

April 30, 2020

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

**Re: Baseline Storm Water General Permit Renewal Application
Murphy Oil USA, Inc.
Meridian Terminal
6540 North Frontage Road
Meridian, Mississippi 39307
General Baseline Stormwater Coverage No. MSR002283
PPM Project No.: 45080008-TPC20**

To Whom It May Concern:

On behalf of Murphy Oil USA, Inc. (Murphy), PPM Consultants, Inc. (PPM) is submitting this renewal application for a Baseline Storm Water General Permit for Industrial Activities for the Murphy Meridian Terminal. The facility is currently permitted under the General Stormwater Permit Coverage Number MSR002283. The current permit expires on October 31, 2020 and a permit renewal application is due 6 months prior; therefore, Murphy is submitting this renewal application due by April 30, 2020.

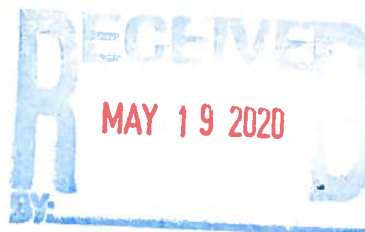
Enclosed are the required application pages, the current permit certification, and a recently updated Stormwater Pollution Prevention Plan (SWP3). The SWP3 was originally prepared using the December 2012 Mississippi Storm Water Pollution Prevention Plan (SWPPP) Guidance Manual for Industrial Facilities. This plan has been updated based on recent personnel changes.

If you have any questions or need additional information, please do not hesitate to contact me at (205) 836-5650.

Sincerely,
PPM Consultants, Inc.



Brandon Bass, P.E.
Project Engineer



Attachment A: Baseline Storm Water General Permit Application
Attachment B: Stormwater Pollution Prevention Plan

cc: Mr. Roger Leder, Terminal Manager, Murphy Oil USA, Inc.

**ATTACHMENT A - BASELINE STORM WATER GENERAL PERMIT
APPLICATION**



MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY

BASELINE NOTICE OF INTENT (BNOI) FOR COVERAGE UNDER THE BASELINE STORM WATER GENERAL NPDES PERMIT MSR00 2 2 8 3 (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: Roger Leder Position: Terminal Manager
Owner Company Name: Murphy Oil USA, Inc.
Owner Street (P.O. Box): 200 Peach Street
Owner City: El Dorado, State: Arkansas Zip: 71730
Owner Phone Number: (870) 862-6411 Owner Email: Roger.Leder@murphyusa.com

OPERATOR INFORMATION (if different than owner)

Operator Contact Name: _____ Position: _____
Operator Company Name: _____
Operator Street (P.O. Box): _____
Operator City: _____ State: _____ Zip: _____
Operator Phone Number: (____) _____ Operator Email: _____

FACILITY INFORMATION

Facility Name: Meridian Terminal

Nature of Business (Include 4-digit Standard Industrial Classification Code (SIC) and description):

SIC Code: 5 1 7 1 Petroleum Bulk Stations and Terminals

Receiving Stream: _____

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: 6540 N. Frontage Rd.

City: Meridian

County: Lauderdale

Zip: 39307

Latitude: 32 degrees 21 minutes 0.7 seconds

Longitude: 88 degrees 45 minutes 0 seconds

Method Used to Determine Lat & Long (GPS of plant entrance) or Map Interpolation): Map Interpolation

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 amounts? Yes No
If yes, please attach a list of water priority chemicals present at the facility.

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):

General Hydrostatic Test Water Discharge

How will sanitary sewage be collected and treated? _____

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.


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

4-30-2020
Date Signed

Roger Leder
Printed Name¹

Terminal Manager
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
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