



MISSISSIPPI DEPARTMENT OF
ENVIRONMENTAL QUALITY

**MISSISSIPPI DEPARTMENT OF
ENVIRONMENTAL QUALITY (MDEQ)
Large Construction Storm Water General Permit
NPDES Permit MSR10**

LARGE CONSTRUCTION FORMS PACKAGE

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These standard forms are used to apply for permit coverage under the Large Construction Storm Water General Permit and for submittals and record keeping required by permit conditions after coverage has been granted. The forms are on our website at www.deq.state.ms.us/MDEQ.nsf/page/epd_epdgeneral. Required information can be completed on screen, printed and signed.

APPLICANT IS THE: ☒ OWNER ☐ PRIME CONTRACTOR

OWNER CONTACT INFORMATION

OWNER CONTACT PERSON: Thomas OliverOWNER COMPANY LEGAL NAME: Dixie SpringsOWNER STREET OR P.O. BOX: 1119 Dixie Springs RoadOWNER CITY: Summitt STATE: Mississippi ZIP: 39666OWNER PHONE #: (504) 913-4626 OWNER EMAIL: dixiespringsenterprise@yahoo.com

PRIME CONTRACTOR CONTACT INFORMATION

PRIME CONTRACTOR CONTACT PERSON: Same as Owner

PRIME CONTRACTOR COMPANY LEGAL NAME: _____

PRIME CONTRACTOR STREET OR P.O. BOX: _____

PRIME CONTRACTOR CITY: _____ STATE: _____ ZIP: _____

PRIME CONTRACTOR PHONE #: () _____ PRIME CONTRACTOR EMAIL: _____

FACILITY SITE INFORMATION

FACILITY SITE NAME: Green Acres

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: 1011 Greenacres DriveCITY: McComb STATE: Mississippi COUNTY: Pike ZIP: 39648FACILITY SITE TRIBAL LAND ID (N/A If not applicable): naLATITUDE: 31 degrees 23 minutes 91 seconds LONGITUDE: -90 degrees 41 minutes 48 secondsLAT & LONG DATA SOURCE (GPS (Please GPS Project Entrance/Start Point) or Map Interpolation): MapTOTAL ACREAGE THAT WILL BE DISTURBED ¹: 28-FEB-2020

IS THIS PART OF A LARGER COMMON PLAN OF DEVELOPMENT?

YES ☐NO ☒

IF YES, NAME OF LARGER COMMON PLAN OF DEVELOPMENT: _____

AND PERMIT COVERAGE NUMBER: MSR10

ESTIMATED CONSTRUCTION PROJECT START DATE:

2019-06-01

YYYY-MM-DD

ESTIMATED CONSTRUCTION PROJECT END DATE:

2019-10-20

YYYY-MM-DD

DESCRIPTION OF CONSTRUCTION ACTIVITY: New Trailer ParkPROPOSED DESCRIPTION OF PROPERTY USE AFTER CONSTRUCTION HAS BEEN COMPLETED:
Functioning Trailer ParkSIC Code 7033 NAICS Code 531190

NEAREST NAMED RECEIVING STREAM: NA

IS RECEIVING STREAM ON MISSISSIPPI'S 303(d) LIST OF IMPAIRED WATER BODIES? (The 303(d) list of impaired waters and TMDL stream segments may be found on MDEQ's web site: http://www.deq.state.ms.us/MDEQ.nsf/page/TWB_Total_Maximum_Daily_Load_Section) YES ☐ NO ☒

HAS A TMDL BEEN ESTABLISHED FOR THE RECEIVING STREAM SEGMENT? YES ☐ NO ☒

ARE THERE RECREATIONAL STREAMS, PRIVATE/PUBLIC PONDS OR LAKES WITHIN ½ MILE DOWNSTREAM OF PROJECT BOUNDARY THAT MAY BE IMPACTED BY THE CONSTRUCTION ACTIVITY? YES ☐ NO ☒

EXISTING DATA DESCRIBING THE SOIL (for linear projects please describe in SWPPP):

WILL FLOCCULANTS BE USED TO TREAT TURBIDITY IN STORM WATER? YES ☐ NO ☒

IF YES, INDICATE THE TYPE OF FLOCCULANT.

- ☐ ANIONIC POLYACRYLAMIDE (PAM)
☐ OTHER _____

IF YES, DOES THE SWPPP DESCRIBE THE METHOD OF INTRODUCTION, THE LOCATION OF INTRODUCTION AND THE LOCATION OF WHERE FLOCCULATED MATERIAL WILL SETTLE? YES ☐ 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.



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)

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 LCNOI FOR A FACILITY THAT WILL REQUIRE OTHER PERMITS?

YES ☒ NO ☐

IF YES, CHECK ALL THAT APPLY: ☐ AIR ☐ HAZARDOUS WASTE ☐ PRETREATMENT
 ☐ WATER STATE OPERATING ☐ INDIVIDUAL NPDES ☒ OTHER: Health Department

IS THE PROJECT REROUTING, FILLING OR CROSSING A WATER CONVEYANCE OF ANY KIND? (If yes, contact the U.S. Army Corps of Engineers' Regulatory Branch for permitting requirements.) YES ☐ NO ☒

IF THE PROJECT REQUIRES A CORPS OF ENGINEER SECTION 404 PERMIT, PROVIDE APPROPRIATE DOCUMENTATION THAT:

- The project has been approved by individual 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 nationwide or general permit and NOTIFICATION to the Corps is required

IS A LAKE REQUIRING THE CONSTRUCTION OF A DAM BEING PROPOSED? YES ☐ NO ☒
(If yes, provide appropriate approval documentation from MDEQ Office of Land and Water, Dam Safety.)

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.

INDICATE ANY LOCAL STORM WATER ORDINANCE WITH WHICH THE PROJECT 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.

Thomas Oliver
Signature of Applicant¹ (owner or prime contractor)

2-28-2019
Date Signed

Thomas Oliver
Printed Name¹

Owner
Title

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

Dixie Springs Enterprise
1119 Dixie Springs Road
Summit Mississippi 39666

RE: AI # 76350

Dear Mr. Tynes,

This letter and the attached documents are in response to the email dated 11 February 2020. Our position on the site has not changed and we willingly accept the NOV with no contest. At this time, we would like to submit our backdated NOI as well as receipt and invoice records to request a penalty reduction by a pro-rated amount of 50 percent. As you can see the cost of the soil solidification exceeded the NOV amount but to expedite this process and move on for both parties we would like to be considered for a reasonable reduction in the proposed penalty.

Attachments:

- 1- Large Construction Forms Package
- 2- Notice of Violation
- 3- Water Pipe Installation Map
- 4- Receipt Summary and Proof of Purchase
- 5- Department of Health Authorization Letter

Thankyou for your consideration in this manner,



Thomas Oliver

Construction entrance/exits are stone stabilized site entrances which reduce sediment tracked onto public roads. Apply gravel or crushed rock to the driveway area and restrict traffic to this one route. Use 3 to 6 inch gravel over a geotextile fabric. At the end of each day sweep or scrape up any soil tracked onto the street. Limit "standard" vehicle access (including workers' vehicles) to only streets and roads, keep vehicles off of future yard areas; limit tracking of mud onto streets by requiring any required vehicles to use designated access drives. Streets are conduits for storm water, it is important to keep mud and sediment off the streets.

Stockpiles of sand or soil should be covered with plastic or tarps at the end of each workday, or surrounded with silt fence or haybales. Do not locate a stockpile near a street, storm drain inlet, or ditch.

Erosion control blankets or mats are machine-produced mats of straw or other fibers held together with netting that provide temporary or permanent stabilization in critical areas, such as slopes or channels, so that vegetation may be established.

Storm Drain Inlets on the lot must be protected by surrounding or covering with a filter material until final stabilization has been achieved.

Additional Controls: The above controls are the more common practices used at small construction sites. There are a number of other controls, techniques and manufactured product available. A few examples include hydro seeding, diversion berms, silt dikes and fiber logs. Even something as simple as a tarp or plastic may provide temporary cover for small exposed areas. You may wish to contact an erosion and sediment control specialist, local building official, or MDEQ for further information. In addition, MDEQ has several guidance manuals that may be of assistance and the internet has abundant guidance on construction BMPs.

Housekeeping Controls: Pollutants that may enter storm water from construction sites because of poor housekeeping include oils, grease, paints, gasoline, solvents, litter, debris, and sanitary waste. Good housekeeping practices include:

- Frequent cleaning of trash and debris, providing waste receptacles at convenient locations and providing regular collection of waste;
- Directing concrete trucks to the subdivision's designated wash-off area(s) or back to the Ready-Mix facility;
- Providing protected storage areas for chemicals, paints, solvents, fertilizers, and other potentially toxic materials; and
- Providing adequately maintained sanitary facilities.

In addition, you should be aware that State air regulations prohibit the open burning of residential solid waste.

Inspection Requirements. Homebuilders shall inspect all erosion controls as often as is necessary, but no less than weekly, to ensure that appropriate erosion and sediment controls have been properly constructed and maintained to prevent erosion and sediment from leaving the site and determine if additional or alternative control measures are required. The inspection results shall be recorded on the Site Inspection and Certification Form contained in the Large Construction Forms Package. MDEQ strongly recommends that homebuilders perform "walk through" inspections daily. It is a responsibility of the homebuilder to install additional and/or alternative erosion and sediment controls when existing controls prove to be ineffective in preventing sediment from leaving the site.

Retention of Records. All records, reports, forms and information resulting from activities required by this permit shall be retained for a period of at least three years from the date of the document origin.

Duty to Comply. Lot owners must comply with the applicable permit conditions. See Activities 3, 5, 6, 7, 10 and 11 in the Large Construction Storm Water General Permit for applicable conditions. Any noncompliance with the applicable permit conditions and aforementioned conditions including sediment leaving the lot constitutes a violation of the Mississippi Water Pollution Control Law and is grounds for enforcement action. It shall not be an acceptable defense that controls were not installed because subsequent activities would require their replacement or cause their destruction.

REQUIREMENTS FOR LOTS IN RESIDENTIAL SUBDIVISION WHICH ARE COVERED BY THE LARGE CONSTRUCTION STORM WATER GENERAL PERMIT

As a homebuilder on a lot that is part of a regulated subdivision, you are also regulated under the State's storm water regulations and are required to take steps to keep soil and sediment from leaving the lot. When rain falls on exposed soil it can wash away valuable topsoil. It also carries sediment, nutrients and other pollutants into streets, gutters and ditches, where it then travels to lakes, rivers, streams or wetlands. Polluted runoff can cause excessive growth of aquatic weeds and algae and reduce recreational opportunities such as swimming and fishing. Sediment laden runoff can also destroy fish habitat reducing productive fishing opportunities. In addition, sediment-laden runoff can also clog pipes, ditches, streams and basins resulting in increased flooding and maintenance cost. Therefore, the homebuilder is required to minimize off-site damage from soil erosion, sediment leaving the construction site, and poor "housekeeping" practices. This requirement must be accomplished by developing and implementing a Storm Water Pollution Prevention Plan (SWPPP). Some examples of individual lot SWPPPs are attached for your convenience. Sketch the controls on a copy of your site plan. Narrative notes on the site plan may also be used in addition to the erosion control symbols.

In developing and implementing the SWPPP, controls must be used from each control group (vegetative, structural, housekeeping) to prevent erosion and sediment and other pollutants from leaving the site. Commonly used controls include:

Vegetative Controls

Temporary vegetation includes annual grasses that sprout quickly such as annual rye, browntop millet, oats, and winter wheat. These grow quickly with little care and can protect the soil from rainfall and act as a filter. They will not provide permanent cover. Permanent cover must be established as indicated below. When a disturbed area will be left undisturbed for fourteen (14) days or more, the appropriate temporary or permanent vegetative practices shall be implemented immediately.

Mulching is the placement of hay grass, woodchips, straw, or synthetic material on the soil to provide temporary cover to protect the soil from rain. Mulching may be the only option during the winter when seeding or sodding is not possible. Mulch must stay in place to be effective. Netting, stakes or chemical binders are used to anchor some types of mulch. Be sure to reinstall washed-out mulch and anchor if necessary until permanent cover is established.

Permanent stabilization is the establishment of a permanent vegetative cover on disturbed areas using either sod, perennial seed, trees or shrubs. When a disturbed area will be left undisturbed for fourteen (14) days or more, the appropriate temporary or permanent vegetative practices shall be implemented immediately. Silt fences, and other temporary measures must be removed following permanent stabilization.

Vegetative buffer zones are undisturbed or planted vegetated areas that are between construction activities and water bodies.

Structural Controls

Silt fences are temporary sediment barriers made of filter fabric buried at the bottom, stretched, and supported by stakes. The silt fence slows runoff and allows it to puddle or pond, so soil and sediment can settle out before leaving the site. The bottom eight to twelve inches of fence must either be sliced in or buried in a trench about four to six inches deep by four to six inches wide. **Silt fences that are not buried are improperly installed. They have no useful function, are a waste of money, and may result in enforcement action.** Stakes must be on the downstream side of the fence and spaced about 3 feet apart. Silt fence must not be installed across streams, ditches, waterways, or other concentrated flow areas. Place fences on the contour or perpendicular to the slope of the hill so that water and sediment will pond behind the fence. **Turn ends uphill** to prevent water going around the end. Install on the downslope, downhill, downstream, or low side of your lot. Keep the fence/barrier in place until grass is established.

Slope drains are piping or lined channels that carry storm water downslope without erosion. A good example would be a downspout extender. Extenders may be used to protect temporarily stabilized areas from roof runoff. Extenders can direct water from roof gutters to paved or grassed areas. Remove extenders following permanent stabilization.

PRIME CONTRACTOR CERTIFICATION

LARGE CONSTRUCTION GENERAL PERMIT

Coverage No. MSR10 County McComb
(Fill in your Certificate of Coverage Number and County)



By completing and submitting this form to MDEQ, the prime contractor is certifying that (1) they have operational control over the erosion and sediment control specifications (including the ability to make modifications to such specifications) or (2) they have day-to-day operational control of those activities at the site necessary to ensure compliance with the SWPPP and applicable permit conditions.

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 permit. Notwithstanding any permit condition to the contrary, the coverage recipient and any person who causes pollution of waters of the state or places waste in a location where they are likely to cause pollution of any waters of the state shall remain responsible under applicable federal and state laws and regulations and applicable permits.

PRIME CONTRACTOR INFORMATION

PRIME CONTRACTOR CONTACT PERSON: Owner PHONE NUMBER: ()

PRIME CONTRACTOR COMPANY: _____

PRIME CONTRACTOR STREET (P.O. BOX): _____

PRIME CONTRACTOR CITY: _____ STATE: _____ ZIP: _____

E-MAIL ADDRESS: _____

OWNER INFORMATION

OWNER CONTACT PERSON: Thomas Oliver PHONE NUMBER: (504) 913-4626

OWNER COMPANY NAME: Dixie Springs

PROJECT INFORMATION

PROJECT NAME: Green Acres

DESCRIPTION OF CONSTRUCTION ACTIVITY: Install 16 Trailers for residential housing

PHYSICAL SITE ADDRESS (If the physical address is not available indicate the nearest named road. For linear projects, indicate the beginning of the project and identify all counties the project traverses.)

STREET: Site is contained within Green Acres Drive

CITY: McComb COUNTY: Pike

I certify that I am the prime contractor for this project and will comply with all the requirements in the above referenced general NPDES permit. I further 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.

Thomas Oliver
Prime Contractor Signature¹

2-28-2019
Date Signed

Thomas Oliver
Printed Name¹

Owner
Title

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.

This Prime Contractors Certification form shall be submitted to:

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



Registration Form for Residential Lot Coverage under Mississippi's Large Construction Storm Water General Permit INSTRUCTIONS

Coverage recipients for residential subdivision construction that do not retain responsibility for permit compliance for individual lots are to furnish this Registration to buyers of individual lots at the time of purchase. In addition, the attached Requirements for Individual Lots in Residential Subdivisions, the Site Inspection and Certification Form and the Large Construction Storm Water General Permit shall also be given to buyers of individual lots at the time of purchase. This form is providing notification to buyers of lots in residential developments, that being part of a "larger common plan of development or sale," coverage is required under Mississippi's Large Construction Storm Water General Permit. To comply with the permit, the **Registration Form must be submitted to MDEQ** at the address listed above and a Storm Water Pollution Prevention Plan (SWPPP) must be developed and implemented to reduce pollutants in storm water discharges during construction activity. **The SWPPP is not required to be submitted to MDEQ.** A copy of the SWPPP and Registration Form must be kept at the construction site or locally available (i.e., able to be produced within an hour of being requested by a state or local inspector). See the following attachments for information on SWPPP development. In addition, **a copy of the completed Registration Form(s) must be retained by the developer and submitted to the MDEQ when requesting termination of permit coverage.** If the buyer or homebuilder sells the lot before a house is built, they must provide this form to the new owner. All questions must be answered. Answer "NA" if the question is not applicable. For further information, contact MDEQ at 601/961-5171 or access our website address: www.deq.state.ms.us/MDEQ.nsf/page/epd_epdgeneral.

ORIGINAL COVERAGE RECIPIENT NAME:

Thomas Oliver

COMPANY NAME:

Dixie Springs

STREET OR P.O. BOX:

1119 Dixie Springs Road

CITY:

McComb MS 39666

STATE:**ZIP:****PHONE # (INCLUDE AREA CODE):****BUYER / HOMEBUILDER:**

Same as Original Coverage Recipient

COMPANY NAME (IF APPROPRIATE):**STREET OR P.O. BOX:****CITY:****STATE:****ZIP:****BUYER PHONE # (INCLUDE AREA CODE):**

RESIDENTIAL SUBDIVISION NAME: Green Acres

LARGE CONSTRUCTION STORM WATER PERMIT COVERAGE NUMBER: MSR10: _____ 913-4928

LOT NUMBER(s) (attach an additional sheet if necessary): 1-16 **LOT SIZE(s):** 1 Acre per Unit

PHYSICAL SITE ADDRESS (IF NOT AVAILABLE INDICATE THE NEAREST NAMED ROAD):

STREET: Green Acres Road

CITY: McComb

COUNTY: Pike

ZIP: 39648

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 persons 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. As a buyer / homebuilder, I further certify that I have read and understand the terms and conditions of Mississippi's Large Construction Storm Water General Permit and that I am responsible for installing and maintaining the appropriate pollution control measures for the purchased lot(s) identified.

Thomas Oliver
Original Coverage Recipient Signature¹

Thomas Oliver
Printed Name

NA
Buyer / Homebuilder Signature¹

NA
Printed Name

28-FEB-2020

Date Signed

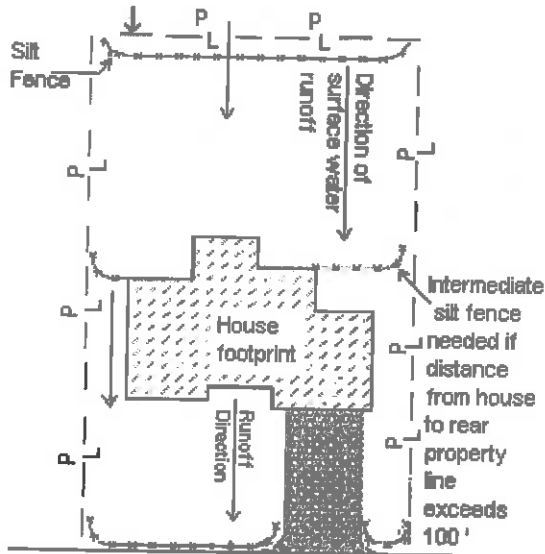
Dave
Title

Date Signed

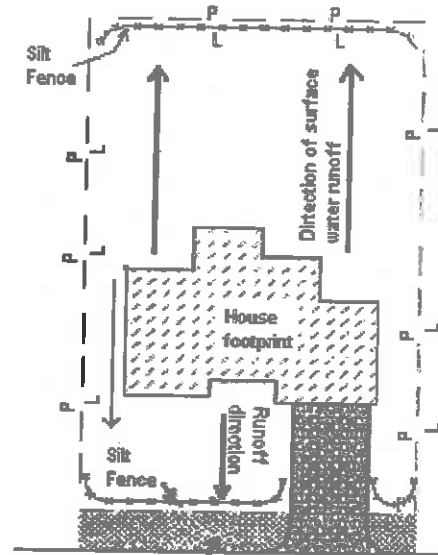
Title

¹This application shall be signed according to ACT11, T-7 of the Large Construction General Permit.

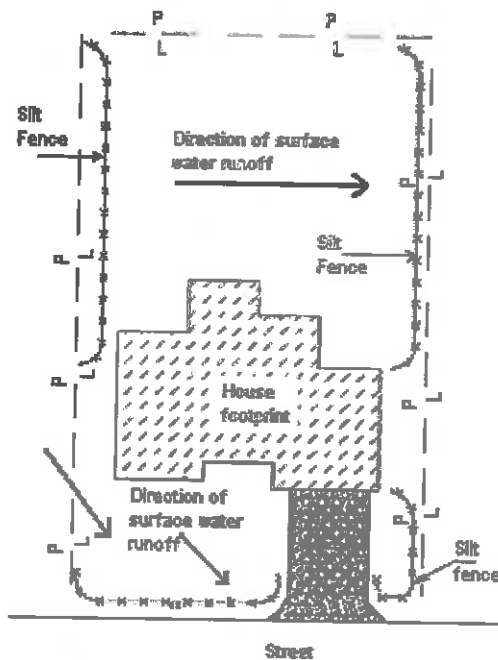
EXAMPLE INDIVIDUAL LOT EROSION AND SEDIMENT CONTROL PLANS



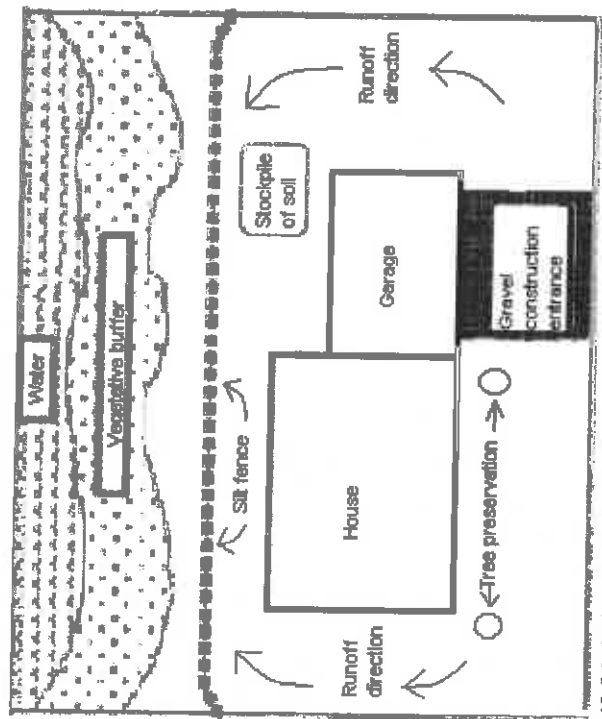
Street
 --- Silt Fence
 Gravel construction entrance
 ← Runoff direction
 P L Property Line



An erosion control mat will be placed at this critical area (steep slope) in order to establish grass
 --- Silt fence
 Gravel construction entrance
 ← Direction of surface water runoff
 Erosion control mat
 P L Property Line



Street
 --- Silt fence
 Gravel construction entrance
 ← Direction of surface water runoff
 P L Property Line



All disturbed areas will be temporarily seeded with ryegrass. After final grade has been reached, all disturbed areas will be sodded with bermuda grass.

LARGE CONSTRUCTION GENERAL PERMIT
SITE INSPECTION AND CERTIFICATION FORM
COVERAGE NUMBER (MSR10 _____)



INSTRUCTIONS

Results of construction storm water inspections required by ACT6 of this permit shall be recorded on this report form and kept with the Storm Water Pollution Prevention Plan (SWPPP) in accordance with the inspection documentation provisions of ACT9 of the this permit. Inspections shall be performed at least weekly for a minimum of four inspections per month. The coverage number must be listed at the top of all Inspection and Certification Forms.

COVERAGE RECIPIENT INFORMATION

OWNER/PRIME CONTRATOR NAME: Thomas Oliver
PROJECT NAME: Green Acres
PROJECT STREET ADDRESS: Green Acres Drive
PROJECT CITY: McComb MS PROJECT COUNTY: Pike
OWNER/PRIME CONTRACTOR MAILING ADDRESS: Thomas Oliver
MAILING CITY: Summit STATE: Mississippi ZIP: 39666
CONTACT PERSON: Thomas Oliver CONTACT PHONE NUMBER: (504) 913-4626
EMAIL ADDRESS: _____

INSPECTION DOCUMENTATION

DATE (mo/day/yr)	TIME (hr:min AM/PM)	ANY DEFICIENCIES? (CHECK IF YES)	INSPECTOR(S)
		<input type="checkbox"/>	
		<input type="checkbox"/>	
		<input type="checkbox"/>	
		<input type="checkbox"/>	
		<input type="checkbox"/>	
		<input type="checkbox"/>	

Deficiencies Noted During any Inspection (give date(s); attach additional sheets if necessary): _____

Corrective Action Taken or Planned (give date(s); attach additional sheets if necessary): NOV Issued -
All CAP Items & Recommendations Implemented.

Based upon this inspection, which I or personnel under my direct supervision conducted, I certify that all erosion and sediment controls have been implemented and maintained, except for those deficiencies noted above, in accordance with the Storm Water Pollution Prevention Plan (SWPPP) and sound engineering practices as required by the above referenced permit. I further certify that the LCN01 and SWPPP information is up to date.

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 gather and evaluate the information submitted. Based on my inquiry of the person or persons 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 fines and imprisonment for knowing violations.

Thomas Oliver
Authorized Signature
Thomas Oliver
Printed Name

2-28-2019
Date
Owner
Title

**MAJOR MODIFICATION FORM
FOR LARGE CONSTRUCTION GENERAL PERMIT**
Coverage No. MSR10 _____ County _____



MISSISSIPPI DEPARTMENT OF
ENVIRONMENTAL QUALITY

INSTRUCTIONS

Coverage recipients shall notify the Mississippi Department of Environmental Quality at least 30 days in advance of the following activities (check all that apply). This form should be submitted with a modified Storm Water Pollution Prevention Plan (SWPPP), updated USGS topographic map, Corps of Engineers Section 404 documentation and wastewater collection and treatment information, as appropriate.

- ☐ SWPPP details have been developed and are ready for MDEQ review for subsequent phases of an existing, covered project.
- ☐ "Footprint" identified in the original LCNOI is proposed to be enlarged.

This form must be signed by the current coverage recipient under Mississippi's Large Construction General Permit. A different developer of new phases of existing subdivisions must apply for separate permit coverage through the submittal of a new complete LCNOI package. Coverage recipients are authorized to discharge storm water associated with proposed expansions of existing subdivisions or subsequent phases, under the conditions of the General Permit, only upon receipt of written notification of approval by MDEQ. All other modifications, such as changes of erosion and sediment controls used, must be in accordance with ACT6, S-1 (6) and S-2 (7) of the General Permit.

ALL INFORMATION MUST BE COMPLETED (indicate "N/A" where not applicable)

COVERAGE RECIPIENT INFORMATION

COVERAGE RECIPIENT CONTACT NAME: _____ TEL # (____) _____

COMPANY NAME: _____

STREET OR P.O. BOX: _____

CITY: _____ STATE: _____ ZIP: _____ E-MAIL: _____

PROJECT INFORMATION

PROJECT NAME: _____

CITY: _____

ADDITIONAL ACREAGE TO BE DISTURBED: _____ TOTAL PROJECT ACREAGE: _____

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 (must be signed by coverage recipient) _____

Date _____

Printed Name _____

Title _____

Please submit this form to:

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

Environmental Permits for Industrial Facilities

Request for Transfer of Permit, General Permit Coverage and/or Name Change

Instructions: For Ownership Change-Complete all Items on Page 1 (except Item VIII) and Page 2 (reverse side).

For Name Change Only-Complete Items I, II, V, VI, VII, VIII, and Page 2 (reverse side).

Note-This form should be submitted to MDEQ when a transferal date is finalized but prior to the actual transfer.

Item I. Facility Name: _____ Location: (Do Not Use P.O. Box) Street: _____ City: _____ State: <u>MS</u> Zip: _____ County: _____ Telephone: (____) _____	Item II. Responsible official after transfer or name change: Name: _____ Title: _____ Mailing Address: Street/P.O. Box: _____ City: _____ State: _____ Zip: _____ Telephone (____) _____								
Item III. Previous Permittee ¹ : _____ Mailing Address: Street/P.O. Box: _____ City: _____ State: _____ Zip: _____ Telephone: (____) _____	Item IV. New Permittee ¹ : _____ Mailing Address: Street/P.O. Box: _____ City: _____ State: _____ Zip: _____ Telephone: (____) _____								
Item V. Industrial Activity SIC Code: _____ Brief Description: _____	Item VI. Will Facility Operations Change? Yes _____ No _____ If yes, the appropriate applications and permits may require modification prior to change.								
Item VII. Will Facility Name Change? Yes _____ No _____ If Yes, Provide New Name for Permit Coverage. New Name: _____	Item VIII. Signature for Name Change Print Name: _____ Authorized Signature ² : _____ Title: _____ Date: _____								
Item IX. We the undersigned request transfer of permit(s) and/or permit coverage(s) listed on the backside of this form. From: _____ To: _____ Acquisition Date: _____ <p>By signature below, the recipient certifies that: 1) they are aware of the requirements of the permit(s), 2) the applicant can demonstrate to the Permit Board it has the financial resources and operational expertise and 3) agrees to accept responsibility and liability for the permit(s) listed on the back of this document. By signature below, the previous permittee is requesting that the permit(s) and/or permit coverage(s) be transferred to the recipient. The transfer of the permit(s) or permit coverage(s) will be by written notification from the Office of Pollution Control (OPC). The OPC may require submittal of information regarding financial capability and past compliance history of the recipient.</p> <table style="width: 100%;"> <tr> <td style="width: 50%;"> _____ Print New Permittee¹ Name </td> <td style="width: 50%;"> _____ Print Previous Permittee¹ Name </td> </tr> <tr> <td> _____ New Authorized Signature² </td> <td> _____ Previous Authorized Signature² </td> </tr> <tr> <td> _____ Title </td> <td> _____ Title </td> </tr> <tr> <td> _____ Date </td> <td> _____ Date </td> </tr> </table> <p>¹A Permittee is a company or individual that has been issued an individual permit or coverage under a general permit. ²Authorized Signature must be owner or in the case of a corporation, a corporate officer as defined in Regulations 11 Miss. Admin. Code Pt. 2, Ch. 2. and 11 Miss. Admin. Code Pt. 6, Ch. 1.</p>		_____ Print New Permittee ¹ Name	_____ Print Previous Permittee ¹ Name	_____ New Authorized Signature ²	_____ Previous Authorized Signature ²	_____ Title	_____ Title	_____ Date	_____ Date
_____ Print New Permittee ¹ Name	_____ Print Previous Permittee ¹ Name								
_____ New Authorized Signature ²	_____ Previous Authorized Signature ²								
_____ Title	_____ Title								
_____ Date	_____ Date								

Mississippi Department of Environmental Quality/Office of Pollution Control
P.O. Box 2261
Jackson, Mississippi 39225
(601) 961-5171

Item X. Storm Water

(Check One)

- ☒ A Storm Water Pollution Prevention Plan (SWPPP) is not required for the site.
- ☐ The recipient certifies that they have received a copy of the Office of Pollution Control approved SWPPP from the original owner.
- ☐ The recipient is submitting a new SWPPP, which is attached to this form.
- ☐ A copy of the SWPPP cannot be obtained from the original owner.

Item XI. Hazardous Waste ID Number

EPA ID No. _____

(Check One)

- ☐ An EPA Hazardous Waste ID Number is not required for the site.
- ☐ The site's EPA ID Number is listed above and a Notification of Regulated Waste Activity Form is attached.

Item XII. Permit(s) and/or Coverage(s) to be Transferred

Permit Type: _____

Permit/Coverage No.: _____

Permit Issuance Date: _____

Date of General Permit Coverage: _____

Permit Expiration Date: _____

Permit Type: _____

Permit/Coverage No.: _____

Permit Issuance Date: _____

Date of General Permit Coverage: _____

Permit Expiration Date: _____

Permit Type: _____

Permit/Coverage No.: _____

Permit Issuance Date: _____

Date of General Permit Coverage: _____

Permit Expiration Date: _____

Permit Type: _____

Permit/Coverage No.: _____

Permit Issuance Date: _____

Date of General Permit Coverage: _____

Permit Expiration Date: _____

Permit Type: _____

Permit/Coverage No.: _____

Permit Issuance Date: _____

Date of General Permit Coverage: _____

Permit Expiration Date: _____

Permit Type: _____

Permit/Coverage No.: _____

Permit Issuance Date: _____

Date of General Permit Coverage: _____

Permit Expiration Date: _____

Permit Type: _____

Permit/Coverage No.: _____

Permit Issuance Date: _____

Date of General Permit Coverage: _____

Permit Expiration Date: _____

OTHER INFORMATION:

INSPECTION SUSPENSION FORM

UNDER LARGE CONSTRUCTION STORM WATER GENERAL NPDES PERMIT MSR10



MISSISSIPPI DEPARTMENT OF
ENVIRONMENTAL QUALITY

INSTRUCTIONS

Coverage recipients under Mississippi's Large Construction Storm Water General Permit may temporarily suspend required weekly inspections of erosion and sediment controls and monthly record keeping by submission of this form. Inspections may be suspended only when land disturbing activities have ceased, no further land disturbing activities are planned for a period of at least six (6) months, the site is stable with no active erosion, and vegetative cover has been established (see ACT9, S-1). The coverage recipient is responsible for all permit conditions during the suspension period and nothing in this condition shall limit the rights of MDEQ to take enforcement or other actions against the coverage recipient. Once land disturbing activities resume MDEQ must be notified and all inspections and record keeping required by the permit must also resume. Color photographs, representative of the construction site, must be submitted with this inspection form.

COVERAGE RECIPIENT INFORMATION

COVERAGE RECIPIENT CONTACT PERSON: _____

COMPANY NAME: _____

STREET OR P.O. BOX: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE # (INCLUDE AREA CODE): _____ E-MAIL: _____

PROJECT INFORMATION

CONSTRUCTION STORM WATER GENERAL PERMIT COVERAGE NUMBER: **MSR10** _____

PROJECT NAME: _____

CITY: _____ COUNTY: _____

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. **I further certify that: land disturbing activities have ceased, no further land disturbing activities are planned for a period of at least six (6) months, the site is stable with no active erosion, and vegetative cover has been established.**

Signature (must be signed by coverage recipient) _____

Date Signed _____

Printed Name _____

Title _____

Please submit this form to:

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

Request for Termination (RFT) of Coverage



LARGE CONSTRUCTION GENERAL PERMIT
Coverage No. MSR10 _____ County _____
(Fill in your Certificate of Coverage Number and County)

This form must be submitted within thirty (30) days of achieving final stabilization (see ACT10, S-1 of general permit). Failure to submit this form is a violation of permit conditions.

The signatory of this form must be the owner or operator (prime contractor) who is the current coverage recipient (rather than the project manager or environmental consultant).

(Please Print or Type)

Project Name: _____
Physical Site Street Address (if not available, indicate nearest named road): _____
City: _____ County: _____ Zip: _____
Coverage Recipient Company Name: _____
Street Address / P.O. Box: _____
City: _____ State: _____ Zip: _____
Coverage Recipient Contact Name and Position: _____ Tel. #: (____) _____

Has another owner(s) or operator(s) assumed control over all areas of the site that have not reached final stabilization?

RESIDENTIAL SUBDIVISIONS:

- ☐ **YES. A copy of the Registration Form for Residential Lot Coverage for each lot or out parcel that has been sold and a site map, indicating which lots have been sold, are attached.**
- ☐ **NO. Coverage may not be terminated until all areas have reached final stabilization.**

COMMERCIAL DEVELOPMENT:

- ☐ **YES. A copy of the site map, indicating which out-parcels have been sold, is attached.**
- ☐ **NO. Coverage may not be terminated until all areas have reached final stabilization.**

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 fines and imprisonment for knowing violations. I understand that by submitting this Request for Termination and receiving written confirmation, I will no longer be authorized to discharge storm water associated with construction activity under this general permit. Discharging pollutants associated with construction activity to waters of the State without proper permit coverage is a violation of state law. I also understand that the submittal of this Request for Termination does not release an owner or operator from liability for any violations of this permit or the Clean Water Act.

Authorized Name (Print) _____ Telephone _____ Signature _____ Date Signed _____

¹This application shall be signed according to the General Permit, ACT11, T-7 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.

After signing please mail to: Chief, Environmental Permits Division
MS Department of Environmental Quality, Office of Pollution Control
P.O. Box 2261
Jackson, Mississippi 39225



STATE OF MISSISSIPPI
TATE REEVES
GOVERNOR
MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY
CHRIS WELLS, INTERIM EXECUTIVE DIRECTOR

February 11, 2020

Mr. Thomas Oliver
Van Norman Curve Development
1119 Dixie Springs Road
Summit, MS 39666

Re: Administrative Conference Summary Letter
Van Norman Curve Development
Summit, Pike County
Branches Group - Stormwater-401 Permit No.

Dear Mr. Oliver:

On February 11, 2020, the Mississippi Department of Environmental Quality (MDEQ) held an administrative conference with Mr. Colby Davis on your behalf via phone. The purpose of this conference was to discuss and reach a settlement regarding the violation listed in the Notice of Violation dated November 12, 2019.

During the conference, we agreed that you would submit the following information by February 25, 2020:

- 1. A response to the presented penalty with written justification for any requested adjustment to the penalty.**
- 2. Submit a Large Construction Notice of Intent (LCNOI) the Environmental Permits Division.**

If you have any questions or comments, you may contact Thomas Tynes at (601) 961-5578 or me at (601) 961-5722.

Sincerely,

A handwritten signature in blue ink that reads "Charity Rockingham".

Charity Rockingham
Enforcement Branch
Environmental Compliance and Enforcement Division

cc: Mr. Colby Davis, via email

Agency Interest No. 76350

ENF20190001

OFFICE OF POLLUTION CONTROL
Post Office Box 2261 Jackson, Mississippi 39225-2261 • Tel: (601) 961-5171 • Fax: (601) 354-6612 • www.mdeq.ms.gov
AN EQUAL OPPORTUNITY EMPLOYER

MDEQ SIGN-IN SHEET

Subject: Van Norman Curve Development

Purpose: X Admin Conf.
 Meeting

AI: 76350

Date: 2/11/20

Time: 10 AM

Organizer: MDEQ

Conf Room #:[illegible]

FRIENDSHIP COMMUNITY WATER SYSTEM, INC.

PIKE COUNTY, MISSISSIPPI

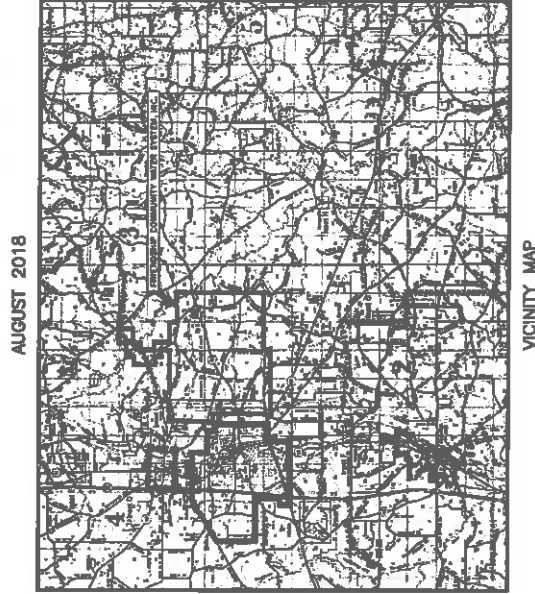
DIXIE SPRINGS SUB-DIVISION WATER-MAIN INSTALLATION

BOARD MEMBERS

TENNA BOGGS - PRESIDENT
 WAYNE BUSBY - VICE-PRES.
 LINDSEY DEJESUS - SECRETARY
 JEFFERY WHITE
 BOBBY MCKENNIS
 C.V. GLENNIS
 LAYAUGHN HAMILTON

ATTORNEY

BRANDON FRAZIER
McCOMB, MISSISSIPPI



ENGINEER

**ENGINEERING SERVICE
—CONSULTING ENGINEERS—
RICHLAND, MISSISSIPPI**

INDEX TO PLANS	
SHEET NO.	DESCRIPTION
1	TITLE SHEET
2	LAYOUT
3	PLAN SHEET
4	STANDARD WATER DETAILS
5	STANDARD DOOR/ WINDOW DETAILS

WATER DISTRIBUTION SYSTEM

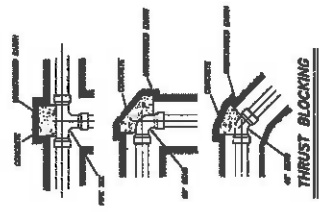
DIXIE SPRINGS SUB-DIVISION
WATER MAIN INSTALLATION

FRIENDSHIP COMMUNITY WATER
SYSTEM, INC.
PIKE COUNTY, MISSISSIPPI

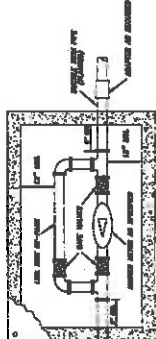


REVISION	DATE	BY

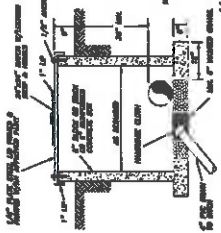




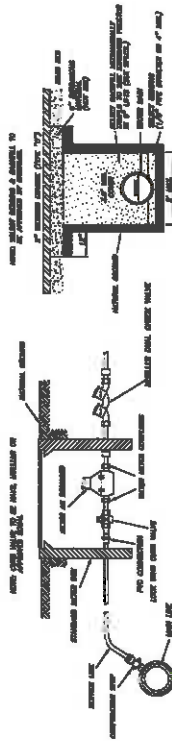
TYPICAL ROAD BORE



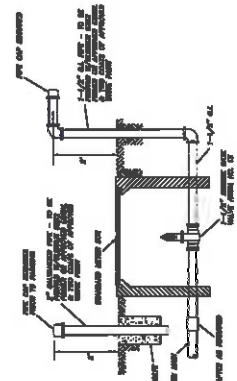
GATE VALVE ASSEMBLY



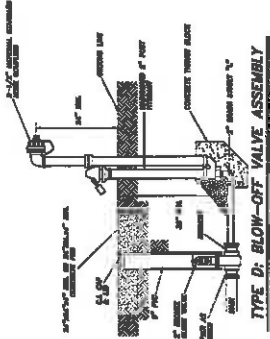
SERVICE CONNECTION



PRESSURE REGULATOR ASSEMBLY



TYPE A: 1-1/2" BLOW-OFF VALVE ASSEMBLY



TYPE D: BLOW-OFF VALVE ASSEMBLY

Vendor	Cost	Description
Quality Rental	\$ 294.25	E-35L Rental
Charles Herring	\$ 200.00	Aerial Engineering Analysis
Lowes	\$ 539.02	Silt Fence Material
Dixie Springs	\$ 7,200.00	Bobby Wallace Equipment Operator
Fortnberry Sand and Grave l	\$ 882.75	Size # 57 Gravel for soil cover
	\$ 9,116.02	

DQ

Fortenberry Sand & Gravel LLC
1610 N Clark Ave
Magnolia, MS 39652 US
(601) 783-3652
j410bery@gmail.com

pc Clk# 2660
\$ 882.75



INVOICE

BILL TO
Thomas Oliver
Dixie Springs Enterprise LLC

INVOICE # 1149
DATE 01/31/2020
DUE DATE 03/01/2020
TERMS Net 30

DATE	ACTIVITY	DESCRIPTION	QTY	RATE	AMOUNT
01/31/2020	57 Crushed Limestone		15	55.00	825.00T

SUBTOTAL	825.00
TAX	57.75
TOTAL	882.75
BALANCE DUE	\$882.75

DQ

Fortenberry Sand & Gravel LLC
1610 N Clark Ave
Magnolia, MS 39652 US
(601) 783-3652
j410bary@gmail.com

1 pc



SALES RECEIPT

BILL TO

Thomas Oliver
Dixie Springs Enterprise LLC

SALES # 1150**DATE 01/30/2020****PMT METHOD**

Check

DATE	ACTIVITY	DESCRIPTION	QTY	RATE	AMOUNT
01/30/2020	200 Crushed Limestone		24	64.00	1,536.00T
01/30/2020	Oversized Washed Gravel		20	25.00	500.00T

SUBTOTAL	2,036.00
TAX	142.52
TOTAL	2,178.52
BALANCE DUE	\$0.00

Fortenberry Sand & Gravel LLC
1610 N Clark Ave
Magnolia, MS 39652
(601) 783-3652
j410bery@gmail.com



SALES RECEIPT

BILL TO
Thomas Oliver
Dixie Springs Enterprise LLC

SALES # 1106
DATE 09/30/2019

DATE	ACTIVITY	DESCRIPTION	QTY	RATE	AMOUNT
09/30/2019	6-10 Crushed Limestone		24.57	55.00	1,351.35

SUBTOTAL	1,351.35
TAX	0.00
TOTAL	1,351.35
BALANCE DUE	\$0.00

Fortenberry Sand & Gravel LLC
1610 N Clark Ave
Magnolia, MS 39652
(601) 783-3652
j410berry@gmail.com



SALES RECEIPT

BILL TO
Thomas Oliver
Dixie Springs Enterprise LLC

SALES # 1133
DATE 12/12/2019

DATE	ACTIVITY	DESCRIPTION	QTY	RATE	AMOUNT
12/12/2019	57 Crushed Limestone		28	55.00	1,540.00T
SUBTOTAL					1,540.00
TAX					0.00
TOTAL					1,540.00
BALANCE DUE					\$0.00

DOUBLE This one

DD

DD Paper work

LOW

LOWE'S HOME CENTERS, LLC
1802 PINE POINT CIRCLE
HCCOMB, MS 39648 (501) 250-4040

SALES: 51774852 1716315 TRANS: 63236229 01-28-20

92313 REC 3-FTX100-FT CONTACT S 419.76

12 0 34.90

02480 CELLULOSE ALVIN INS 40-SQ 84.00

107201 CREDIT PROMOTION 10 0 0.40 1587 6000 0.00

SUBTOTAL: 503.76
TAX: 35.25
INVOICE 65198 TOTAL: 539.02
LCC: 539.02

LCC:XXXXXXXXXXXX9409 AMOUNT:539.02 AUTHCD:901567
SHIPPED REFID:187047 01/28/20 12:31:03

IMPORTANT PROMOTIONAL INFORMATION: YOUR PURCHASE
QUALIFIES FOR THE PROMOTION OF NO INTEREST IF PAID IN
FULL WITHIN 6 MONTHS. IF THE PROMOTIONAL PURCHASE IS
NOT PAID IN FULL WITHIN 6 MONTHS, INTEREST WILL BE
IMPOSED FROM THE TRANSACTION DATE AT AN APR OF 25.99%.

[Signature]

STORE: 1774 TERMINAL: 65 01/28/20 12:31:16
OF ITEMS PURCHASED: 22

RECEIPT

DATE 2/9/20

No. 226801

RECEIVED FROM: Dixie Springs Enterprise LLC

AMOUNT: \$ 210.00

DOLLARS

FOR RENT

FOR

FROM: (Dixie Springs Enterprise LLC)

BY: [Signature]

ACCOUNT

PAYMENT

BAL. DUE

CASH

CHECK

MONEY ORDER

CREDIT CARD

RECEIPT

DATE 10-1-19

No. 976246

FROM: Dixie Springs Enterprise LLC

AMOUNT: \$ 7,200.00

FOR RENT

FOR: Tractor work & Green Acres

DOLLARS

ADCT.

PAID

DUE

CASH

CHECK

MONEY ORDER

CREDIT CARD

FROM: [Signature]

TO: [Signature]

BY: [Signature]

A-1152
T-4181

Quality Rental Center

"Equipment You Can Rely On"

700 W. PRESLEY BLVD. • McCOMB, MS 39648
(601) 684-3315 • FAX (601) 684-3134

Name: _____

Address

[illegible]Tel.
No.

DRIVERS LICENSE NO

CAR LICENSE No.

ALL equipment must
be returned by

DATE/TIME IN

DATE/TIME OUT

EMPLOYED BY

PHONE

2018

OTHER ID

ITEM RENTED

**MINIMUM
RENTAL**

HOUR

DAY

WEEK
END

WEEK

MONTH
4 WEEKS

DEPOSIT

TOTAL RENT

MDSE.

DEL P.U.

CLEANING

TAX

TOTAL DUE

TOTAL PAID

BRANCE

REFURD

CONDITIONS UNDER WHICH EQUIPMENT IS RENTED — All tools and equipment are used at renter's risk. We exercise discretion in keeping our equipment in good condition. Conditions which prevent satisfactory operation of equipment do not relieve renter of his responsibility for rental charges. Renter agrees to return equipment in good condition as received, or in better condition, and to indemnify lessor, and to hold lessor harmless, for any loss, damage, or destruction of rented equipment.

[illegible]

Lessee assumes all risks inherent in the operation of use of Rented Equipment by Lessee who is the exclusive user of the equipment and is responsible for the safe use of the equipment and for the loss of time and inconvenience resulting from use of the equipment.

unlimited or not; it be claimed or found that such damage or loss was caused by the negligence of the renter, the cost of such repairs shall be paid by the renter. All equipment lost or damaged beyond repairs will be paid for by the renter at the regular replacement price and the cost of repairs of such damaged or lost equipment. Scheduled rental values begin when equipment leaves our store and continue until returned thereto. I agree that all charges for rental, damage, cleaning or material will be paid, and that all collection fees, cost for such repairs shall be paid by the renter. Assured rental charges cannot be applied against the purchase price or cost of repairs of such damaged or lost equipment.

There are no warranties of merchantability or fitness either expressed or implied which extend beyond

There are no warranties or representations or statements of any kind made by the undersigned in connection with the above information, other than the description on the face hereof.

HOURS OUT: 140 1/2

HOURS IN: _____

FUEL PER GALLON

CLEANING FEE

25.00 MINIMUM

Renter's Signature **X**

**A CLEANING CHARGE IS MADE
ON ITEMS RETURNED UNCLEAN.**

WE CHARGE FOR ALL TIME OUT INCLUDING SATURDAYS, SUNDAYS, AND MOST HOLIDAYS.

IF EQUIPMENT DOES NOT FUNCTION PROPERLY, NOTIFY US IMMEDIATELY OR FULL RATE WILL BE CHARGED.

Individual On-site Wastewater Disposal System (IOWDS)

Owner: Thomas Oliver (Green Acres) 1119 Dixie Springs Road Summit MS 39666	Property: Van Norman Curve Road McComb 39648 Sec: Town: Range: Lot: Property Size: 16.10 Acres 701316 Sq.Ft.	ID: 172713/154704 Date: 7/30/2019
--	--	--

Plot Plan (Plot): Type of Dwelling: Manufactured Housing Develop # of Units: 10 : Estimated Usage: Gallons per Day Water Supply: Public	System: Status: New Construction Treatment: Disposal:
---	--

Description

Author: KEVIN TRAYLOR Met with Mr Oliver and Mr Jackson (installer) to discuss system placement for 10 mobile homes. Lot 5 will be septic tank and 240 feet of chambers. Lots 6-13 and lots 19&20 will be ATS with a trash tank per 2 sites. Lots 6&7, 8&9, 10&11, 12&13, 19&20 will be combined as discussed with the developer and installer.
Environmentalist Signature: <i>Kevia Taylor</i> Date: 8-1-2019



MISSISSIPPI STATE DEPARTMENT OF HEALTH

January 16, 2019

Thomas Oliver
1119 Dixie Springs Road
Summit, MS 39666

RE: Development Review Complete – Green Acres (24 Units), Van Norman Curve Road, Pike County

Dear Mr. Oliver:

The Mississippi Department of Health, Division of On-site Wastewater has completed the review of your proposed mobile home development. This review satisfies the requirement of Mississippi Code of 1972, Annotated, Section 41 – 67- 4 (2).

As developer, you must ensure that all local, county or state requirements are met with regard to this development. This includes but is not limited to Mississippi State Department of Health, Bureau of Water Supply and Mississippi State Department of Environmental Quality regulations.

Please be aware that should this development be reconfigured in any way, the Department may require additional review.

If you have any questions, please contact the Division of On-site Wastewater at (601) 576 – 7150.

Respectfully,


Cole Montgomery, E.I.

cc: Les Herrington
Duncan Welch
Ben Kelly
Tim McCann
Lee Fancher
Kevin Traylor

