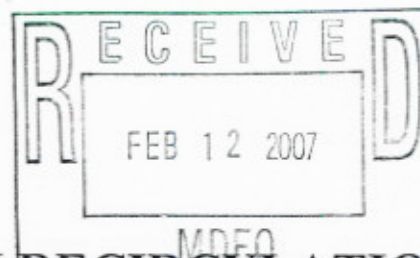


AI #1963

GNP20070001

MISSISSIPPI DEPARTMENT OF  
ENVIRONMENTAL QUALITY

# WET DECK LOG SPRAY WITH RECIRCULATION NOTICE OF INTENT

FOR COVERAGE UNDER WET DECK LOG SPRAY WITH RE-CIRCULATION  
GENERAL NPDES PERMIT MSG170023  
(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: Tommy Smith, CFO  
Owner Company Name: Price Companies, Inc.  
Owner Street or (P.O. Box): PO Box 536  
Owner City: Monticello State: AR Zip: 71655  
Owner Phone Number (Include Area Code): 870.367.9751

## OPERATOR INFORMATION (if different than owner)

Operator Contact Name & Position: Lev Cavin, Manager  
Operator Company: Gloster Chips, Inc.  
Operator Street (P.O. Box): PO Box 309  
Operator City: Gloster State: MS Zip: 39638  
Operator Phone Number (Include Area Code): 601.225.4120

## FACILITY INFORMATION

Facility Name: Gloster Chips, Inc.

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

SIC Code: 2 4 9 9 Wood Production Not Elsewhere Classified

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

Street: 600 East Carney

City: Gloster

County: Amite

Zip: 39638

Geographic Position:

Latitude: 31 degrees 11 minutes 09 seconds

Longitude: 91 degrees 01 minutes 47 seconds

Method of Collection: ☐ G3 - Differential

☐ G5 - Autonomons/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? 1

Siting Criteria (For New Construction Only): Not new construction.

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: 31 degrees 11 minutes 00 seconds

Longitude: 91 degrees 01 minutes 52 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.): Tributary to Little Beaver Creek

## 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):


Stormwater

How will sanitary sewage be collected and treated? Transported to Gloster's municipal collection and treatment system

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.

  
Signature<sup>1</sup> (Must be signed by operator when different than owner)

2/5/07  
Date Signed

Dick Carmical

Vice President

Printed Name<sup>1</sup>

Title

<sup>1</sup>This 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