AI#77961 GNP20200001





MDEQ

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:	TOR			
OWNER CONTACT INFORMATION	N			
OWNER CONTACT PERSON: Jake Shelby, E.I.T., Project Engir	neer			
OWNER COMPANY LEGAL NAME: City of Richland		1	1	
OWNER STREET OR P.O. BOX: Post Office Box 180609			1	
OWNER CITY: Richland STATE: Mississ	ippi	ZIP: 39218	3-0609	
OWNER PHONE #: (601)420-1520 OWNER EMAIL: jshelb				
PRIME CONTRACTOR CONTACT INFOR	RMATION			
PRIME CONTRACTOR CONTACT PERSON:				
PRIME CONTRACTOR COMPANY LEGAL NAME: Thrash Commerce		ion, Inc.		
PRIME CONTRACTOR STREET OR P.O. BOX: 211 Commerce Driv	e, Suite A			
PRIME CONTRACTOR CITY: Brandon STATE: Mis		ZIP: 390	42	
PRIME CONTRACTOR PHONE #: (601)825-8967 PRIME CONTRACTOR	EMAIL:			
FACILITY SITE INFORMATION				
FACILITY SITE NAME: Richland Recreation Center				
FACILITY SITE ADDRESS (If the physical address is not available, please indicate indicate the beginning of the project and identify all counties the project traverses.) STREET: East Harper Street	the nearest named roa	ad. For linear	projects	
CITY: Richland STATE: Mississippi COUNTY:	Rankin	ZIP: 39	218	
FACILITY SITE TRIBAL LAND ID (N/A If not applicable): N/A				
LATITUDE: 32 degrees 13 minutes 16 seconds LONGITUDE: -90 deg	rees 8 minutes	49 seconds		
LAT & LONG DATA SOURCE (GPS (Please GPS Project Entrance/Start Point) or Map Inter	polation): USGS r	nap interpo	lation	
TOTAL ACREAGE THAT WILL BE DISTURBED 1: 8.3 acres		1 1		
IS THIS PART OF A LARGER COMMON PLAN OF DEVELOPMENT?	Y	ES 🗆	NO 🗹	
IF YES, NAME OF LARGER COMMON PLAN OF DEVELOPMENT: N/A AND PERMIT COVERAGE NUMBER: MSR10				
ESTIMATED CONSTRUCTION PROJECT START DATE:		020-09-01 YYY-MM-DD		
ESTIMATED CONSTRUCTION PROJECT END DATE:		021-03-30 YYY-MM-DD		
DESCRIPTION OF CONSTRUCTION ACTIVITY: Construction of 35,00	0 sq.ft. building	, soccer fie	lds	
PROPOSED DESCRIPTION OF PROPERTY USE AFTER CONSTRUCTION HAS BEEN COMPLETED: Community Recreation Center building and soccer fields.				
SIC Code N / A NAICS Code N / A				

NEAREST NAMED RECEIVING STREAM: Squirrel Bra	anch		
IS RECEIVING STREAM ON MISSISSIPPI'S 303(d) LIST OF BODIES? (The 303(d) list of impaired waters and TMDL strean http://www.deq.state.ms.us/MDEQ.nsf/page/TWB_Total_Maximum	a segments may be found on MD	YES□ EQ's web site:	NO⊡
HAS A TMDL BEEN ESTABLISHED FOR THE RECEIVING	STREAM SEGMENT?	YES□	NO⊡
ARE THERE RECREATIONAL STREAMS, PRIVATE/PUBL WITHIN ½ MILE DOWNSTREAM OF PROJECT BOUNDRY ACTIVITY?		YES□ BY THE CONST	NO □ RUCTION
EXISTING DATA DESCRIBING THE SOIL (for linear project Providence silt loam, moderately eroded, moderately well drained; Gillsburg states and the state of the state of the states of the		ic ratings	
WILL FLOCCULANTS BE USED TO TREAT TURBIDITY IS	N STORM WATER?	YES□	NO☑
IF YES, INDICATE THE TYPE OF FLOCCULANT.	□ ANIONIC POLYACRYLIN □ OTHER	MIDE (PAM)	

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 LCNOI FOR A FACILITY THAT WILL REQUIRE OTHER PERMITS?	YES 🗆	NO 🗹			
IF YES, CHECK ALL THAT APPLY: AIR HAZARDOUS WASTE		T			
\square water state operating \square individual npdes	□ OTHER :				
IS THE PROJECT REROUTING, FILLING OR CROSSING A WATER CONVEYANCE YES NO OF ANY KIND? (If yes, contact the U.S. Army Corps of Engineers' Regulatory Branch for permitting requirements.)					
IF THE PROJECT REQUIRES A CORPS OF ENGINEER SECTION 404 PERMIT, PROCUMENTATION THAT:	OVIDE APPROPRIAT	ГЕ			
 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 require	d			
IS A LAKE REQUIRING THE CONSTRUCTION OF A DAM BEING PROPOSED? (If yes, provide appropriate approval documentation from MDEQ Office of Land and Wa	YES □ ater, 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 if associated "Information Regarding Proposed Wastewater Projects" form or appropriate the plans and specification of LCNOI submittal, MDEQ will accept written acknowledgement from official(s) a collection and treatment that the flows generated from the proposed project can an properly. The letter must include the estimated flow.	val from County Utility A ions can not be provide responsible for wastewa	Authority in d at the time atter			
Collection and Treatment System will be Constructed. Please attach a copy of the c permit from MDEQ or indicate the date the application was submitted to MDEQ (I	over of the NPDES disc Date:	charge)			
Individual Onsite Wastewater Disposal Systems for Subdivisions Less than 35 Lots. of General Acceptance from the Mississippi State Department of Health or certificatengineer that the platted lots should support individual onsite wastewater disposal states.	tion from a registered	f the Letter professional			
Individual Onsite Wastewater Disposal Systems for Subdivisions Greater than 35 L feasibility of installing a central sewage collection and treatment system must be maresponse from MDEQ concerning the feasibility study must be attached. If a central is not feasible, then please attach a copy of the Letter of General Acceptance from to certification from a registered professional engineer that the platted lots should supdisposal systems.	ade by MDEQ. A copy al collection and wastev the State Department of	of the vater system f Health or			
INDICATE ANY LOCAL STORM WATER ORDINANCE WITH WHICH THE PROJE	ECT MUST COMPLY	•			
City of Richland Flood Damage Prevention Ordinance					

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 Applicant¹ (owner or prime contractor)

8/19/2020

Date Signed

Pat Sullivan

Printed Name¹

Mayor

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

PRIME CONTRACTOR CERTIFICATION

LARGE CONSTRUCTION GENERAL PERMIT

Coverage No. MSR10

County Rankin

(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: Mike Evans	PHONE NUMBER: 601,825-8967			
PRIME CONTRACTOR COMPANY: Thrash Commercial Contractors, Inc.				
PRIME CONTRACTOR STREET (P.O. BOX): 211 Commerce	e Drive			
	STATE: MS ZIP: 39042			
E-MAIL ADDRESS: Mevans@thrashco.com	JIATE.			
OWNER INFOR	MATION			
OWNER CONTACT PERSON: Jake Shelby, E.I.T.	PHONE NUMBER: (601)939-8737			
OWNER COMPANY NAME: CIty of Richland				
PROJECT INFOR	RMATION			
PROJECT NAME: Richland Recreation Center Co	nstruction			
DESCRIPTION OF CONSTRUCTION ACTIVITY: Construct				
access drive, and athletic field.				
PHYSICAL SITE ADDRESS (If the physical address is not available indicate the beginning of the project and identify all counties the project.)	e indicate the nearest named road. For linear projects, oject traverses.)			
STREET: East Harper Street				
CITY: Richland COUNTY:	Rankin			
I certify that I am the prime contractor for this project and will comply wit permit. I further certify under penalty of law that this document and all at accordance with a system designed to assure that qualified personnel prope my inquiry of the person or persons who manage the system, or those perso information submitted is, to the best of my knowledge and belief, true, accu penalties for submitting false information, including the possibility of fine a	rachments were prepared under my direction or supervision in rly gathered and evaluated the information submitted. Based on ns directly responsible for gathering the information, the rate and complete. I am aware that there are significant			
Matt Me Williams	8/18/2020			
Prime Contractor Signature ¹	Date Signed			
Matt McWilliams	Principal			
Printed Name ¹	Title			
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.	Prime Contractors Certification form shall be submitted to: Chief, Environmental Permits Division MS Department of Environmental Quality, Office of Pollution Control			

For a municipal, state or other public facility, by principal executive officer, mayor, or ranking elected official.

P.O. Box 2261 Jackson, Mississippi 39225

Revised: 10/25/16