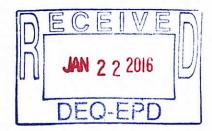
6890 cc





BASELINE STORM WATER GENERAL PERMIT RE-COVERAGE FORM

FOR COVERAGE UNDER MISSISSIPPI'S REISSUED BASELINE GENERAL PERMIT MSR00 GENERAL NPDES COVERAGE NO. MSR 2000/6

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)
	COVERAGE RECI	PIENT INFORMATI	ION
CONTACT NAME & POSITION: _	TRENT A. M	Mulloy, PRES	sident
COMPANY NAME:	Laurel Machi	ne and Found	Ry Co.
STREET OR P.O. BOX:	PO BOX 1049		
CITY: Laurel	STATE	M5	ZIP: 39441
PHONE NUMBER (60) 428-1	0544 x 2207 EMAIL	: FAMulloyeL	MFCO.Com
		•	

FACILITY INFORMATION

	FACILITY INFURMATION						
FACILITY NAME: Laurel	Machine and Foundry Co, INC	Laurel Plant					
CONTACT NAME & POSITION: Keith BOGAN, SAFETY + PERSONNEL MER							
CONTACT PHONE NUMBER (101) 428-0544 EMAIL: Keith & LMFCO. Com							
PRIMARY STANDARD INDUSTRIAL CLASSIFICATION (SIC) CODE & DESCRIPTION OF INDUSTRIAL ACTIVITY:							
3441 Structual Steel Assemblies 3599 Machine Shop							
PHYSICAL SITE ADDRESS: STREET: 810 FRONT St.							
CITY: Laurel	COUNTY: JONES	ZIP: 39440					
PROVIDE THE COORDINATES (OF THE PLANT ENTRANCE:						
LATITUDE: 31 degrees 42 minutes 013 seconds LONGITUDE: 89 degrees 27 minutes 465 seconds							
NEAREST NAMED RECEIVING STREAM FOR STORM WATER LEAVING THE SITE: TALLAHA LA CREEK							
IS RECEIVING STREAM ON M	DEQ's 303(d) LIST?	X YES NO					
HAS A TMDL BEEN ESTABLISH	ED FOR THE RECEIVING STREAM SEGMENT	r?					
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 A	AND EFFECTIVE IN CONTROLLING STORM WA UIRED SWPPP AMENDMENTS (see Instructions of	TER POLLUTANTS? YES 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 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.							
Signature Z. A	Newloy Date	Z016/1/22					
Printed Name	Mulloy	CED					
This 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 P.O. Box 2261 Jackson, Mississippi 39225	of Pollution Control					

Page 2 of 2



KE: Keith Bogan

to:

Becky_Nester@deq.state.ms.us

01/22/2016 01:28 PM

Cc:

"P E(Gene) Mulloy"

Hide Details

From: Keith Bogan < Keith@lmfco.com>

To: "Becky_Nester@deq.state.ms.us" <Becky_Nester@deq.state.ms.us>,

Cc: "P E(Gene) Mulloy" <pem@lmfco.com>

2 Attachments





Storm Water Permit Re-coverage Hawkes Plant 1-2016.pdf Storm Water Permit Re-coverage Laurel Plant 1-2016.pdf

Becky,

Attached are the Baseline Storm Water Re-Coverage forms for the LMF Plants. Let me know if you have any questions.

Thank you for your assistance.

Best Regards,

T. Keith Bogan
Safety, Personnel & Maint Mgr.
Laurel Machine and Foundry Co. Inc.
Office direct 601-369-0176
Cell 601-369-0636
Main 601-428-0544 x3214
WWW.LMFCO.com

From: Becky_Nester@deq.state.ms.us [mailto:Becky_Nester@deq.state.ms.us]

Sent: Friday, January 22, 2016 9:18 AM

To: Keith Bogan Subject:

Here is an instruction letter that was sent. Please read and then complete the attached form with appropriate signature and email back to me. Thanks.

Here is a list of contacts that we have for both companies. If Patrick and Trent are both still with the company then we need emails for them.

Agency Interest / Person Relationships

Person	Relationship	Phone	Email
Bogan_Keith	Is Contact For	(601) 428-0541	keith@lmfco.com
Mulloy, Patrick	Is Air Permit Contact For	(601) 428-0541	
Mulloy, Patrick	Is Application Signatory for	(601) 428-0541	
Mulloy, Patrick	Is General Permit Contact For	(601) 428-0541	
Mulloy, Trent	Is Application Signatory for	(601) 428-0541	
Mulloy, Trent	Is General Permit Contact For	(601) 428-0541	

Becky Nester Chief, Metals and Metal Manufacturing Branch Environmental Permits Division Mississippi Department of Environmental Quality P.O. Box 2261 Jackson, MS 39225 (601) 961-5580