AI#499





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 7 6

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	e)		
COVERAGE RECIPIENT INFORMATION				
CONTACT NAME & POSITION: Robert Maxwell, Port	Director	_		
COMPANY NAME: Rosedale-Bolivar County Port Commission				
STREET OR P.O. BOX: _317 David Work Drive/P. O. Box 460				
CITY: Rosedale STAT	TE: Mississippi ZIP: 38732			
PHONE NUMBER (<u>662</u>) <u>759-6212</u> EMA	AIL: _robert@portofrosedale.com			

FACILITY INFORMATION

FACILITY NAME: Rosedale-B	olivar County Port Commission					
CONTACT NAME & POSITION: _ Robert Maxwell, Port Director						
CONTACT PHONE NUMBER (662)759-6212 EMAIL: _robert@portofrosedale.com						
PRIMARY STANDARD INDUSTR	IAL CLASSIFICATION (SIC) CODE & DES	CRIPTION OF INDUSTI	RIAL ACTIV	TTY:		
4 4 9 1 Waterfront Terr	minal					
PHYSICAL SITE ADDRESS:	STREET: 317 David Work Di	rive				
CITY: Rosedale	COUNTY: Bolivar	2	ZIP: 38732			
PROVIDE THE COORDINATES O	OF THE PLANT ENTRANCE:					
LATITUDE: 33 degrees 49 n	ninutes 15.5 seconds LONGITUD	E: <u>091</u> degrees <u>01</u> n	inutes <u>12.6</u>	seconds		
NEAREST NAMED RECEIVING S	STREAM FOR STORM WATER LEAVING	THE SITE: Mississipp	i River			
IS RECEIVING STREAM ON M	DEQ'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 IF NO, PLEASE ATTACH REQUIRED SWPPP AMENDMENTS (see Instructions on front page).						
system designed to assure that qualific person or persons who manage the systhe best of my knowledge and belief, t information, including the possibility I further certify that I understand wh	s document and all attachments were prepared uned personnel properly gathered and evaluated the stem, or those persons directly responsible for garue, accurate and complete. I am aware that the of fine and imprisonment for knowing violations. en coverage is terminated the facility is no longer permit. I understand that discharging pollutants verage is in violation of state law.	e information submitted. B thering the information, the re are significant penalties authorized to discharge sto	ased on my in e information for submitting orm water ass	quiry of the submitted is, to g false ociated with		
Robert Maxwell		Port Director				
Printed Name ¹		Title				
 For a corporation, by a responsible For a partnership, by a general partnership, by the proprietorship 	rtner.	, or ranking elected official				
After signing please mail to:	Chief, Environmental Permits Division, MS Department of Environmental Quality, Of P.O. Box 2261 Jackson, Mississippi 39225	ffice of Pollution Control				

Rosedale-Bolivar County Port Commission 317 David Work Drive – Mile 585 AHP P.O. Box 460 – Rosedale, MS 38769 www.portofrosedale.com Phone (662) 759-6212 Fax (662) 759-6213 Robert Maxwell, Port Director



Jimmy Yeager, President
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Edmund Yung
Henry Phillips, Jr.
Gregory Flippins



January 5, 2016

Mississippi Department of Environmental Quality Office of Pollution Control ATTN: Mr. Philip Morris, P.E., BCEE P. O. Box 2261 Jackson, MS 39225-2261

Dear Mr. Morris:

Enclosed please find the Baseline Storm Water General Permit Re-Coverage form for the Rosedale-Bolivar County Port Commission. We are currently in the process of updating our Storm Water Pollution Prevention Plan, and we will submit this to you no later than March 31, 2016.

If you have questions or need additional information, please advise.

Sincerely,

Robert Maxwell Port Director

RM/tcn