

MISSISSIPPI DEPARTMENT OF
ENVIRONMENTAL QUALITY

BASELINE STORM WATER GENERAL PERMIT RE-COVERAGE FORM

FOR COVERAGE UNDER MISSISSIPPI'S REISSUED
BASELINE GENERAL PERMIT MSR00
GENERAL NPDES COVERAGE NO. MSR00 0 9 1 1

INSTRUCTIONS

The submittal of this form is required to receive coverage under the reissued Baseline General Permit. This form must be completed and returned to the address printed at the bottom of page 2 within 30 days of the date of the Letter of Instruction for Re-Coverage.

The signatory of this form must be the owner or operator who is the current coverage recipient (rather than the plant/site manager or environmental consultant). The coverage recipient is responsible for permit compliance.

Amendments to the Storm Water Pollution Prevention Plan (SWPPP) are required to be attached if the plan is not current or is ineffective in controlling storm water pollutants. The visual assessment and training sections of your SWPPP will probably need to be updated to adhere to permit requirements (see ACT8, S-1 and ACT12, S-1 and S-2). These updates do NOT need to be submitted to MDEQ.

If the facility is out of business or no longer a regulated facility, please request termination of coverage by completing the Request for Termination (RFT) Form found in the Baseline Forms Package. Facilities that continue to discharge wastewater without applicable permit coverage are in violation of state law.

Do not submit this form if submitting a "Request for Termination" (RFT).

Do not submit this form if submitting a "No Exposure Certification."

ALL INFORMATION MUST BE COMPLETED (Enter "NA" if not applicable).

The Certificate of Coverage should be mailed to: ☐ owner/operator ☒ facility (please check one)

COVERAGE RECIPIENT INFORMATION

CONTACT NAME & POSITION: Roger Williams - Site Manager / Logistics & Safety

COMPANY NAME: CertainTeed Ceilings Corp.

STREET OR P.O. BOX: 2710 Hwy. 11 South

CITY: Meridian STATE: Mississippi ZIP: 39307

PHONE NUMBER (INCLUDE AREA CODE): (601) 693-0254

FACILITY INFORMATION

FACILITY NAME: <u>CertainTeed Ceilings - Meridian</u>	
CONTACT NAME & POSITION: <u>Roger Williams - Site Manager / Logistics & Safety</u>	
CONTACT PHONE NUMBER (INCLUDE AREA CODE): <u>(601) 693-0254</u>	
PRIMARY STANDARD INDUSTRIAL CLASSIFICATION (SIC) CODE & DESCRIPTION OF INDUSTRIAL ACTIVITY: <u>3 2 9 6 Mineral Wool - Ceiling Tiles</u>	
PHYSICAL SITE ADDRESS:	STREET: <u>2710 Hwy. 11 South</u>
CITY: <u>Meridian</u>	COUNTY: <u>Lauderdale</u> ZIP: <u>39307</u>
PROVIDE THE COORDINATES OF THE PLANT ENTRANCE:	
LATITUDE: <u>32</u> degrees <u>20</u> minutes <u>4</u> seconds	LONGITUDE: <u>88</u> degrees <u>44</u> minutes <u>33</u> seconds
NEAREST NAMED RECEIVING STREAM FOR STORM WATER LEAVING THE SITE: <u>Sowashee Creek</u>	
IS RECEIVING STREAM ON MDEQ's 303(d) LIST?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
IF YES, HAS A TMDL BEEN ESTABLISHED FOR THE RECEIVING STREAM SEGMENT?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

STORM WATER POLLUTION PREVENTION PLAN (SWPPP)

1. IS A COPY OF THE SWPPP AT THE PERMITTED SITE?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
2. IS THE SWPPP UP-TO-DATE AND EFFECTIVE IN CONTROLLING STORM WATER POLLUTANTS? IF NO, PLEASE ATTACH REQUIRED SWPPP AMENDMENTS (see Instructions on front page).	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO

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 fines and imprisonment for knowing violations.

I further certify that I understand when coverage is terminated the facility is no longer authorized to discharge storm water associated with industrial activity under this general permit. I understand that discharging pollutants in storm water associated with industrial activity to waters of the state without NPDES coverage is in violation of state law.

Signature

Robert Gladwish
Printed Name

March 2, 2011

Date

Director of Operations
Title

¹This form shall be signed according to ACT14, T-9 of the General Permit, as follows:

- For a corporation, by a responsible corporate officer.
- For a partnership, by a general partner.
- For a sole proprietorship, by the proprietor.
- For a municipal, state or other public facility, by principal executive officer, mayor, or ranking elected official.

After signing please mail to:

Chief, Environmental Permits Division,
MS Department of Environmental Quality, Office of Pollution Control
P.O. Box 2261
Jackson, Mississippi 39225

March 2nd, 2011

Mississippi Department of Environmental Quality, Office of Pollution Control
Environmental Permits Division – General Permits
515 East Amite Street
Jackson MS 39201

Subject: CertainTeed Ceilings Corp.
Baseline Storm Water General Permit / Re-coverage Form

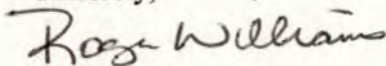
To Whom It May Concern:

CertainTeed Ceilings Corp. submits the attached Compliance form, as requested. Due to organizational changes at Meridian, MS; this submission was delayed in error.

CertainTeed is located at 2710 Highway 11 South, Meridian, MS. CertainTeed ceased production and indefinitely idled all manufacturing operations in August 2009. We understand that idling operations may not change or terminate permitting, monitoring, or reporting requirements and we will continue to meet our regulatory obligations as applicable to our company.

If you have any questions regarding the attached reports, please feel free to contact Roger Williams, CertainTeed Corporation, at 601-693-0254, Ext. 3329 or Marla Holt, Saint-Gobain, at 256-650-9228.

Sincerely,



Roger Williams
CertainTeed Ceilings

Cc: Marla Holt, Saint Gobain, South Region HSE Manager
Robert Gladwish, CertainTeed Ceilings Corp., Director of Operations

Attachments

RECEIVED
MAR - 4 2011
Dept of Environmental Quality