AI #1935

Recoverage

MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY

RECEIVED
MAR 28 2013
ECED

WET DECK LOG SPRAY WITH RECIRCULATION NOTICE OF INTENT

FOR COVERAGE UNDER WET DECK LOG SPRAY WITH RE-CIRCULATION GENERAL NPDES PERMIT MSG170071

(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. Also, contiguous landowner notification forms, the proof of publication in a local newspaper, and the acceptance letter from a local library must also be provided as outlined in Activity 4, Conditions S-2 and S-3 of the general permit.

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: _____

Owner Company Name: _____

Owner Street or (P.O. Box): _____

Owner City: _____ State: _____ Zip: _____

Owner Phone Number (Include Area Code): _____

OPERATOR INFORMATION (if different than owner)

Operator Contact Name & Position: Tony Jarrell

Operator Company: Tombigbee Lumber Co INC

Operator Street (P.O. Box): 315 Vo-Tech Road

Operator City: Fulton State: MS Zip: 38843

Operator Phone Number (Include Area Code): 662-862-7417

FACILITY INFORMATION

Facility Name: Tombigbee Lumber Company

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

SIC Code: 2 4 2 1 Sawmill & Planing mill

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

Street: 315 Vo-Tech Road City: Fulton

County: Itawamba Zip: 38843

Geographic Position:

Latitude: 34 degrees 16 minutes 52 seconds

Longitude: 88 degrees 24 minutes 58 seconds

We have not used the wet deck in the past 6 months but still intend to in the future

WET DECK LOG SPRAY RECIRCULATION SYSTEM INFORMATION

How many outfalls/release points are eligible for coverage? 1

Siting Criteria (For New Construction Only):

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.

Corps of Engineer Section 404 Permit Criteria (For New Construction Only):

Is the project rerouting, filing or crossing a water conveyance of any kind (Yes or No)?_____ (If yes, contact the U.S. Army Corps of Engineers' Regulatory Branch for permitting requirements).

If the project requires a Corps of Engineer Section 404 Permit, provide appropriate documentation with this application that:

- The project has been approved by individual permit, or
- The work will 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

Geographic Position for outfall(s) from Wet Deck Log Spray Recirculation Pond(s)(If the applicant has more than one outfall/release point eligible for coverage, please use the space to the right.):

Latitude: 34 degrees 16 minutes 52 seconds

Longitude: 88 degrees 24 minutes 58 seconds

Receiving Stream(s) (If more than one outfall is covered, indicate the respective receiving stream for each outfall.): Cummings 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):

_____

How will sanitary sewage be collected and treated? _____

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.

Tony Jarrell
Signature[1] (Must be signed by operator when different than owner)

7/28/13
Date Signed

Tony Jarrell
Printed Name[1]

Plant Manager
Title

[1]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 2261
Jackson, MS 39225-2261