



## 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)





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

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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 <a href="www.deq.state.ms.us/MDEQ.nsf/page/epd epdgeneral">www.deq.state.ms.us/MDEQ.nsf/page/epd epdgeneral</a>. Required information can be completed on screen, printed and signed.

Revised: 12/06/16

(NUMBER TO BE ASSIGNED BY STATE)

APPLICANT IS THE:	ΓRACTOR
OWNER CONTACT INFOR	MATION
OWNER CONTACT PERSON: Tammy Cooley	* 1 12.22.350 130.55 (differen
OWNER COMPANY LEGAL NAME: J & T Properties, LLC.	
OWNER STREET OR P.O. BOX: 212 Treeside Drive	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
OWNER CITY: Mooreville STATE: MS	ZIP: 38857
OWNER PHONE #: (662 )891-8892 OWNER EMAIL:	tcooley@cooleytransport.com
PRIME CONTRACTOR CONTACT	INFORMATION
PRIME CONTRACTOR CONTACT PERSON:	A William Committee of the Committee of
PRIME CONTRACTOR COMPANY LEGAL NAME:	
PRIME CONTRACTOR STREET OR P.O. BOX:	of the state of th
PRIME CONTRACTOR CITY: STAT	E: ZIP:
PRIME CONTRACTOR PHONE #: ( PRIME CONTR	
FACILITY SITE INFORM	ATION
FACILITY SITE NAME: Swan Circle	
FACILITY SITE ADDRESS (If the physical address is not available, please indicate the beginning of the project and identify all counties the project traver	ses.)
STREET: Located on the south side of Old Auburn Rd. and north	NTY: Lee ZIP: 38801
FACILITY SITE TRIBAL LAND ID (N/A If not applicable): NO	Zii
LATITUDE: 34 degrees 16 minutes 17 seconds LONGITUDE:	88 January 39 minutes 05 seconds
LAT & LONG DATA SOURCE (GPS (Please GPS Project Entrance/Start Point) or	Map Interpolation):
TOTAL ACREAGE THAT WILL BE DISTURBED 1: 22+/-	
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:	2021-02-01
	YYYY-MM-DD
ESTIMATED CONSTRUCTION PROJECT END DATE:	2022-02-01 <u>YYYY-MM-DD</u>
DESCRIPTION OF CONSTRUCTION ACTIVITY: Residential Devel	opment
PROPOSED DESCRIPTION OF PROPERTY USE AFTER CONSTRUCTION OF PROPERTY USE AFTER CONSTRUC	
-	

NEAREST NAMED RECEIVING STREAM: West Tulip Creek		
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 MDE http://www.deq.state.ms.us/MDEQ.nsf/page/TWB_Total_Maximum_Daily_Load_Section)	YES□ Q's web site:	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 BOUNDRY THAT MAY BE IMPACTED BY ACTIVITY?	YES□ THE CONSTR	NO ☑ RUCTION
EXISTING DATA DESCRIBING THE SOIL (for linear projects please describe in SWPPP): Located in the SWPPP document.	Name (Property of the Control	3. h
WILL FLOCCULANTS BE USED TO TREAT TURBIDITY IN 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 INTRODUCTION, THE LOCATION OF WHERE FLOCCULATED MATERIAL WILL SETTLE?	ON OF INTROI YES □	DUCTION NO□

<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 LCNOI FOR A FACILITY THAT WILL REQUIRE OTHER PERMITS?	YES □ NO ☑
IF YES, CHECK ALL THAT APPLY: □ AIR □ HAZARDOUS WASTE	□ PRETREATMENT
$\square$ water state operating $\square$ individual npdes	□ OTHER:
IS THE PROJECT REROUTING, FILLING OR CROSSING A WATER CONVEYOF ANY KIND? (If yes, contact the U.S. Army Corps of Engineers' Regulatory Bra	YANCE YES □ NO ☑ anch for permitting requirements.)
IF THE PROJECT REQUIRES A CORPS OF ENGINEER SECTION 404 PERMIT DOCUMENTATION THAT:	T, PROVIDE APPROPRIATE
• The project has been approved by individual permit, or	
The work will be covered by a nationwide permit and NO NOTIFICATION to	o the Corps is required, or
The work will be covered by a nationwide or general permit and NOTIFICATION	ΓΙΟΝ to the Corps is required
IS A LAKE REQUIRING THE CONSTRUCTION OF A DAM BEING PROPOSE (If yes, provide appropriate approval documentation from MDEQ Office of Land and	D? YES □ NO ☑ nd Water, Dam Safety.)
IF THE PROJECT IS A SUBDIVISION OR A COMMERCIAL DEVELOPMENT BE DISPOSED? Check one of the following and attach the pertinent documents.	, HOW WILL SANITARY SEWAGE
Existing Municipal or Commercial System. Please attach plans and specifical associated "Information Regarding Proposed Wastewater Projects" form or a Hancock, Harrison, Jackson, Pearl River and Stone Counties. If the plans and spec of LCNOI submittal, MDEQ will accept written acknowledgement from offici collection and treatment that the flows generated from the proposed project c properly. The letter must include the estimated flow.	approval from County Utility Authority in ifications can not be provided at the time ial(s) responsible for wastewater
Collection and Treatment System will be Constructed. Please attach a copy of permit from MDEQ or indicate the date the application was submitted to MD	f the cover of the NPDES discharge DEQ (Date:)
Individual Onsite Wastewater Disposal Systems for Subdivisions Less than 35 of General Acceptance from the Mississippi State Department of Health or ce engineer that the platted lots should support individual onsite wastewater disposal support.	rtification from a registered professiona
Individual Onsite Wastewater Disposal Systems for Subdivisions Greater that feasibility of installing a central sewage collection and treatment system must response from MDEQ concerning the feasibility study must be attached. If a is not feasible, then please attach a copy of the Letter of General Acceptance for certification from a registered professional engineer that the platted lots shou disposal systems.	be made by MDEQ. A copy of the central collection and wastewater system from the State Department of Health or
INDICATE ANY LOCAL STORM WATER ORDINANCE WITH WHICH THE P	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.

Tammy Cooley Date: 2021.01.28 09:01:26 -06:00		
Signature of Applicant <sup>1</sup> (owner or prime contractor)	Date Signed	
Printed Name <sup>1</sup>	Title	

<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

### PRIME CONTRACTOR CERTIFICATION

### LARGE CONSTRUCTION GENERAL PERMIT

Coverage No. MSR10

County

(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:	J	PHONE NUMBER: ()
PRIME CONTRACTOR COMPANY:	a salita est i	
PRIME CONTRACTOR STREET (P.O. BOX):	r Halledow and Till Stran in Till at Hill	
PRIME CONTRACTOR CITY:		
E-MAIL ADDRESS:		1410 EV-290 CN70
OWNER	INFORMATION	
OWNER CONTACT PERSON:	PHONE	NUMBER: ( )
OWNER COMPANY NAME:		
PROJECT	INFORMATION	200 - 7 - MA 100, 1 - 1 - 2 - 1
PROJECT NAME:		
DESCRIPTION OF CONSTRUCTION ACTIVITY:		
PHYSICAL SITE ADDRESS (If the physical address is not indicate the beginning of the project and identify all counties.)	es the project traverses.)	
STREET:	137 101 7, 241	to a 1900 to the section of
CITY:CO		
I certify that I am the prime contractor for this project and will concernit. I further certify under penalty of law that this document accordance with a system designed to assure that qualified person my inquiry of the person or persons who manage the system, or thinformation submitted is, to the best of my knowledge and belief, penalties for submitting false information, including the possibility	and all attachments were prep inel properly gathered and eva nose persons directly responsib true, accurate and complete. I	ared under my direction or supervision in luated the information submitted. Based le for gathering the information, the am aware that there are significant
Duling Control to Circulation	<b>D</b>	
Prime Contractor Signature <sup>1</sup>	Date Sign	ed Carolina Albaga i San Abir v
tia in a	Title	1.   100.0000 1.0.000
Printed Name <sup>1</sup>		

<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.

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

Revised: 10/25/16

Keep a Copy at the Construction Site and Also Submit this Page to:
Chief, Environmental Permits Division

MS Department of Environmental Quality, Office of Pollution Control
P.O. Box 2261

Jackson, Mississippi 39225-2261

# 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.

ORGINAL COVERAGE RECIPIENT NAME:	BUYER / HOMEBUILDER:
COMPANY NAME:	COMPANY NAME (IF APPROPRIATE):
STREET OR P.O. BOX:	STREET OR P.O. BOX:
CITY: STATE: ZIP:	CITY: STATE: ZIP:
PHONE # (INCLUDE AREA CODE):	BUYER PHONE # (INCLUDE AREA CODE):
RESIDENTIAL SUBDIVISON NAME:	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
LARGE CONSTRUCTION STORM WATER PERMIT CO	
LOT NUMBER(s) (attach an additional sheet if necessary):	LOT SIZE(s):
PHYSICAL SITE ADDRESS (IF NOT AVAILABLE INDIC	
STREET:	A SECOND CONTRACTOR CO
CHTCOUNT	Y:ZIP:
knowledge and belief, true, accurate and complete. I am aware that there possibility of fine and imprisonment for knowing violations. As a buyer	e prepared under my direction or supervision in accordance with a system ed the information submitted. Based on my inquiry of the persons or gathering the information, the information submitted is, to the best of my are significant penalties for submitting false information, including the / homebuilder, I further certify that I have read and understand the terms and mit and that I am responsible for installing and maintaining the appropriate
n and n	22+/-
Original Coverage Recipient Signature <sup>1</sup>	Date Signed
Printed Name	Title
ele (ile kyah zm) .	
Buyer / Homebuilder Signature <sup>1</sup>	Date Signed
Printed Name	Title