



## RECEIVED

JAN 13 2016

Dept. of Environmental Quality

✓ facility (please check one)

## BASELINE STORM WATER GENERAL PERMIT RE-COVERAGE FORM

FOR COVERAGE UNDER MISSISSIPPI'S REISSUED
BASELINE GENERAL PERMIT MSR00
GENERAL NPDES COVERAGE NO. MSR00 8 1 0

## **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).

The Certificate of Coverage should be mailed to: owner/operator

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

ALL FORM BLANKS MUST BE COMPLETED (enter "NA" if not applicable).

COVERAGI	E RECIPIENT INFORM	ATION
CONTACT NAME & POSITION: Hamish Guthrie-	General Manager	
COMPANY NAME: Rolls Royce	<u> </u>	
STREET OR P.O. BOX: 2355 S. Tibbs Avenue, M	1ail Code-N-23	
CITY: Indianapolis	STATE: Indiana	ZIP: <u>46241</u>
PHONE NUMBER (228) 688-2584	EMAIL: hamish.guthrie@rolls-royce.com	

## **FACILITY INFORMATION**

	FACILITI INFORMATI	OIT
FACILITY NAME: Rolls Royce	e Outdoor Testing Facility	
CONTACT NAME & POSITION:	Jamie Jenkins, HS&E Advisor	
CONTACT PHONE NUMBER (22	342-8070 EMAIL: james.je	nkins@rolls-royce.com
PRIMARY STANDARD INDUST	RIAL CLASSIFICATION (SIC) CODE & DES	SCRIPTION OF INDUSTRIAL ACTIVITY:
3 7 2 4 Aircraft Engine	es and Engine Parts	
PHYSICAL SITE ADDRESS:	STREET: East of Mainline Ro	ad
CITY: Stennis Space Center	COUNTY: Hancock	ZIP: 39529-6000
PROVIDE THE COORDINATES	OF THE PLANT ENTRANCE:	
LATITUDE: 30 degrees 22	minutes 9 seconds LONGITUD	E: 89 degrees 34 minutes 0 seconds
NEAREST NAMED RECEIVING	STREAM FOR STORM WATER LEAVING	THE SITE: Pearl River
IS RECEIVING STREAM ON M	1DEQ's 303(d) LIST?	✓ YES NO
HAS A TMDL BEEN ESTABLISH	IED FOR THE RECEIVING STREAM SEGM	IENT?
STORM	M WATER POLLUTION PREVENT	ION PLAN (SWPPP)
1. IS A COPY OF THE SWPPP A		✓ YES NO
2. IS THE SWPPP UP-TO-DATE IF NO, PLEASE ATTACH REC	AND EFFECTIVE IN CONTROLLING STORM QUIRED SWPPP AMENDMENTS (see Instruction	WATER POLLUTANTS? YES NO ons on front page).
system designed to assure that qualify person or persons who manage the systhe best of my knowledge and belief, information, including the possibility. I further certify that I understand where the system is the system of the	ied personnel properly gathered and evaluated the estem, or those persons directly responsible for gathered, accurate and complete. I am aware that the of fine and imprisonment for knowing violations. then coverage is terminated the facility is no longer permit. I understand that discharging pollutants	authorized to discharge storm water associated with in storm water associated with industrial activity to
In Kuf		1/12/16
Signature <sup>1</sup>		Date
IAM REDFERM		Quality or Continuous Improvement Mange
Printed Name <sup>1</sup>		Title /
<ul> <li>For a corporation, by a responsib</li> <li>For a partnership, by a general p</li> <li>For a sole proprietorship, by the</li> </ul>	artner.	, 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	fice of Pollution Control

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Revision: 11/10/15



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Rolls-Royce North America Stennis Outdoor Test Bed Facility H1 Test Site – Bldg. 5002 Stennis Space Center, MS 39529

> Tel: (228) 813-2437 Fax: (228) 813-2436

January 11, 2016

Dept. of Environmental Quality

Chief Environmental Permit Division Mississippi Department of Environmental Quality (MDEQ)

Ref: Rolls-Royce Outdoor Testing Facility
Baseline Storm Water General Permit Re-Coverage Form

To whom it may concern,

Please find enclosed signed Rolls-Royce Outdoor Testing Facility Baseline Storm Water General Permit Re-Coverage Form.

This letter is to inform you that the enclosed document is signed on behalf of Hamish Guthrie, new site General Manager, by Ian Redfern, local Quality and Continuous Improvement Manager, due to the current associated deadline and Hamish's recent appointment as site General Manager. If you have any question please feel free to contact me at 228-688-2633 or 228-342-8070.

Sincerely,

James Jenkins HSE Advisor