AI #75921 GAP2019000





MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY

LARGE CONSTRUCTION NOTICE OF INTENT (LCNOI) FOR COVERAGE UNDER THE LARGE CONSTRUCTION STORM WATER GENERAL NPDES PERMIT

INSTRUCTIONS

The Large Construction Notice of Intent (LCNOI) is for coverage under the Large Construction General Permit for land disturbing activities of five (5) acres or greater; or for land disturbing activities, which are part of a larger common plan of development or sale that are initially less than five (5) acres but will ultimately disturb five (5) or more acres. Applicant must be the owner or operator. For construction activities, the operator is typically the prime contractor. The owner(s) of the property and the prime contractor associated with regulated construction activity on the property have joint and severable responsibility for compliance with the Large Construction Storm Water General Permit MSR10.

If the company seeking coverage is a corporation, a limited liability company, a partnership, or a business trust, attach proof of its registration with the Mississippi Secretary of State and/or its Certificate of Good Standing. This registration or Certificate of Good Standing must be dated within twelve (12) months of the date of the submittal of this coverage form. Coverage will be issued in the company name as it is registered with the Mississippi Secretary of State.

Completed LCNOIs should be filed at least thirty (30) days prior to the commencement of construction. Discharge of storm water from large construction activities without written notification of coverage is a violation of state law.

Submittals with this LCNOI must include:

- · A site-specific Storm Water Pollution Prevention Plan (SWPPP) developed in accordance with ACT5 of the General Permit
- A detailed site-specific scaled drawing showing the property layout and the features outlined in ACT5 of the General Permit
- A United States Geological Survey (USGS) quadrangle map or photocopy, extending at least one-half mile beyond the facility property boundaries with the site location and outfalls outlined or highlighted. The name of the quadrangle map must be shown on all copies. Quadrangle maps can be obtained from the MDEQ, Office of Geology at 601-961-5523.

Additional submittals may include the following, if applicable:

- · Appropriate Section 404 documentation from U.S. Army Corps of Engineers
- · Appropriate documentation concerning future disposal of sanitary sewage and sewage collection system construction
- Appropriate documentation from the MDEQ Office of Land & Water concerning dam construction and low flow requirements
- · Approval from County Utility Authority in Hancock, Harrison, Jackson, Pearl River and Stone Counties

ALL QUESTIONS MUST BE ANSWERED (Answer "NA" if the question is not applicable)



(NUMBER TO BE ASSIGNED BY STATE)

APPLICANT IS THE:	✓ OWNER □ PI	RIME CONTRACTOR					
OWNER CONTACT INFORMATION							
OWNER CONTACT PERSON:	Mike Sulzer, P.E.						
OWNER COMPANY LEGAL NAME: Ampirical Solutions, LLC							
OWNER STREET OR P.O. BOX: 4 Sanctuary Blvd., Suite 100							
			ZIP: 70471				
OWNER CITY: Mandeville OWNER PHONE #: (985)80	09-5241 ow	NER EMAIL: msulzer@am	pirical.com				
PRI	ME CONTRACTOR (CONTACT INFORMATION	ON				
PRIME CONTRACTOR CONT.	ACT PERSON: TBD						
PRIME CONTRACTOR COMP	ANY LEGAL NAME: Am	pirical Solutions					
PRIME CONTRACTOR STREE	T OR P.O. BOX: 4 San	ctuary Blvd., Suite 100					
PRIME CONTRACTOR CITY:	Mandeville	STATE: LA	ZIP: 70471				
PRIME CONTRACTOR CITY: Mandeville STATE: LA ZIP: 70471 PRIME CONTRACTOR PHONE #: (985) 789-8934 PRIME CONTRACTOR EMAIL: dean.story@ampirical.com							
FACILITY SITE INFORMATION							
FACILITY SITE NAME: Mill St	reet 115/13.8kV Substation						
FACILITY SITE ADDRESS (If the physical address is not available, please indicate the nearest named road. For linear projects indicate the beginning of the project and identify all counties the project traverses.)							
STREET: North Mill Stree CITY: Jackson	t						
			ZIP:				
FACILITY SITE TRIBAL LANI	D ID (N/A If not applicable	00 11	0.7				
LATITUDE: 32 degrees 20 r	ninutes 4.5 seconds L	ONGITUDE: degrees	_ minutes <u>U.7</u> seconds				
LAT & LONG DATA SOURCE	(GPS (Please GPS Project Entran	ce/Start Point) or Map Interpolation):					
TOTAL ACREAGE THAT WIL	L BE DISTURBED 1: +/-	4.75 acres					
IS THIS PART OF A LARGER			YES ☑ NO □				
IF YES, NAME OF LARGER CO AND PERMIT COVERAGE	OMMON PLAN OF DEVI GE NUMBER: MSR10	ELOPMENT: UMMC Transmission I	ine ProjectTo be permitted at a later date.				
ESTIMATED CONSTRUCTION	N PROJECT START DAT	E:	Sept, 3 2019 YYYY-MM-DD				
ESTIMATED CONSTRUCTION	N PROJECT END DATE:		December 2021 YYYY-MM-DD				
DESCRIPTION OF CONSTRUC	CTION ACTIVITY: Clea	ring and grubbing for constru	ction of new substation.				
PROPOSED DESCRIPTION OF PROPERTY USE AFTER CONSTRUCTION HAS BEEN COMPLETED: Electrical Substation							
SIC Code 4 9 1 1 N	NAICS Code 2 2 1 1 2	1					

NEAREST NAMED RECEIVING STREAM: Town Creek			
IS RECEIVING STREAM ON MISSISSIPPI'S 303(d) LIST OF IN BODIES? (The 303(d) list of impaired waters and TMDL stream se http://www.deq.state.ms/us/MDEQ.nsf/page_TWB_Total_Maximum_D	aments may be found on MDF	YES□ Q's web site:	NO☑
HAS A TMDL BEEN ESTABLISHED FOR THE RECEIVING ST	REAM SEGMENT?	YES□	NO⊡
ARE THERE RECREATIONAL STREAMS, PRIVATE/PUBLIC WITHIN 1/2 MILE DOWNSTREAM OF PROJECT BOUNDRY TI ACTIVITY?	PONDS OR LAKES IAT MAY BE IMPACTED BY	YES□ THE CONSTI	NO☑ RUCTION
EXISTING DATA DESCRIBING THE SOIL (for linear projects p Loring-Urban land complex	lease describe in SWPPP):		
WILL FLOCCULANTS BE USED TO TREAT TURBIDITY IN ST	FORM WATER?	YES□	NO
IF YES, INDICATE THE TYPE OF FLOCCULANT. \Box	ANIONIC POLYACRYLIM OTHER	IDE (PAM)	
IF YES, DOES THE SWPPP DESCRIBE THE METHOD OF INT AND THE LOCATION OF WHERE FLOCCULATED MATERIA		ON OF INTRO! YES □	DUCTION NO 🗆

¹Acreage for subdivision development includes areas disturbed by construction of roads, utilities and drainage. Additionally, a housesite of at least 10,000 ft² per lot (entire lot, if smaller) shall be included in calculating acreage disturbed.

DOCUMENTATION OF COMPLIANCE WITH OTHER REGULATIONS/REQUIREMENTS COVERAGE UNDER THIS PERMIT WILL NOT BE GRANTED UNTIL ALL OTHER REQUIRED MDEQ PERMITS AND APPROVALS ARE SATISFACTORILY ADDRESSED

IS LC	CNOI FOR A FACILITY THAT WILL REQUIRE OTHER PERMITS?		YES □	NO ☑	
IF YE	ES, CHECK ALL THAT APPLY: AIR HAZARDOUS WASTE		PRETREATMEN	NT	
	\square water state operating \square individual NPDes		OTHER:		
IS THOF A	HE PROJECT REROUTING, FILLING OR CROSSING A WATER CONVEYAN NY KIND? (If yes, contact the U.S. Army Corps of Engineers' Regulatory Branch	CE for pe	YES 🗹 ermitting requirem	NO □ tents.)	
IF TH DOC	HE PROJECT REQUIRES A CORPS OF ENGINEER SECTION 404 PERMIT, PUMENTATION THAT:	ROVI	DE APPROPRIA	ГЕ	
•	The project has been approved by individual permit, or				
0	The work will be covered by a nationwide permit and NO NOTIFICATION to the	Corp	s is required, or	>	
•	The work will be covered by a nationwide or general permit and NOTIFICATION	to th	e Corps is require	d 227	
IS A (If ye	LAKE REQUIRING THE CONSTRUCTION OF A DAM BEING PROPOSED? s, provide appropriate approval documentation from MDEQ Office of Land and W	ater,	YES Dam Safety.)	NO ☑	
IF TH BE D	HE PROJECT IS A SUBDIVISION OR A COMMERCIAL DEVELOPMENT, HO ISPOSED? Check one of the following and attach the pertinent documents.	ww	ILL SANITARY S	EWAGE	
	Existing Municipal or Commercial System. Please attach plans and specifications associated "Information Regarding Proposed Wastewater Projects" form or appr Hancock, Harrison, Jackson, Pearl River and Stone Counties. If the plans and specifica of LCNOI submittal, MDEQ will accept written acknowledgement from official(s) collection and treatment that the flows generated from the proposed project can a properly. The letter must include the estimated flow.	oval f tions respo	rom County Utility can not be provide onsible for wastews	Authority in d at the time ater	
	Collection and Treatment System will be Constructed. Please attach a copy of the permit from MDEQ or indicate the date the application was submitted to MDEQ	cover (Date	of the NPDES disc	charge)	
	☐ Individual Onsite Wastewater Disposal Systems for Subdivisions Less than 35 Lots. Please attach a copy of the Letter of General Acceptance from the Mississippi State Department of Health or certification from a registered professional engineer that the platted lots should support individual onsite wastewater disposal systems.				
	Individual Onsite Wastewater Disposal Systems for Subdivisions Greater than 35 feasibility of installing a central sewage collection and treatment system must be response from MDEQ concerning the feasibility study must be attached. If a cent is not feasible, then please attach a copy of the Letter of General Acceptance from certification from a registered professional engineer that the platted lots should studisposal systems.	nade l ral co the S	by MDEQ. A copy llection and waster tate Department of	of the water system f Health or	
INDI	CATE ANY LOCAL STORM WATER ORDINANCE WITH WHICH THE PRO	JECT	MUST COMPLY	:	

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.

Signature of Applicant (owner or prime contractor)

8 19 19 Date Signed

Mike Sulzer, P.E.

Executive Vice President-Operations

Title

Printed Name

¹This application shall be signed 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

Please submit the LCNOI form to:

Chief, Environmental Permits Division

MS Department of Environmental Quality, Office of Pollution Control

P.O. Box 2261

Jackson, Mississippi 39225