:

Latitude: 34 degrees 30 minutes 46 seconds

Longitude: 88 degrees 28 minutes 19 seconds

Method of Collection: ☒ G3 - Differential

☐ G5 - Autonomous/SA Off

☐ Interpolation - Map

Point Description: ☐ Facility Entrance

☒ Center of Facility

WET DECK LOG SPRAY RECIRCULATION SYSTEM INFORMATION

How many outfalls/release points are eligible for coverage? 2

Siting Criteria (For New Construction Only):

MDEQ considers wet deck log spray recirculation systems to be wastewater treatment systems. According to the "State of Mississippi Wastewater Regulations", wastewater treatment systems must be 150 feet from the nearest adjoining property line unless the property is zoned for commercial or industrial use or is being used as such.

Will the pond(s) and timber wet storage area(s) meet the siting criteria: ☒ Yes ☐ No

If no, is adjoining property zoned for commercial or industrial use or being used as such? ☐ Yes ☐ No

If siting criteria cannot be met, please complete a Property Line Buffer Zone Waiver Form. This form can be found on MDEQ's website at MDEQ - Timber and Wood Products Branch webpage or be obtained from MDEQ Environmental Permits Division by calling (601) 961-5623.

Geographic Position for outfall(s) from Wet Deck Log Spray Recirculation Pond(s) (If the applicant has more than outfall/release point eligible for coverage, please use the space to the right.):

Latitude: 34 degrees 30 minutes 50 seconds Latitude: 34 degrees 30 minutes 40 seconds

Longitude: 88 degrees 28 minutes 18 seconds Longitude: 88 degrees 28 minutes 16 seconds

Method of Collection: ☒ G3 - Differential
☐ G5 - Autonomous/SA Off
☐ Interpolation - Map

Receiving Stream(s) (If more than one outfall is covered, indicate the respective receiving stream for each outfall.):

Ditch then to an unnamed stream (see attached map)

DOCUMENTATION OF COMPLIANCE WITH OTHER REGULATIONS/REQUIREMENTS

Is this notice for a facility that will require other permits? ☐ Yes ☒ No If yes, circle which one(s): Air, Hazardous Waste, Pretreatment, Water State Operating, Individual NPDES, or Other(s):

How will sanitary sewage be collected and treated? Septic Tank

Will the facility route boiler blowdown, exterior equipment or exterior vehicle washwater, or any other type wastewater to the wet deck log spray recirculation pond(s)? ☐ Yes ☒ No If yes, please indicate in gallons per day the volume of each wastestream. (Please be aware that facilities which route exterior equipment or exterior vehicle washwater where detergents or other chemicals are being used are not eligible to obtain coverage under this general permit.):

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.

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

9.25.06
Date Signed

Craig Pharr
Printed Name

President
Title

¹This 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.

After signing please mail to:

Environmental Permits Division, Office of Pollution Control
P.O. Box 10385
Jackson, MS 39289-0385