AI#76924 GNP2020001

| APPLICANT IS THE:  |                                 |  |
|--|---------------------------------|--|
| OWNER CONTACT INFORMATION  |                                 |  |
| OWNER CONTACT PERSON: JEFF ST. ROMAIN  |                                 |  |
| OWNER COMPANY LEGAL NAME: GREYSTONE DEVELOPMENT GROUP  |                                 |  |
| OWNER STREET OR P.O. BOX: 71338 HIGHWAY 21   |                                 |  |
| OWNER CITY: COVINGTON STATE: LA  | ZIP: 70433                      |  |
| OWNER CITY: COVINGTON STATE: LA  OWNER PHONE #: (985 ) 807-6807 OWNER EMAIL: JEFF@GREYS  | STONEDEVGROUP.COM               |  |
| PRIME CONTRACTOR CONTACT INFORMATIO  | N                               |  |
| PRIME CONTRACTOR CONTACT PERSON: DEREK FIFE  |                                 |  |
| PRIME CONTRACTOR COMPANY LEGAL NAME: ARKEL CONSTRUCTORS  |                                 |  |
| PRIME CONTRACTOR STREET OR P.O. BOX: 1048 FLORIDA STREET   |                                 |  |
| PRIME CONTRACTOR CITY: BATON ROUGE STATE: LA   | ZIP: 70802                      |  |
|  | DEREKF@ARKELCONSTRUCTORS.COM    |  |
| FACILITY SITE INFORMATION  |                                 |  |
| FACILITY SITE NAME: WALK ON'S BISTREAUX & BAR  |                                 |  |
| FACILITY SITE ADDRESS (If the physical address is not available, please indicate the nearest indicate the beginning of the project and identify all counties the project traverses.) | named road. For linear projects |  |
| STREET: HIGHLAND COLONY PARKWAY @ TRACE COLONY PARK DR   |                                 |  |
| CITY: RIDGELAND STATE: MS COUNTY: MADISON  | ZIP: 39157                      |  |
| FACILITY SITE TRIBAL LAND ID (N/A If not applicable): N/A  | 55.09                           |  |
| LATITUDE: 32 degrees 25 minutes 26.85 seconds LONGITUDE: 90 degrees 8  | minutes seconds                 |  |
| LAT & LONG DATA SOURCE (GPS (Please GPS Project Entrance/Start Point) or Map Interpolation):   | JOOGEL EARTH                    |  |
| TOTAL ACREAGE THAT WILL BE DISTURBED 1: 2.00   |                                 |  |
| IS THIS PART OF A LARGER COMMON PLAN OF DEVELOPMENT?   | YES☑ NO□                        |  |
| IF YES, NAME OF LARGER COMMON PLAN OF DEVELOPMENT: RENAISSANC AND PERMIT COVERAGE NUMBER: MSR107 1 5 1   |                                 |  |
| ESTIMATED CONSTRUCTION PROJECT START DATE:   | 2020-02-01<br>YYYY-MM-DD        |  |
| ESTIMATED CONSTRUCTION PROJECT END DATE:   | 2020-12-15                      |  |
|  | YYYY-MM-DD                      |  |
| DESCRIPTION OF CONSTRUCTION ACTIVITY: EARTHWORK, UTILITIES, BUILDING CO  |                                 |  |
| PROPOSED DESCRIPTION OF PROPERTY USE AFTER CONSTRUCTION HAS BEEN 7,500 SF COMMERCIAL RESTAURANT WITH ASSOCIATE PARKING AND UTILITIES   | N COMPLETED:                    |  |
| SIC Code 5 8 1 2 NAICS Code 7 2 2 5 1 1  |                                 |  |

SB

| NEAREST NAMED RECEIVING STREAM: PURPLE CRE   | EK                             |                                |  |  |  |  |  |
|--|--------------------------------|--------------------------------|--|--|--|--|--|
| IS RECEIVING STREAM ON MISSISSIPPI'S 303(d) LIST O<br>BODIES? (The 303(d) list of impaired waters and TMDL strea<br>http://www.deq.state.ms.us/MDEQ.nsf/page/TWB/Total/Maximu  | m segments may be found on MDE | YES□ NO☑<br>:Q's web site:     |  |  |  |  |  |
| HAS A TMDL BEEN ESTABLISHED FOR THE RECEIVING  | G STREAM SEGMENT?              | YES□ NO□                       |  |  |  |  |  |
| ARE THERE RECREATIONAL STREAMS, PRIVATE/PUB WITHIN ½ MILE DOWNSTREAM OF PROJECT BOUNDR ACTIVITY?   |                                | YES□ NO□<br>Y THE CONSTRUCTION |  |  |  |  |  |
| EXISTING DATA DESCRIBING THE SOIL (for linear projects please describe in SWPPP): RIEDTOWN SILT LOAM (R0), 0 TO 2 PERCENT SLOPES, OCCASIONALLY FLOODED WITH HYDROLOGIC SOIL GROUP RATING OF BIO (PER NRCS WEB SOIL SURVEY) |                                |                                |  |  |  |  |  |
| WILL FLOCCULANTS BE USED TO TREAT TURBIDITY  | N STORM WATER?                 | YES□ NO☑                       |  |  |  |  |  |
| IF YES, INDICATE THE TYPE OF FLOCCULANT.   | □ ANIONIC POLYACRYLIM □ OTHER  | IDE (PAM)                      |  |  |  |  |  |
| IF YES, DOES THE SWPPP DESCRIBE THE METHOD OF AND THE LOCATION OF WHERE FLOCCULATED MATI   |                                | ION OF INTRODUCTION YES  NO    |  |  |  |  |  |

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<sup>&</sup>lt;sup>1</sup>Acreage for subdivision development includes areas disturbed by construction of roads, utilities and drainage. Additionally, a housesite of at least 10,000 ft<sup>2</sup> 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  | NOI FOR A FACILITY THAT W  | ILL RE             | QUIRE O                | THER PERMITS?                         |                             | YES 🗆                    | NO [Z]          |  |  |
|--|--|--------------------|------------------------|---------------------------------------|-----------------------------|--------------------------|-----------------|--|--|
| IF YE  | S, CHECK ALL THAT APPLY:   |                    | R 🗆                    | HAZARDOUS W                           | ASTE -                      | PRETREATME               |                 |  |  |
|  | ☐ WATER STATE OPERATION  |                    | _                      | VIDUAL NPDES                          |                             | OTHER:                   |                 |  |  |
| IS TH<br>OF A  | IE PROJECT REROUTING, FILINY KIND? (If yes, contact the U.S.)  | LING OI<br>6. Army | R CROSSI<br>Corps of E | ING A WATER CO<br>Engineers' Regulato | NVEYANCE<br>ry Branch for p | YES   permitting require | NO 🗹<br>ments.) |  |  |
| IF THE PROJECT REQUIRES A CORPS OF ENGINEER SECTION 404 PERMIT, PROVIDE APPROPRIATE DOCUMENTATION THAT:  |  |                    |                        |                                       |                             |                          |                 |  |  |
| •  | The project has been approved by   | individ            | ual permit             | , or                                  |                             |                          |                 |  |  |
| The work will be covered by a nationwide permit and NO NOTIFICATION to the Corps is required, or   |  |                    |                        |                                       |                             |                          |                 |  |  |
| •  | The work will be covered by a na   | tionwide           | or genera              | I permit and NOTI                     | FICATION to t               | he Corps is requir       | ed              |  |  |
|  | LAKE REQUIRING THE CONST<br>s, provide appropriate approval do   |                    |                        |                                       |                             | YES 🔲<br>, Dam Safety.)  | NO 🗹            |  |  |
| IF THE PROJECT IS A SUBDIVISION OR A COMMERCIAL DEVELOPMENT, HOW WILL SANITARY SEWAGE BE DISPOSED? Check one of the following and attach the pertinent documents.  |  |                    |                        |                                       |                             |                          |                 |  |  |
| Existing Municipal or Commercial System. Please attach plans and specifications for the collection system and the associated "Information Regarding Proposed Wastewater Projects" form or approval from County Utility Authority in Hancock, Harrison, Jackson, Pearl River and Stone Counties. If the plans and specifications can not be provided at the time of LCNOI submittal, MDEQ will accept written acknowledgement from official(s) responsible for wastewater collection and treatment that the flows generated from the proposed project can and will be transported and treated properly. The letter must include the estimated flow. |  |                    |                        |                                       |                             |                          |                 |  |  |
|  | Collection and Treatment System will be Constructed. Please attach a copy of the cover of the NPDES discharge permit from MDEQ or indicate the date the application was submitted to MDEQ (Date:)  |                    |                        |                                       |                             |                          |                 |  |  |
|  | 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 Lots. A determination of the feasibility of installing a central sewage collection and treatment system must be made by MDEQ. A copy of the response from MDEQ concerning the feasibility study must be attached. If a central collection and wastewater system is not feasible, then please attach a copy of the Letter of General Acceptance from the State Department of Health or certification from a registered professional engineer that the platted lots should support individual onsite wastewater disposal systems. |                    |                        |                                       |                             |                          |                 |  |  |
| INDI   | CATE ANY LOCAL STORM WA  | TER O              | RDINANC                | E WITH WHICH                          | THE PROJEC                  | T MUST COMPL             | Y:              |  |  |
| CITY   | OF RIDGELAND CODES AND ORD   | NANCES             | 3                      |                                       |                             |                          |                 |  |  |
|  |  |                    |                        |                                       |                             |                          |                 |  |  |
|  |  |                    |                        |                                       |                             |                          |                 |  |  |

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.

of Applicant (owner or prime contractor)

QUATER

<sup>1</sup>This 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