

AI #5596
GNP20180001



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MAY -1 2018
MDEQ

BASELINE NOTICE OF INTENT (BNOI)
FOR COVERAGE UNDER THE BASELINE STORM WATER
GENERAL NPDES PERMIT MSR00 2343
(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: Greg Parker Position: Vice President of Operations
Owner Company Name: BPI Coatings Solutions, LLC
Owner Street (P.O. Box): 10136 Magnolia Drive
Owner City: Olive Branch State: MS Zip: 38654
Owner Phone Number: (901) 480-8413 Owner Email: gparker@bpipackaging.net

OPERATOR INFORMATION (if different than owner)

Operator Contact Name: Ken Hooker Position: Director of Quality
Operator Company Name: BPI Coatings Solutions, LLC
Operator Street (P.O. Box): 10136 Magnolia Drive
Operator City: Olive Branch State: MS Zip: 38654
Operator Phone Number: (408) 242-6705 Operator Email: khooker@bpicoatings.net

DOCUMENTATION OF COMPLIANCE WITH OTHER REGULATIONS/REQUIREMENTS

Is this notice for a facility that will require other permits? Yes No

If yes, check which one(s): Air, Hazardous Waste, Pretreatment, Water State Operating,
 Individual NPDES, or list Other(s):

How will sanitary sewage be collected and treated? Sent to publicly owned treatment works (POTW)

Indicate any local storm water ordinance with which the facility must comply and submit any documentation of approval.

Is treatment of storm water provided at any outfall? Yes No

If yes, please describe: _____

CERTIFICATION

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.

Gregory Parker
Signature¹ (Must be signed by operator when different than owner)

4/24/18
Date Signed

Gregory Parker
Printed Name¹

V.P. Operations
Title

¹This application shall be signed according to the General Permit, ACT 14, T-9, 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, the mayor, or ranking elected official.

After signing please mail to:

Chief, Environmental Permits Division
MS Department of Environmental Quality, Office of Pollution Control
P.O. Box 2261
Jackson, MS 39225

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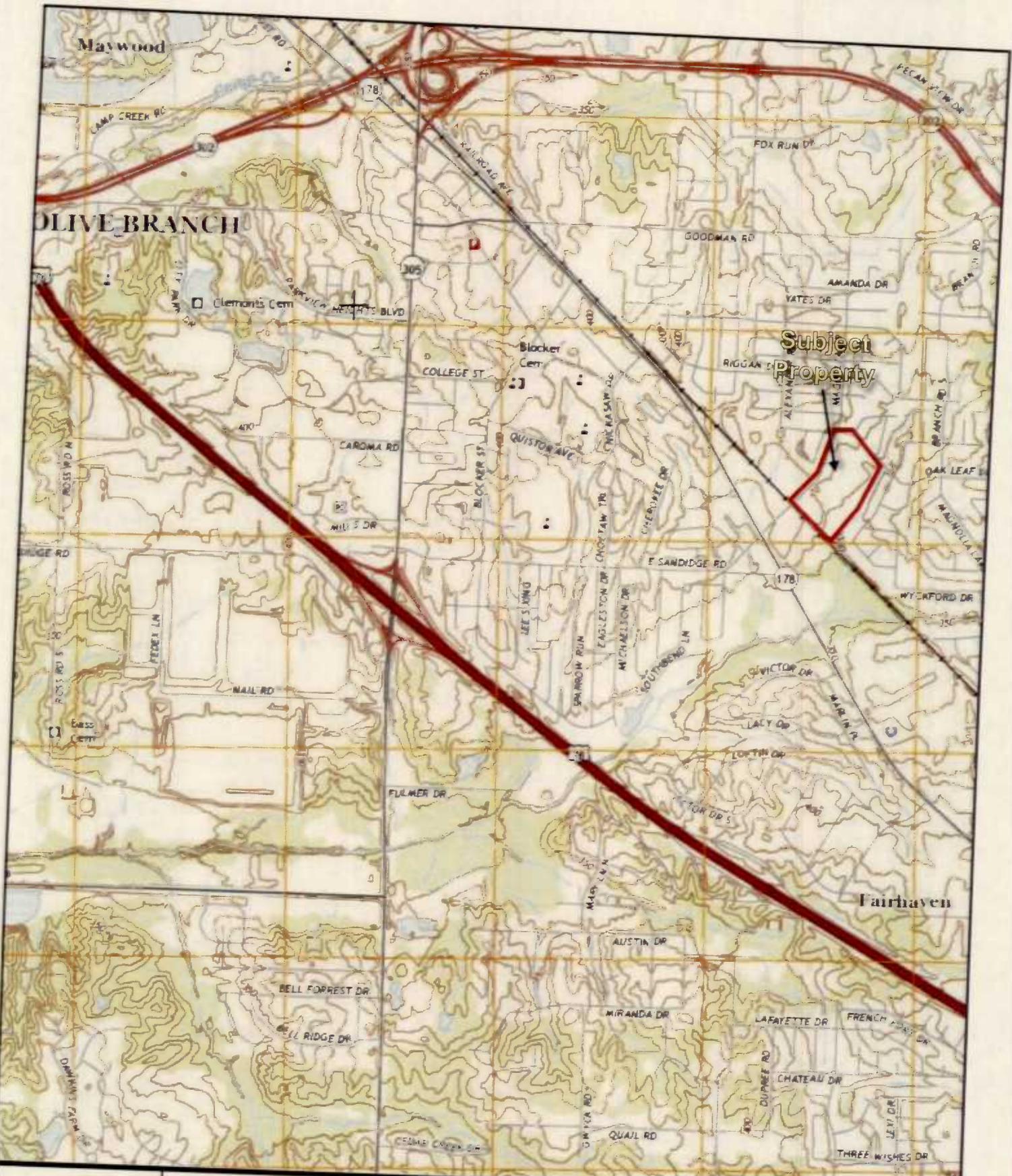
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Not To Scale



Tioga

ENVIRONMENTAL CONSULTANTS

USGS Topographic Map

Source
USGS, Olive Branch, MS-TN Quadrangle

Location
10136 Magnolia Drive
Olive Branch, MS

Project
35703.00

Date
April 2018

Figure No.

1