AI#11951 GAP20070001

Mississippi Department of Environmental Quality
Office of Pollution Control - Environmental Permits Division

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# DRY LITTER POULTRY CONCENTRATED ANIMAL FEEDING OPERATIONS GENERAL NPDES PERMIT NUMBER MSG1504 55

(Number to be assigned by State)

#### INSTRUCTIONS

APPLICANT MUST BE THE OWNER AND/OR OPERATOR OF THE PROPERTY ASSOCIATED WITH THE REGULATED ACTIVITY. ALL SUBMITTALS MUST INCLUDE THE FOLLOWING:

- A NUTRIENT MANAGEMENT PLAN
- A USGS QUAD MAP OR A COPY SHOWING THE SITE LOCATION
- A SITE DRAWING
- A STORM WATER POLLUTION PREVENTION PLAN (SWPPP), IF THERE IS TO BE CONSTRUCTION WORK TOTALING ONE ACRE OR MORE.

USGS QUAD MAPS SUBMITTED MUST EXTEND AT LEAST ONE MILE BEYOND THE PROPERTY BOUNDARIES OF THE FACILITY AND MUST CLEARLY SHOW ALL SPRINGS AND SURFACE WATER BODIES IN THE AREA, PLUS ALL DRINKING WATER WELLS WITHIN ¼ MILE OF THE FACILITY. ADDITIONALLY, ALL PUBLIC DRINKING WELLS WITHIN ONE MILE OF THE FACILITY MUST BE IDENTIFIED.

THE SITE DRAWING MUST SHOW THE PROPERTY BOUNDARIES AND MUST INDICATE THE APPROXIMATE LOCATION OF EACH EXISTING AND PROPOSED STRUCTURE (HOUSE, INCINERATOR, DEAD BOX, LAND APPLICATION FIELD, COMPOSTING AREA, ETC). THE SITE DRAWING MUST INCLUDE A COMPASS DIRECTION HEADER.

SUBMIT AT LEAST 180 DAYS PRIOR TO COMMENCEMENT OF CONSTRUCTION OR PLANNED OPERATIONS. ALL FORMS MUST BE SUBMITTED TO: CHIEF, ENVIRONMENTAL PERMITS DIVISION, MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY, P.O. BOX 10385, JACKSON, MISSISSIPPI 39289-0385.

ALL QUESTIONS MUST BE ANSWERED. FOR THIS APPLICATION TO BE CONSIDERED, ALL QUESTIONS ON THIS FORM MUST BE ANSWERED. IF AN ITEM DOES NOT APPLY, ENTER "N/A" (NOT APPLICABLE) TO SHOW THAT YOU CONSIDERED THE QUESTION.

## I. GENERAL INFORMATION:

### CONTACT AND FACILITY INFORMATION

Name of Owner:James E. (Buddy) Bultler		
Facility Name: _James E. (Buddy) Bultler Poultry		
Mailing Address:		
Street or P.O. Box: 277 CR 225		
City:Shubuta	State:MS	Zip: 39360
Physical Site Address: (If the physical address is n intersection.)	ot available indicate the ne	earest named road or
Street (can not be a P.O. Box)Same a	s Mailing Address	
City:	State:	Zip:
County:Clarke		
Latitude (degrees/min/sec):		
Longitude (degrees/min/sec):		
Nearest named receiving stream:Mill C	reek	
Facility Telephone No. (Include Area Code): _601	-787-3248	
Facility Fax No. (Include Area Code):		
Facility Cell Phone No. (Include Area Code): _601	-787-3248	
Other Contact Phone Numbers (Include Area Code)	:601-433-1207	
TYPES O	F ACTIVITY	
Check all that apply:		
x New dry litter poultry operation		
Proposed dry litter poultry operation		
☐ Construction and/or operation of an incinerator		
x New or expanding operations that will require of	construction activities distu	arbing one acre or more

## II. CONCENTRATED POULTRY FEEDING OPERATION CHARACTERISTICS:

TYPE AND AMOUNT OF CHICKENS Check all that apply and indicate the amounts	Check any of the follow	MENT PRACTICES (BMP) ving BMPs that will be implemented
n	to control runoff and pro	otect water quality
x Boilers (SIC 0251):	x Buffers	
☐ Layers (SIC 0252):	x Setbacks Conservation to	illage
TOTAL AMOUNT: _150,000	Constructed we	
	Infiltration field	d
x Housed under roof	Grass filter	
Open confinement	Terrace	
TYPES OF DRY LITTER CONTAINMEN Check all that apply and indicate total days of storage a	NT, STORAGE, AND CAPAC	ITY
Type of Storage	Total Number of Days	Total Capacity (tons)
x Roofed Storage Shed	365	50
☐ Concrete Pad		
☐ Impervious Soil Pad		
Other: Specify		
Are all poultry houses, that have been construall occupied dwellings or commercial establis all adjoining property lines? x Yes  Are all incinerators at least 150 feet from the light commercial buildings not owned by the light commercial buildings not owned by the NOTE: If answered no to any of these questi wavier must be completed by all affected proportionary Public. A copy of the Dry Litter Buffe <a href="http://www.deq.state.ms.us/MDEQ.nsf/page/6">http://www.deq.state.ms.us/MDEQ.nsf/page/6</a> or call (601) 961-5171.	hments not owned by the application.  No, attach wavier  nearest residential or recreational applicant?  x Yes  ons then attach a completed Pour perty owners and notarized by a creation.	ant and at least 150 feet from al area, all dwellings, and all No, attach wavier altry Buffer Zone Waiver. The State of Mississippi appointed
CONTRACT INFOMATION  Is this facility a contract operation? x Ye  If yes, what is the name and address of the int		
Name: _Wayne Farms		
Address: 525 Mississippi Ave, Laurel MS 39440		

Attach an USGS quad map or copy that extends at least one mile beyond the property boundaries of the facility and clearly show all springs and surface water bodies in the area, plus all drinking water wells within ¼ mile of the facility. Additionally, all public drinking wells within one mile of the facility must be identified. Quad maps can be obtained from MDEQ Office of Geology at (601) 961-5523.
Attach a site drawing showing the property boundaries and must indicate the approximate location of each existing and proposed structure (house, incinerator, dead box, land application field, composting area, etc). The site drawing must include a compass direction header.
NUTRIENT MANAGEMENT PLAN Answer the following
Has a nutrient management plan been developed? x Yes  No
If yes, when was the nutrient management plan submitted? Date: _11/29/07
If no, when will the nutrient management plan be developed? Date:
Is a nutrient management plan already being implemented for the facility? x Yes   No
The date of the last revision of the nutrient management plan. Date:6/12/2000
What is the estimated amount of litter generated per year?882 tons/year
Total acreage needed for land application:233.9
Total acreage available for land application:233.9
Will a third party remove litter off site? x Yes  No
If yes, how much litter will be transferred to other persons per year?500 tons/yea
If not land applying, describe alternative use(s) of the litter:

ATTACHMENTS

#### III. CONSTRUCTION AND/OR OPERATION OF A POULTRY MORTALITY

#### INCINERATOR

x Check this box if this section does not apply

**NOTE**: Coverage for construction and/or operation of poultry mortality incinerators is for incinerators that have previously submitted approved stack test. For a list of incinerators that have approved stack tests on file please visit <a href="http://www.deq.state.ms.us/MDEQ.nsf/page/epd\_AgriculturalBranchEPD?OpenDocument">http://www.deq.state.ms.us/MDEQ.nsf/page/epd\_AgriculturalBranchEPD?OpenDocument</a> or call (601) 961-5171.

Carcasses generated at facilities other than the one identified in this NOI are not permitted for incineration under this coverage. Only chicken carcasses generated on site are permitted for incineration. All other materials such as leaves, trash, and construction debris, are strictly forbidden.

MANUFACTURER'S INFORMATI	ION TYI	PE OF INCINERATOR	
Manufacturer Name:	🗅 :	☐ Single chamber	
Model Number:		☐ Multiple chamber	
Capacity (tons/hour):		Other, describe	
Total number of incinerators on site:			
Please provide the manufacture date for where installed on site in degrees, minu	r each incinerator and indutes, and seconds.  Latitude:  Latitude:  Latitude:	licate the latitude and longitude coordinates  Longitude: Longitude: Longitude: Longitude:	
Please provide the manufacture date for where installed on site in degrees, minu Date(s):	r each incinerator and indutes, and seconds.  Latitude:  Latitude:  Latitude:  Latitude:  Latitude:	Longitude: Longitude: Longitude:	
Please provide the manufacture date for where installed on site in degrees, minu Date(s):	r each incinerator and indutes, and seconds.  Latitude: Latitude: Latitude: Latitude: Latitude: TEMPERATURE RAN	Longitude: Longitude: Longitude: Longitude: Longitude:	

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CONSTRUCTION A CITALTIES DISTURBING ONE A CRE OR MORE

Attach a Storm Water Pollution Prevention Plan (SWPPP) that includes the minimum components found under "SWPPP Details" on pages 38 through 43 of the Multimedia General Pollution Control Permit to Construct/Operate Air Emission Equipment and/or Manage Manure and Discharge Storm Water in Accordance with the National Pollution Discharge Elimination System.

Are there recreational streams, private/public ponds or lakes within ½ mile downstream of project boundary

x Yes

Nearest named receiving stream: \_\_Mill Creek

Soil Characteristics: Ruston fine sandy loam\_

that may be impacted by the construction activity?

CENTURICATION

Note: This application shall be signed according to the General Permit, page 3, as follows:

- For a corporation, by a responsible corporate officer.
- For a partnership, by a general partner.
- For a sole proprietorship, by the proprietor.

I certify that to the best of my knowledge and belief formed after reasonable inquiry, the statements and information in this application are true, complete, and accurate, and that as a responsible official, my signature shall constitute an agreement that the applicant assumes the responsibility for any alteration, additions, or changes in operation that may be necessary to achieve and maintain compliance with all applicable Rules and Regulations. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Signature of Responsible Official

Title