AI #20362 Gnp20090001



Mississippi Department of Environmental Quality
Office of Pollution Control – Environmental Permits Division
POST OFFICE BOX 2261 • JACKSON, MS 39225-2261

TEL: (601) 961-5171 • FAX: (601) 354-6612 www.deq.state.ms.us DEQ-EPD

DRY LITTER POULTRY ANIMAL FEEDING OPERATIONS

NOTICE OF INTENT (DLPNOI)

FOR COVERAGE UNDER

MULTIMEDIA GENERAL POLLUTION CONTROL PERMIT NO. MSG200028

(Number to be assigned by State)

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

ALL SUBMITTALS WITH THIS DEPNOI MUST INCLUDE:

- A CURRENT NUTRIENT MANAGEMENT PLAN (SEE SECTION II)
- A USGS QUAD MAP OR A COPY SHOWING THE SITE EQUATION
- A SITE DRAWING

ADDITIONAL SUBMITTALS MAY INCLUDE THE FOELOWING IF APPLICABLES

- APPROPRIATE SECTION 404 DOCUMENTATION (WETCANDS)
- A STORM WATER POLEUTION PREVENTION PLAN (SWPPP), IF THERE IS TO BE CONSTRUCTION WORK TOTALING ONE ACRE OR MORE.
- CONTIGUOUS LAND OWNER NOTIFICATION(S) AS IDENTIFIED IN CONDITION S-2, ACT2
 OF THE DRY LITTER POULTRY ANIMAL FEEDING OPERATIONS MULTIMEDIA GENERAL
 POLLUTION CONTROL PERMIT NO. MSG20.

USGS QUAD MAPS SUBMITTED MUST EXTEND AT CEAST ONE MITE 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 A 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, LITTER STORAGE STRUCTURE, 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 2261, JACKSON, MISSISSIPPI 39225-2261.

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: Deffer Colom
Facility Name: Betty Nom
Mailing Address:
Street or P.O. Box: 46 Willie Hilburn Rd
City: <u>5050</u> State: <u>MS</u> Zip: <u>39480</u>
Physical Address: (If the physical address is not available indicate the nearest named road or intersection.)
Street (can not be a P.O. Box) <u>6549</u> Hwy 89 W City: <u>5050</u> State: <u>MS</u> Zip: <u>39480</u>
City: 5050 State: MS Zip: 39480
County: JONES
Latitude (degrees/min/sec): N3/°,39'06.8"
Longitude (degrees/min/sec): WOB9° 18' 40,5"
Nearest named receiving stream: Mill Creek
Facility Telephone No. (Include Area Code): (00(-763-37/7
Facility Fax No. (Include Area Code):
Facility Cell Phone No. (Include Area Code):
Other Contact Phone Numbers (Include Area Code):
TYPES OF ACTIVITY
Check all that apply:
Existing dry litter poultry operation that is not proposing an increase in the number of houses
Construction and/or operation of an incinerator
New or expanding operations that will require construction activities disturbing one acre or more
the state of the s

II. DRY LITTER POULTRY FEEDING OPERATION CHARACTERISTICS:

TYPE AND AMOUNT OF CHICKENS Check all that apply and indicate the amounts Broilers (SIC 0251): 33,600 Layers (SIC 0252): TOTAL AMOUNT: Housed under roof Open confinement TYPES OF DRY LITTER CONTAINMENT, Check all that apply and indicate total days of storage and the	Check any of the following control runoff from your states and the second of the control runoff from your states are constructed. Buffers Conservation to the constructed we depend on the construction of	tland
Type of Storage	Total Number of Days	Total Capacity (tons)
Roofed Storage Shed		
Concrete Pad		
Impervious Soil Pad		
Other: Specify Passon CONfractor		
Are all poultry houses, that have been constructed or enlarged after February 24, 1994, at least 600 feet from all occupied dwellings or commercial establishments not owned by the applicant and at least 150 feet from all adjoining property lines? Are all incinerators at least 150 feet from the nearest residential or recreational area, all dwellings, and all light commercial buildings not owned by the applicant? Yes No, attach wavier NOTE: If answered no to any of these questions then attach a completed Poultry Buffer Zone Waiver. The wavier must be completed by all affected property owners and notarized by a State of Mississippi appointed Notary Public. A copy of the Dry Litter Poultry Buffer Zone Waiver can be found in the Dry Litter Poultry Forms Package or by calling (601) 961-5171 or at http://www.deq.state.ms.us/MDEQ.nsf/page/epd_AgriculturalBranchEPD?OpenDocument		
CONTRACT INFORMATION Is this facility a contract operation? Vec	□ No	
Is this facility a contract operation? Yes If yes, what is the name and address of the integrat Name: Lagrae Forms		ns

II. DRY LITTER POULTRY FEEDING OPERATION CHARACTERISTICS (continued):

ATTACHMENTS
Attach a USGS quad map or a 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.
NUTERIENT MANAGEMENT DI AN
NUTRIENT MANAGEMENT PLAN Answer the following
My most current and up to date nutrient management plan was developed on 7-8-09. (Date)
I understand that my nutrient management plan identified above expires five years from the date it was developed and that an updated nutrient management plan must be submitted to MDEQ prior to its expiration date.
The expiration date of my current plan is $7-8-09$.
Is a nutrient management plan already being implemented for the facility? Yes No
What is the estimated amount of litter generated per year? 239.8 tons/year
Total acreage needed for land application: 23
Total acreage available for land application:
Will a third party remove litter off site? Yes No
If yes, how much litter will be transferred to other persons per year? 239.86 tons/year
If not land applying, describe alternative use(s) of the litter:
Contractor Remount all little Hubste
to other locations

INCINERATOR		
Yes, there will be mortality incineration equipr	ment located at the facility. This page must be completed.	
you wish to construct and/or operate poultry m updated DLPNOI by completing Sections III at	tion equipment located at the facility. If at a future date ortality incineration equipment, you must submit an ind V. Constructing and operating poultry mortality rerage or issuance of individual permits is a violation of	
have previously submitted approved stack test. Fo please visit http://www.deq.state.ms.us/MDEO.nsf or call (601) 961-5171. Carcasses generated at facilities other than the one	identified in this DEPNOI are not permitted for casses generated on site are permitted for incineration.	
MANUFACTURER'S INFORMATION	TYPE OF INCINERATOR	
Manufacturer Name:	☐ Single Chamber	
Model Number:	☐ Multiple Chamber	
Capacity (tons/hour):	Other, describe	
TOTAL NUMBER OF INCINERATORS ANI	THEIR DATES OF CONSTRUCTION	
Total number of incinerators on site:		
Please provide the manufacture date for each incir coordinates where installed on site in degrees, mir	"	
Date(s): Latitud	le: Longitude:	
Latitud	le: Longitude:	
Latitud	le: Longitude: Longitude:	
Latitud	le: Longitude:	
FUEL TYPE AND INCINERATOR TEMPERA	TURE RANGE	
Fuel Type:		
If fuel oil is burned, what is the sulfur content of the	e oil?%	
Incinerator operating temperature range	°F	

III. CONSTRUCTION AND/OR OPERATION OF A POULTRY MORTALITY

IV.	CONSTRUCTION ACTIVITIES DISTURBING ONE ACRE OR MORE
	Yes, there will be new construction activities disturbing one or more acres of land. This page must be completed.
	No, there will be no new construction activities disturbing one or more acres of land. If at a future date you wish to engage in construction activities disturbing one or more acres of land, you must submit an updated DLPNOI by completing Sections IV and V. Engaging in construction activities that disturb one or more acres of land without a modified coverage or issuance of an individual permit is a <u>violation</u> of state law.
IS	OCUMENTATION OF COMPLIANCE WITH OTHER REGULATIONS/REQUIREMENTS THE PROJECT REROUTING, FILLING OR CROSSING A WATER CONVEYANCE OF ANY KIND es or No)? (If yes, contact the U.S. Army Corps of Engineers' Regulatory Branch for permitting requirements).
IF DO	THE PROJECT REQUIRES A CORPS OF ENGINEER SECTION 404 PERMIT, PROVIDE APPROPRIATE CUMENTATION WITH THIS DLPNOI THAT:
	•The project has been approved by individual permit, or • The work will be covered by a nationwide permit and NO NOTIFICATION to the Corps is required, or • The work will be covered by a nationwide or general permit and NOTIFICATION to the Corps is required
INI	DICATE ANY LOCAL STORM WATER ORDINANCE WITH WHICH THE PROJECT MUST COMPLY:
PR	OJECT INFORMATION
Tot	al acreages that will be disturbed:
Des	scription of the construction activity:
Nea	arest named receiving stream:
	there recreational streams, private/public ponds or lakes within ½ mile downstream of project boundary may be impacted by the construction activity?
Soil	Characteristics:
	Attach a Storm Water Pollution Prevention Plan (SWPPP) that includes the minimum components found under ACT 8, Conditions T-3 through T-10 of the Multimedia General Pollution Control Permit to Manage Litter From a Dry Litter Poultry Operation and/or Construct/Operate Air Emission Equipment and/or Discharge Storm Water in Accordance with the National Pollution Discharge Elimination System.

V. CERTIFICATION

Note: This application shall be signed according to Conditions T-17 and T-18 found in ACT 6 of the Dry Litter Poultry Animal Feeding Operations Multimedia General Pollution Control Permit No. MSG20.

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

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 of Responsible Official

Date

2-09-2009

OWNE

Printed Name

Title