



### 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



# DRY LITTER POULTRY ANIMAL FEEDING OPERATIONS NOTICE OF INTENT (DLPNOI) FOR COVERAGE UNDER

MULTIMEDIA GENERAL POLLUTION CONTROL PERMIT NO. MSG201 168
(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 DLPNOI MUST INCLUDE:

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

### ADDITIONAL SUBMITTALS MAY INCLUDE THE FOLLOWING IF APPLICABLE:

- APPROPRIATE SECTION 404 DOCUMENTATION (WETLANDS)
- A STORM WATER POLLUTION 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 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, 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.

<u>ALL QUESTIONS MUST BE ANSWERED.</u> 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: Matthew Comphel
Facility Name: Matthew Campbell Forms
Mailing Address:
Street or P.O. Box: 791 BV Lindley Ad
Street or P.O. Box: 791 BV Lindley Bd  City: Moselle State: Ms Zip: 39459
Physical Address: (If the physical address is not available indicate the nearest named road or intersection.)
Street (can not be a P.O. Box) B. V. Lindley Ad Off 515 TW By 1/2 mile
Street (can not be a P.O. Box)  B.V. Undley Rd Off 515 TW By //2 mile  City: Mescle  State: Ms Zip: 39459
County: Jones
Latitude (degrees/min/sec): 31, 30, 2 N
Longitude (degrees/min/sec): 39, 16,9 West
Nearest named receiving stream: Thomas Creek
Facility Telephone No. (Include Area Code): 61-544-2657
Facility Fax No. (Include Area Code):
Facility Cell Phone No. (Include Area Code): 601 -319 -3464
Other Contact Phone Numbers (Include Area Code): 601-297-8938
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

## II. DRY LITTER POULTRY FEEDING OPERATION CHARACTERISTICS:

TYPE AND AMOUNT OF CHICKENS Check all that apply and indicate the amounts  Broilers (SIC 0251): //// // // Layers (SIC 0252):  TOTAL AMOUNT:  Housed under roof Open confinement	Check any of the following control runoff from your states and the second secon	□ Setbacks □ Conservation tillage □ Constructed wetland □ Infiltration field □ Grass filter	
TYPES OF DRY LITTER CONTAINMENT, S Check all that apply and indicate total days of storage and the	STORAGE, AND CAPAC neir capacity in tons	ITY	
Type of Storage	Total Number of Days	Total Capacity (tons)	
Roofed Storage Shed			
Concrete Pad			
Impervious Soil Pad	/ week	500	
Other: Specify			
Are all poultry houses, that have been constructed all occupied dwellings or commercial establishme adjoining property lines?  Are all incinerators at least 150 feet from the nearlight commercial buildings not owned by the applit NOTE: If answered no to any of these questions to wavier must be completed by all affected property Notary Public. A copy of the Dry Litter Poultry Be Forms Package or by calling (601) 961-5171 or at <a href="http://www.deq.state.ms.us/MDEQ.nsf/page/epd">http://www.deq.state.ms.us/MDEQ.nsf/page/epd</a>	nts not owned by the application. No, attach wavier est residential or recreational icant? Yes  then attach a completed Pour owners and notarized by a suffer Zone Waiver can be for	ant and at least 150 feet from all area, all dwellings, and all No, attach wavier  Itry Buffer Zone Waiver. The State of Mississippi appointed and in the Dry Litter Poultry	
Is this facility a contract operation?  Yes  If yes, what is the name and address of the integral	□ No  tor?  Address:	Mississippi	

## 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.
NUTRIENT MANAGEMENT PLAN Answer the following 5-26/05
Answer the following  My most current and up to date nutrient management plan was developed on (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
The expiration date of my current plan is ///ay 500 Section
Is a nutrient management plan already being implemented for the facility?   Yes   No
What is the estimated amount of litter generated per year? //6/5tons/year
Total acreage needed for land application: 155
Total acreage available for land application: 260

X Yes

Appendix A (ACT 2, S-1)

If not land applying, describe alternative use(s) of the litter:

Will a third party remove litter off site?

tion equipment located at the facility. If at a future date
nortality incineration equipment, you must submit an and V. Constructing and operating poultry mortality werage or issuance of individual permits is a violation of
on of poultry mortality incinerators is for incinerators that or a list of incinerators that have approved stack tests on fif/page/epd_AgriculturalBranchEPD?OpenDocument e identified in this DLPNOI are not permitted for arcasses generated on site are permitted for incineration. truction debris, are strictly forbidden.
TYPE OF INCINERATOR
☐ Single Chamber
☐ Multiple Chamber
☐ Other, describe
inerator and indicate the latitude and longitude inutes, and seconds.  ide: Longitude: L
ide: Longitude: Longit

Incinerator operating temperature range

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.
X	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).
	THE PROJECT REQUIRES A CORPS OF ENGINEER SECTION 404 PERMIT, PROVIDE APPROPRIATE OCUMENTATION WITH THIS DLPNOI THAT:
	<ul> <li>The project has been approved by individual permit, or</li> <li>The work will be covered by a nationwide permit and NOTIFICATION to the Corps is required, or</li> <li>The work will be covered by a nationwide or general permit and NOTIFICATION to the Corps is required</li> </ul>
IN	DICATE ANY LOCAL STORM WATER ORDINANCE WITH WHICH THE PROJECT MUST COMPLY:
PI	ROJECT INFORMATION
То	otal acreages that will be disturbed:
Do	escription of the construction activity:
Ne	earest named receiving stream:
	e there recreational streams, private/public ponds or lakes within ½ mile downstream of project boundary at may be impacted by the construction activity?   Yes  No
So	il 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.

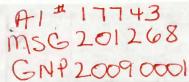
I certify under penalty of law that this document and all attachments were prepared under my direction or
supervision in accordance with a system designed to assure that qualified personnel properly gathered and
evaluated the information submitted. Based on my inquiry of the person or persons who manage 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.
Mul A 100
Hatthe Comptell 2-26-09
,

7-26-04

Signature of Responsible Official Date

| latther lamphe | 2-

Printed Name Title





### 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



# DRY LITTER POULTRY ANIMAL FEEDING OPERATIONS NOTICE OF INTENT (DLPNOI) FOR COVERAGE UNDER MULTIMEDIA GENERAL POLLUTION CONTROL PERMIT NO. MSG201 1-6

(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 DLPNOI MUST INCLUDE:

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

#### ADDITIONAL SUBMITTALS MAY INCLUDE THE FOLLOWING IF APPLICABLE:

- APPROPRIATE SECTION 404 DOCUMENTATION (WETLANDS)
- A STORM WATER POLLUTION 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 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 44 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.

<u>ALL QUESTIONS MUST BE ANSWERED.</u> 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: Matthew Comphell
Facility Name: Matthew Campbell Forms
Mailing Address:
Street or P.O. Box: 791 AV Lindley Bd
City: Moselle State: Ms Zip: 39459
Physical Address: (If the physical address is not available indicate the nearest named road or intersection.)
Street (can not be a P.O. Box) B.V. Lindley Ad Off 515 TW By 1/2 mile
Street (can not be a P.O. Box)  B.V. Lindley Bd Off 515 ToN By /2 mile  City: Mescile State: Ms Zip: 39459
County: Jones
Latitude (degrees/min/sec): 31, 30,2 N
Longitude (degrees/min/sec): 89, 16.9 West
Nearest named receiving stream: Thomas Creek
Facility Telephone No. (Include Area Code): 601-544-2657
Facility Fax No. (Include Area Code):
Facility Cell Phone No. (Include Area Code): \[ \langle \langle 1 - 3/9 - 34/64 \]
Other Contact Phone Numbers (Include Area Code): 601-297-8438
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

## II. DRY LITTER POULTRY FEEDING OPERATION CHARACTERISTICS:

TYPE AND AMOUNT OF CHICKENS Check all that apply and indicate the amounts  Broilers (SIC 0251): /44, 4000  Layers (SIC 0252):  TOTAL AMOUNT:  Housed under roof Open confinement	Check any of the following control runoff from your states and the second of the following control runoff from your states are also as a second of the secon	etland
TYPES OF DRY LITTER CONTAINMENT, Check all that apply and indicate total days of storage and the containing the		ITY
Type of Storage	Total Number of Days	<b>Total Capacity (tons)</b>
Roofed Storage Shed		
Concrete Pad		
Impervious Soil Pad	1 week	500
Other: Specify		
Are all poultry houses, that have been constructed all occupied dwellings or commercial establishme adjoining property lines?  Are all incinerators at least 150 feet from the near light commercial buildings not owned by the appl NOTE: If answered no to any of these questions wavier must be completed by all affected property Notary Public. A copy of the Dry Litter Poultry B Forms Package or by calling (601) 961-5171 or at http://www.deq.state.ms.us/MDEQ.nsf/page/epd	nts not owned by the applic No, attach wavier  est residential or recreational icant? Yes  then attach a completed Pour owners and notarized by a uffer Zone Waiver can be for	ant and at least 150 feet from all area, all dwellings, and all No, attach wavier altry Buffer Zone Waiver. The State of Mississippi appointed bund in the Dry Litter Poultry
Is this facility a contract operation? Yes  If yes, what is the name and address of the integra  Name: Sanderson Forms	□ No  tor?  Address:lowrel, I	Mississ port
	viet,	- Start Jan

## 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.
NUTRIENT MANAGEMENT PLAN Answer the following  5 26 65
My most current and up to date nutrient management plan was developed on
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  The expiration date of my current plan is
Is a nutrient management plan already being implemented for the facility?   Yes   No
What is the estimated amount of litter generated per year?  [1615] tons/year
Total acreage needed for land application:
Total acreage available for land application: 200
Will a third party remove litter off site? Yes No
If yes, how much litter will be transferred to other persons per year? <u>\$07</u> tons/year
If not land applying, describe alternative use(s) of the litter:
Landownes is putting what litter & waste he can on his own land. All remaining litter
he can on his own land. All remaining litter
and waste a contractor is removing.

## III. CONSTRUCTION AND/OR OPERATION OF A POULTRY MORTALITY INCINERATOR Yes, there will be mortality incineration equipment located at the facility. This page must be completed. X No, there will be no poultry mortality incineration equipment located at the facility. If at a future date you wish to construct and/or operate poultry mortality incineration equipment, you must submit an updated DLPNOI by completing Sections III and V. Constructing and operating poultry mortality incineration equipment without a modified coverage or issuance of individual permits is a violation of state law. 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 http://www.deq.state.ms.us/MDEQ.nsf/page/epd\_AgriculturalBranchEPD?OpenDocument or call (601) 961-5171. Carcasses generated at facilities other than the one identified in this DLPNOI 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 INFORMATION TYPE OF INCINERATOR Manufacturer Name: Single Chamber Model Number: Multiple Chamber Capacity (tons/hour): \_\_\_ Other, describe TOTAL NUMBER OF INCINERATORS AND THEIR DATES OF CONSTRUCTION Total number of incinerators on site: Please provide the manufacture date for each incinerator and indicate the latitude and longitude coordinates where installed on site in degrees, minutes, and seconds. Latitude: Longitude: Longitude: Longitude: Date(s): Latitude: Longitude: \_\_\_\_ Latitude: Longitude: FUEL TYPE AND INCINERATOR TEMPERATURE RANGE

Appendix A (ACT 2, S-1)

Fuel Type:

If fuel oil is burned, what is the sulfur content of the oil?

Incinerator operating temperature range

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.
Ŋ	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).
	THE PROJECT REQUIRES A CORPS OF ENGINEER SECTION 404 PERMIT, PROVIDE APPROPRIATE OCUMENTATION 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
IN	DICATE ANY LOCAL STORM WATER ORDINANCE WITH WHICH THE PROJECT MUST COMPLY:
PF	ROJECT INFORMATION
То	stal acreages that will be disturbed:
De	escription of the construction activity:
Ne	earest named receiving stream:
	there recreational streams, private/public ponds or lakes within ½ mile downstream of project boundary at may be impacted by the construction activity?   Yes  No
So	il 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.
Must A 100
Hatthe Compall 2-26-09

Signature of Responsible Official

Date

Matthew Campbell

2-26-09

Printed Name

Title