



MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY

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MDEQ

17109
Becky

BASELINE STORM WATER GENERAL PERMIT RE-COVERAGE FORM

FOR COVERAGE UNDER MISSISSIPPI'S REISSUED
BASELINE GENERAL PERMIT MSR00
GENERAL NPDES COVERAGE NO. MSR00 1 5 7 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 45 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 (i.e., not the environmental consultant). The coverage recipient is responsible for permit compliance.

Re-submittal of the Storm Water Pollution Prevention Plan (SWPPP) is not required, even if amendments must be added to meet new permit conditions. However, amendments to the SWPPP must be submitted with the "Re-Coverage Form" if there has been a change in design, construction, operation, or maintenance of the facility, which may increase the discharge of pollutants to waters of the State or the SWPPP proves to be ineffective in controlling storm water pollutants.

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 FORM BLANKS 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: Ruth Harp, Owner

COMPANY NAME: Topline Manufacturing Company, Inc.

STREET OR P.O. BOX: 580 Dow Road

CITY: Tremont

STATE: MS

ZIP: 38876

PHONE NUMBER (662) 652-3337

EMAIL: N/A

FACILITY INFORMATION

FACILITY NAME: Topline Manufacturing Company, Inc.

CONTACT NAME & POSITION: Ruth Harp, Owner

CONTACT PHONE NUMBER (662) 652-3337 EMAIL: N/A

PRIMARY STANDARD INDUSTRIAL CLASSIFICATION (SIC) CODE & DESCRIPTION OF INDUSTRIAL ACTIVITY:
3 7 1 5 Truck Trailers

PHYSICAL SITE ADDRESS: STREET: 12255 Highway 25 South

CITY: Tremont COUNTY: Itawamba ZIP: 38876

PROVIDE THE COORDINATES OF THE PLANT ENTRANCE:
 LATITUDE: 34 degrees 13 minutes 40.4 seconds LONGITUDE: 88 degrees 15 minutes 32.0 seconds

NEAREST NAMED RECEIVING STREAM FOR STORM WATER LEAVING THE SITE: John's Creek

IS RECEIVING STREAM ON MDEQ's 303(d) LIST? YES NO

HAS A TMDL BEEN ESTABLISHED FOR THE RECEIVING STREAM SEGMENT? YES NO

STORM WATER POLLUTION PREVENTION PLAN (SWPPP)

1. IS A COPY OF THE SWPPP AT THE PERMITTED SITE? YES NO

2. IS THE SWPPP UP-TO-DATE AND EFFECTIVE IN CONTROLLING STORM WATER POLLUTANTS? YES NO
 IF NO, PLEASE ATTACH REQUIRED SWPPP AMENDMENTS (see Instructions on front page).

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.

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.

m Ruth Harp
 Signature¹

12-30-15
 Date

Ruth Harp
 Printed Name¹

Owner
 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



North Mississippi Office
P.O. Box 356
Sherman, MS 38869
(662) 840-5945
Fax: (662) 840-5965

Gulf Coast Office
P.O. Box 906
Ocean Springs, MS 39566
(228) 872-2528
www.envirocomp.net

December 22, 2015

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

RECEIVED
JAN - 4 2016
Dept of Environmental Quality

Re: **Baseline Storm Water General Permit Re-Coverage Form**
Topline Manufacturing Company, Inc.
Ref. No. MSR001571
Tremont, Mississippi 38876
Itawamba County

Dear Mr. Wilson:

Pursuant to the letter from the Mississippi Department of Environmental Quality (MDEQ) dated November 24, 2015, we understand that the Baseline Storm Water General Permit for Industrial Activities (MSR00) was reissued on November 17, 2015. Topline Manufacturing Company, Inc. (Topline) is enclosing a completed *Baseline Storm Water General Permit Re-Coverage Form* and requests that an updated Certificate of Permit Coverage be issued.

Please note that we intend to update Topline's Storm Water Pollution Prevention Plan (SWPPP) to reflect the new requirements of the General Permit. Per the instructions provided for re-coverage, we understand that these updates do not need to be submitted to MDEQ as long as the SWPPP is current and effective in controlling storm water pollutants.

If you have any questions concerning the attached information, please feel free to contact me at (228) 872-2525 or Ruth Harp of Topline at (662) 652-3337.

Sincerely,

A handwritten signature in black ink that reads "Austin Lowery".

Austin Lowery
Environmental Scientist

Enclosures