



BASELINE NOTICE OF INTENT (BNOI)

FOR COVERAGE UNDER THE BASELINE STORM WATER GENERAL NPDES PERMIT MSR00 0 209

(NUMBER TO BE ASSIGNED BY STATE)

INSTRUCTIONS

Applicant must be the owner or operator (i.e., legal entity that controls the facility's operation, or the plant/site manager, not the environmental consultant). The owner or operator that receives coverage is responsible for permit compliance. File at least 60 days prior to the commencement of the regulated industrial activity.

Submittals with this BNOI must include a Storm Water Pollution Prevention Plan (SWPPP) with the minimum components found in ACTs 5 and 6 of the Baseline Storm Water General Permit. In addition, a United States Geological Survey (USGS) quadrangle map (or a copy) showing site location and extending at least 1/2 mile beyond the site's property boundary is required. If a copy is submitted, provide the name of the quadrangle map that is found in the upper right hand corner. Maps can be obtained from the MDEQ, Office of Geology at 601-961-5523.

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

THE APPLICANT IS:	□OWNER	▼OPERATOR (PLEASE CHECK ONE OR BOTH)				
OWNER INFORMATION						
Owner Contact Name: Lop	iah County	Board of Syrain. 4015 Position: NA				
Owner Company Name:	apiah Coun	f.,				
Owner Street (P.O. Box):	0 Box 551					
Owner City: Hazlehurs	7	State: <u>M5.</u> Zip: <u>39083</u>				
Owner Phone Number: (601)	894-1858	Owner Email: 5554/1/44 @ copioh county ms. gov				
OPERA	TOR INFORM	MATION (if different than owner)				
Operator Contact Name://2	enneth f.	AASANd Position: Owner				
Operator Company Name:	prassroots	Aviation Inc				
Operator Street (P.O. Box):						
Operator City: Hozlchul	st					
Operator Phone Number: (62/	<u> 988-2788</u>	Operator Email: gressrootsaviation MS. @ gma. 1.com				

FACILITY INFORMATION

Carlo Carto Alant					
Facility Name: Copiah County Piport					
, , , , , , , , , , , , , , , , , , ,	. 44 a as No				
Nature of Business (Include 4-digit Standard Industrial Classification Code (SIC) and description):					
SIC Code: 3 72/ Airport Operator, Aircraft Fueling & maintenance					
·					
Receiving Stream: Copich Creek					
Is receiving stream on MDEQ's 303(d) List?	☐ Yes ☐ No				
Has a TMDL been established for the receiving stream segment?	☐ Yes ☐ No				
Physical Site Address:					
Street: 1001 Aignort Lane City: Hozlchurst	Ms.				
County:					
Latitude: 31 degrees 57 minutes 23 seconds Longitude: 90 degrees 22 minutes	ites <u>05</u> seconds				
Method Used to Determine Lat & Long (GPS of plant entrance) or Map Interpolation): Map Interpolation Airport Layort Plan Drawing					
Attach a copy of any existing laboratory data for each storm water outfall. If multiple sampling has been performed, provide a summary for each parameter, including sampling dates and the minimum, average and maximum values.					
Is this a SARA Title III, Section 313 facility utilizing water priority chemicals at threshold amount of the section and the section and the facility.	unts?				

DOCUMENTATION OF COMPLIANCE WITH OTHER REGULATIONS/REQUIREMENTS

Is this notice for a facility	that will require other permits?	?	⊠No
If yes, check which one(s) Individual NPDES, or	: ☐ Air, ☐ Hazardous Waste, list Other(s):	Pretreatment	, Water State Operating,
How will sanitary sewage	be collected and treated? Sgo	tie opten	system
Indicate any local storm wapproval.	vater ordinance with which the f	facility must comp	ply and submit any documentation of
	er provided at any outfall?	_	⊠No
contifu and an area let. Cl. and	CERTIFIC		
ubmitted. Based on my inquir athering the information, the i	y of the person or persons who man nformation submitted is to the best ant penalties for submitting false in	ner properly gather	those persons directly responsible for
Gratural (Must be signed by	perator when different than owner	2	13 July 2017 Date Signed
Kenneth E.	,		Oate Signed Winer Grassroots Aviation In Sitle
This application shall be signed For a corporation, by a res For a partnership, by a gen For a sole proprietorship, b	according to the General Permit, A ponsible corporate officer. leral partner.	ACT 14, T-9, as foll	lows:
fter signing please mail to:	Chief, Environmental Permits Div MS Department of Environmental P.O. Box 2261	vision l Quality, Office of	Pollution Control

Jackson, MS 39225