## MAJOR MODIFICATION FORM FOR LARGE CONSTRUCTION GENERAL PERMIT Coverage No. MSR10 8 1 3 2 County \_\_\_\_\_ Alcorn



## INSTRUCTIONS

Coverage recipients shall notify the (check all that apply). This form topographic map, Corps of Engineer	should be submitted v	with a modified	Storm Water I	Pollution Prevention Plan (SWI	PPP), updated USGS
SWPPP details have been	developed and are rea	ndy for MDEQ re	eview for subse	quent phases of an existing, cov	ered project.
✓ "Footprint" identified in t	he original LCNOI is	proposed to be e	nlarged.		
This form must be signed by the cu of new phases of existing subdivision Coverage recipients are authorized phases, under the conditions of the such as changes of erosion and sedin	ons must apply for sep I to discharge storm v General Permit, <u>only</u> v	parate permit co water associated upon receipt of w	verage through with proposed vritten notificat	n the submittal of a new compl I expansions of existing subdiv tion of approval by MDEQ. All	ete LCNOI package. isions or subsequent other modifications,
ALL INF	ORMATION MUST	BE COMPLETE	ED (indicate "N	/A" where not applicable)	
	COVERAG	E RECIPIEN	T INFORM	ATION	
COVERAGE RECIPIENT CONTACT NAME: Vince Overholt				TEL#( <u>662</u> )	284-3578
COMPANY NAME: Kimberly	Clark Corporation,	Corinth Mill			
STREET OR P.O. BOX: 3461 C	ounty Road 100				
CITY: Corinth	STATE: _	MS ZIF	2: 38834	E-MAIL: voverhol@kcc	.com
	PRO	OJECT INFO	RMATION		
PROJECT NAME: SABBEL/S	aturn Expansion a	and access ro	ad		
CITY: Corinth					
ADDITIONAL ACREAGE TO BE	DISTURBED:	14	ТОТ	AL PROJECT ACREAGE:	20
I certify under penalty of law that with a system designed to assure inquiry of the person or persons information submitted is, to the b penalties for submitting false information	that qualified person who manage the sy- est of my knowledge	nnel properly ga stem, or those per and belief, true	thered and even persons direct e, accurate and	aluated the information submit ly responsible for gathering to d complete. I am aware that	itted. Based on my the information, the there are significant
Signature (must be signed by cove	erage recipient)			Date	
Vince Overholt Printed Name				Mill Manager Title	
Please submit this form to:	Chief, Environmental MS Department of En P.O. Box 2261		, Office of Polluti	on Control	

Jackson, Mississippi 39225

Revised: 12/12/16