

AI # 2848
MSG 201031

Buster

Environmental Permits for Industrial Facilities

Request for Transfer of Permit, General Permit Coverage and/or Name Change

RECEIVED
NOV 28 2010
Department of Environmental Quality

Instructions: For Ownership Change-Complete all Items on Page 1 (except Item VIII) and Page 2 (reverse side).
For Name Change Only-Complete Items I, II, V, VI, VII, VIII, and Page 2 (reverse side).
Note-This form should be submitted to MDEQ when a transferal date is finalized but prior to the actual transfer.

<p>Item I.</p> <p>Facility Name: <u>KHANG NGUYEN</u></p> <p>Location: (Do Not Use P.O. Box)</p> <p>Street: <u>5790 Stonedrige Dr.</u> City: <u>Columbus</u></p> <p>State: <u>GA</u> Zip: <u>31909</u> County: <u>Murcogee</u></p> <p>Telephone: (<u>706</u>) <u>718-9196</u></p>	<p>Item II.</p> <p>Responsible official after transfer or name change:</p> <p>Name: <u>Hoan Minh Dang</u></p> <p>Title: <u>New owner</u></p> <p>Mailing Address::</p> <p>Street/P.O. Box: <u>292 Lucas Hollow Rd</u> City: <u>Wt. Oliver</u></p> <p>State: <u>GA</u> Zip: <u>30119</u></p>		
<p>Item III.</p> <p>Previous Permittee: <u>KHANG NGUYEN</u></p> <p>Mailing Address:</p> <p>Street/P.O. Box: _____</p> <p>City: _____ State: _____ Zip: _____</p> <p>Telephone: (_____) _____</p>	<p>Item IV.</p> <p>New Permittee: <u>HOAN MINH DANG</u></p> <p>Mailing Address:</p> <p>Street/P.O. Box: _____</p> <p>City: _____ State: _____ Zip: _____</p> <p>Telephone: (_____) _____</p>		
<p>Item V.</p> <p>Industrial Activity SIC Code: _____</p> <p>Brief Description: _____</p>	<p>Item VI.</p> <p>Will Facility Operations Change? Yes _____ No <input checked="" type="checkbox"/></p> <p>If yes, the appropriate applications and permits may require modification prior to change.</p>		
<p>Item VII.</p> <p>Will Facility Name Change? Yes <input checked="" type="checkbox"/> No _____</p> <p>If Yes, Provide New Name for Permit Coverage.</p> <p>New Name: <u>KHANG NGUYEN</u> <u>Hoan Minh Dang</u></p>	<p>Item VIII.</p> <p>Signature for Name Change</p> <p>Print Name: _____</p> <p>Authorized Signature: _____</p> <p>Title: _____ Date: _____</p>		
<p>Item IX.</p> <p>We the undersigned request transfer of permit(s) and/or permit coverage(s) listed on the backside of this form.</p> <p>From: _____ To: _____</p> <p>Acquisition Date: _____</p> <p>By signature below, the recipient certifies that they are aware of the requirements of the permit(s) and agrees to accept responsibility and liability for the permit(s) listed on the back of this document. By signature below, the previous permittee is requesting that the permit(s) and/or permit coverage(s) be transferred to the recipient. The transfer of the permit(s) or permit coverage(s) will be by written notification from the Office of Pollution Control (OPC). The OPC may require submittal of information regarding financial capability and past compliance history of the recipient.</p> <table> <tr> <td> <p><u>X Hoan M Dang</u></p> <p>Print New Permittee Name</p> <p><u>X Hoan M Dang</u></p> <p>New Authorized Signature</p> <p><u>NEW OWNER</u></p> <p>Title _____ Date <u>11-22-11</u></p> </td> <td> <p><u>Khang Van Nguyen</u></p> <p>Print Previous Permittee Name</p> <p><u>[Signature]</u></p> <p>Previous Authorized Signature</p> <p><u>Previous Owner</u></p> <p>Title _____ Date <u>11-22-16</u></p> </td> </tr> </table> <p><small>1 A Permittee is a company or individual that has been issued an individual permit or coverage under a general permit. 2 Authorized Signature must be owner or in the case of a corporation, a corporate officer as defined in Regulations APC-S-2 and WPC-1.</small></p>		<p><u>X Hoan M Dang</u></p> <p>Print New Permittee Name</p> <p><u>X Hoan M Dang</u></p> <p>New Authorized Signature</p> <p><u>NEW OWNER</u></p> <p>Title _____ Date <u>11-22-11</u></p>	<p><u>Khang Van Nguyen</u></p> <p>Print Previous Permittee Name</p> <p><u>[Signature]</u></p> <p>Previous Authorized Signature</p> <p><u>Previous Owner</u></p> <p>Title _____ Date <u>11-22-16</u></p>
<p><u>X Hoan M Dang</u></p> <p>Print New Permittee Name</p> <p><u>X Hoan M Dang</u></p> <p>New Authorized Signature</p> <p><u>NEW OWNER</u></p> <p>Title _____ Date <u>11-22-11</u></p>	<p><u>Khang Van Nguyen</u></p> <p>Print Previous Permittee Name</p> <p><u>[Signature]</u></p> <p>Previous Authorized Signature</p> <p><u>Previous Owner</u></p> <p>Title _____ Date <u>11-22-16</u></p>		

Mississippi Department of Environmental Quality/Office of Pollution Control
P.O. Box 2261
Jackson, Mississippi 39225-2261
(601) 961-5171

<p>Item X. Storm Water</p> <p>(Check One)</p> <p><input type="checkbox"/> A Storm Water Pollution Prevention Plan (SWPPP) is not required for the site.</p> <p><input type="checkbox"/> The recipient certifies that they have received a copy of the Office of Pollution Control approved SWPPP from the original owner.</p> <p><input type="checkbox"/> The recipient is submitting a new SWPPP, which is attached to this form.</p> <p><input type="checkbox"/> A copy of the SWPPP cannot be obtained from the original owner.</p>	<p>Item XI. Hazardous Waste ID Number</p> <p>EPA ID No. _____</p> <p>(Check One)</p> <p><input type="checkbox"/> An EPA Hazardous Waste ID Number is not required for the site.</p> <p><input type="checkbox"/> The site's EPA ID Number is listed above. There is no change in the type or amount of hazardous waste generated on site.</p> <p><input type="checkbox"/> There is a change in the type or amount of hazardous waste generated and a Notification of Regulated Waste Activity Form is attached.</p>
<p>Item XII. Permit(s) and/or Coverage(s) to be Transferred</p>	
<p>Permit _____ Type: _____</p> <p>Permit/Coverage No.: _____</p> <p>Permit Issuance _____ Date: _____</p> <p>Date of General Permit Coverage: _____</p> <p>Permit Expiration Date: _____</p>	<p>Permit _____ Type: _____</p> <p>Permit/Coverage No.: _____</p> <p>Permit Issuance _____ Date: _____</p> <p>Date of General Permit Coverage: _____</p> <p>Permit Expiration Date: _____</p>
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<p>Permit _____ Type: _____</p> <p>Permit/Coverage No.: _____</p> <p>Permit Issuance _____ Date: _____</p> <p>Date of General Permit Coverage: _____</p> <p>Permit Expiration Date: _____</p>	<p>OTHER INFORMATION:</p>

Comprehensive Nutrient Management Plan (Draft Format)

The Comprehensive Nutrient Management Plan (CNMP) is an important part of the conservation management system (CMS) for your Animal Feeding Operation (AFO). This CNMP documents the planning decisions and operation and maintenance for the animal feeding operation. It includes background information and provides guidance, reference information and Web-based sites where up-to-date information can be obtained. Refer to the Producer Activity document for information about day-to-day management activities and recordkeeping. Both this document and the Producer Activity document shall remain in the possession of the producer/landowner.

Farm contact information: NGUYEN
c/o KHANG NGUYEN - NAME OF NEW OWNER
292 LUCAS HOLLOW RD IS: HOAN M. DANG
MOUNT OLIVE, MS 39119-4970
(228) 697-9648

Latitude/Longitude: N31°- 42'- 59.9"
W89°- 43'- 56.0"

Plan Period: Jul 2014 - Jun 2019

Conservation Planner

As a Conservation Planner, I certify that I have reviewed both the *Comprehensive Nutrient Management Plan* and *Producer Nutrient Management Activities* documents for technical adequacy and that the elements of the documents are technically compatible, reasonable and can be implemented.

Signature: _____ Date: _____
Name: _____
Title: _____ Certification Credentials: _____

Conservation District

The Conservation District has reviewed the CNMP documents and concurs that the plan meets the District's goals.

Signature: _____ Date: _____
Name: _____
Title: _____