



# INDUSTRIAL STORMWATER GENERAL PERMIT RE-COVERAGE FORM

FOR COVERAGE UNDER MISSISSIPPI'S REISSUED  
INDUSTRIAL STORMWATER GENERAL PERMIT MSR00  
GENERAL NPDES COVERAGE NO. MSR00 0 0 0 9

## INSTRUCTIONS

The submittal of this form is required to receive coverage under the reissued Industrial Stormwater General Permit. This form must be completed and returned to the address printed at the bottom of page 2.

The signatory of this form must be the owner or operator who is the current coverage recipient (rather than the plant/site manager or environmental consultant). The coverage recipient is responsible for permit compliance.

Amendments to the Storm Water Pollution Prevention Plan (SWPPP) are required to be attached if the plan is not current or is ineffective in controlling storm water pollutants.

If the facility is out of business or no longer a regulated facility, please request termination of coverage by completing the Request for Termination (RFT) Form found in the Industrial Stormwater Forms Package. Facilities that continue to discharge wastewater without applicable permit coverage are in violation of state law.

Do not submit this form if submitting a "Request for Termination" (RFT).

Do not submit this form if submitting a "No Exposure Certification."

**ALL INFORMATION MUST BE COMPLETED** (Enter "NA" if not applicable).

## COVERAGE RECIPIENT INFORMATION

CONTACT NAME & POSITION: Jamie Holder

EMAIL ADDRESS: holder.jamie@anelcorp.com

COMPANY NAME: Anel Corporation

STREET OR P.O. BOX: P.O. Box 600

CITY: Winona STATE: Mississippi ZIP: 38967

PHONE NUMBER (INCLUDE AREA CODE): 662-283-1540

## FACILITY INFORMATION

FACILITY NAME: Anel Corporation

CONTACT NAME & POSITION: Kathryn Jordan, Product Engineer

CONTACT PHONE NUMBER (INCLUDE AREA CODE): 662-283-1540

PRIMARY STANDARD INDUSTRIAL CLASSIFICATION (SIC) CODE & DESCRIPTION OF INDUSTRIAL ACTIVITY:  
MSR000009

**PHYSICAL SITE ADDRESS**

STREET: 3244 Highway 51

CITY: Winona COUNTY: Carroll ZIP: 38967

**PROVIDE THE COORDINATES OF THE PLANT ENTRANCE:**

LATITUDE: 33 degrees 24 minutes 836 seconds LONGITUDE: 89 degrees 45 minutes 451 seconds

NEAREST NAMED RECEIVING STREAM FOR STORM WATER LEAVING THE SITE: Hayes Creek

IS RECEIVING STREAM ON MDEQ's 303(d) LIST?  YES  NO

IF YES, HAS A TMDL BEEN ESTABLISHED FOR THE RECEIVING STREAM SEGMENT?  YES  NO

**STORM WATER POLLUTION PREVENTION PLAN (SWPPP)**

IS A COPY OF THE SWPPP AT THE PERMITTED SITE?  YES  NO

IS THE SWPPP UP-TO-DATE AND EFFECTIVE IN CONTROLLING STORM WATER POLLUTANTS?  
IF NO, PLEASE ATTACH REQUIRED SWPPP AMENDMENTS (see Instructions on front page).  YES  NO

**AUTO SALVAGE FACILITIES ONLY**

FOR AUTO SALVAGE FACILITIES, A REVISED SWPPP TO COMPLY WITH THE NEW PERMIT MUST BE SUBMITTED TO MDEQ NO LATER THAN JANUARY 31, 2022.

DOES THE SWPPP REQUIRE CHANGES TO COMPLY WITH THE NEW PERMIT?  YES  NO

IS A REVISED COPY OF THE SWPPP ATTACHED?  YES  NO

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 further certify that I understand when coverage is terminated the facility is no longer authorized to discharge storm water associated with industrial activity under this general permit. I understand that discharging pollutants in storm water associated with industrial activity to waters of the state without NPDES coverage is in violation of state law.

  
Signature

1/29/21  
Date

Jamie Holder  
Printed Name<sup>1</sup>

President  
Title

<sup>1</sup>This form shall be signed according to ACT16, T-9 of the General Permit, 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

**INDUSTRIAL STORMWATER GENERAL PERMIT  
 COVERAGE NUMBER (MSR00 0009)  
 ANNUAL COMPREHENSIVE SITE INSPECTION AND SWPPP EVALUATION REPORT  
 (FOR INDUSTRIAL STORMWATER ACTIVITY)**



Coverage recipients shall conduct a comprehensive evaluation of the facility's SWPPP by December 31<sup>st</sup> of each calendar year. The evaluation shall assess the effectiveness and accuracy of the SWPPP and ensure that the SWPPP is current, up to date, and meets all the requirements of ACT5, T-1 through T-9. Should the SWPPP need to be amended based on the findings of any evaluation, a copy of the amended SWPPP must be submitted to MDEQ in accordance with Condition ACT9, S-1(4). The results of all annual SWPPP evaluations shall be documented on the Annual Comprehensive SWPPP Evaluation Form, filed on-site with the SWPPP, and made available to MDEQ personnel for inspection upon request. Procedures for obtaining recoverage are outlined in the general permit.

**COVERAGE RECIPIENT INFORMATION**

COMPANY NAME: Anel Corporation FACILITY NAME: Anel Corporation  
 PHYSICAL SITE ADDRESS: 3244 Hwy 51  
 CITY: Winona COUNTY: Carroll  
 CONTACT PERSON: Kathryn Jordan CONTACT PHONE NUMBER: 662-283-1540  
 MAILING ADDRESS: PO Box 1000 CITY: Winona STATE: MS ZIP: 38967

**INSPECTION DOCUMENTATION**

DATE (mm/dd/yy)	TIME (hh:mm AM/PM)	ANY DEFICIENCIES?		IF YES, WERE CORRECTIVE ACTIONS TAKEN?		INSPECTOR(S)
		Yes	No	Yes	No	
01/24/20	01:00 pm		✓		✓	Kathryn Jordan
02/13/20	03:00 pm		✓		✓	Kathryn Jordan
03/06/20	02:30 pm		✓		✓	Kathryn Jordan
04/09/20	10:00 AM		✓		✓	Kathryn Jordan
05/27/20	9:00 AM		✓		✓	Kathryn Jordan
06/09/20	07:30 AM		✓		✓	Kathryn Jordan
07/09/20	08:30 AM		✓		✓	Kathryn Jordan
08/13/20	11:00 AM	✓		✓		Kathryn Jordan
09/10/20	11:00 AM	✓		✓		Kathryn Jordan
10/13/20	08:30 AM	✓		✓		Kathryn Jordan
11/11/20	07:00 AM		✓		✓	Kathryn Jordan
12/08/20	10:40 AM		✓		✓	Kathryn Jordan

Deficiencies Noted During any Inspection (give date(s); attach additional sheets if necessary): Concrete culvert damaged near runoff site on 8-13-20, remained damaged 9-10-20, Repaired 10-13-20

Corrective Action Taken or Planned (give date(s); attach additional sheets if necessary): Concrete Culvert repaired 10-13-20

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 filed with the Office of Pollution Control and sound engineering practices as required by the above referenced permit. I further certify that the ISNOI and SWPPP information on file with MDEQ 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 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.

Authorized Signature: [Signature]  
 Printed Name: Bobby Childers

Date: 2/10/21  
 Title: General Manager

Please submit this form to: Chief, Environmental Compliance and Enforcement Division  
 MDEQ, Office of Pollution Control  
 P.O. Box 2261  
 Jackson, Mississippi 39225

**INDIVIDUAL NPDES STORM WATER PERMIT  
 PERMIT NUMBER (MS 000 009)  
 ANNUAL SWPPP EVALUATION FORM  
 (FOR INDUSTRIAL STORM WATER ACTIVITY)**



Permit recipients shall conduct a comprehensive evaluation of the facility's SWPPP by December 31<sup>st</sup> in the year following issuance and annually thereafter. The evaluation shall assess the effectiveness and accuracy of the SWPPP and ensure that the SWPPP is current, up to date, and meets all requirements set forth in the permit. Should the SWPPP need to be amended based on the findings of any evaluation, a copy of the amended SWPPP must be submitted to MDEQ.

FACILITY NAME: Anel Corporation EVALUATION DATE: 12-8-2020  
 PHYSICAL ADDRESS: 3244 Hwy 51 Winona, MS 38967

I. DESCRIPTION OF POTENTIAL POLLUTANT SOURCES			
	Yes	No	Findings & Remedial Action Documentation
<b>INDUSTRIAL ACTIVITIES</b> <ul style="list-style-type: none"> <li>Does the SWPPP have a list of Industrial Activities exposed to storm water?</li> <li>Has the facility added any Industrial Activities that are exposed to storm water since the previous Annual SWPPP Evaluation?</li> </ul>	<input checked="" type="radio"/>	<input type="radio"/>	
<b>MATERIALS AND POLLUTANTS</b> <ul style="list-style-type: none"> <li>Does the SWPPP have a list of materials and pollutants exposed to storm water?</li> <li>Does the SWPPP have a narrative description of the materials and pollutants?</li> <li>If so, does the narrative contain the following information?               <ul style="list-style-type: none"> <li>Method of storage and disposal.</li> <li>Management practices employed to minimize contact with storm water.</li> <li>Structural and non-structural control measures to reduce pollutants in storm runoff.</li> <li>Any treatment the storm water receives.</li> </ul> </li> </ul>	<input checked="" type="radio"/> <input checked="" type="radio"/> <input checked="" type="radio"/> <input checked="" type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	
<b>SPILLS AND LEAKS</b> <ul style="list-style-type: none"> <li>Does the SWPPP contain a monthly updated list of spills and leaks?</li> <li>Does the SWPPP contain an updated summary of all storm water sampling data including a description of associated pollutants?</li> </ul>	<input checked="" type="radio"/> <input checked="" type="radio"/>	<input type="radio"/> <input type="radio"/>	

I. DESCRIPTION OF POTENTIAL POLLUTANT SOURCES (CONTINUED)			
SITE MAP	Yes	No	Findings & Remedial Action Documentation
<ul style="list-style-type: none"> <li>• Does the SWPPP have a site map showing the property layout with site boundaries? <input checked="" type="checkbox"/></li> <li>• If so, does the site map indicate the following features?               <ul style="list-style-type: none"> <li>○ Surface water bodies. <input checked="" type="checkbox"/></li> <li>○ Drainage area of each storm outfall by number. <input checked="" type="checkbox"/></li> <li>○ Direction of flow for each drainage area. <input checked="" type="checkbox"/></li> <li>○ Location and description of existing structural and non-structural control measures to reduce the pollutants in storm runoff. <input checked="" type="checkbox"/></li> <li>○ Location of any storm water treatment activities. <input type="checkbox"/></li> <li>○ Location of any storm drain inlets. <input checked="" type="checkbox"/></li> <li>○ Location of industrial activities, such as:                   <ul style="list-style-type: none"> <li>a) Fuel storage and dispensing locations. <input checked="" type="checkbox"/></li> <li>b) Vehicle/equipment repair, maintenance, and cleaning areas. <input type="checkbox"/></li> <li>c) Materials storage and handling areas. <input type="checkbox"/></li> <li>d) Loading/unloading areas. <input type="checkbox"/></li> <li>e) Process or manufacturing areas. <input type="checkbox"/></li> </ul> </li> <li>○ Location of housekeeping practices. <input checked="" type="checkbox"/></li> <li>○ Storm water conveyances (ditches, pipes, &amp; swales). <input checked="" type="checkbox"/></li> </ul> </li> </ul>			
II. DESCRIPTION OF STORM WATER MANAGEMENT CONTROLS			
<p><b><u>POLLUTION PREVENTION MANAGER/COMMITTEE</u></b></p> <ul style="list-style-type: none"> <li>• Does the SWPPP specify individual(s) responsible for developing the SWPPP and assisting the facility manager in its implementation, maintenance, and revision? <input checked="" type="checkbox"/></li> <li>• If so, have there been any changes in the personnel listed since the previous Annual SWPPP Evaluation? <input type="checkbox"/></li> </ul>			
<p><b><u>RISK IDENTIFICATION AND MATERIAL INVENTORY</u></b></p> <ul style="list-style-type: none"> <li>• Does the SWPPP assess the pollution potential of various sources at the facility including loading and unloading operations; outdoor storage, manufacturing or processing activities; significant dust or particulate generating processes and on-site disposal practices? <input checked="" type="checkbox"/></li> <li>• If so, have there been any changes in operations or sources of potential pollutants since the previous Annual SWPPP Evaluation? <input type="checkbox"/></li> </ul>			

## II. DESCRIPTION OF STORM WATER MANAGEMENT CONTROLS (CONTINUED)

	Yes	No	Findings & Remedial Action Documentation
<p><b><u>SEDIMENT AND EROSION PREVENTION</u></b></p> <ul style="list-style-type: none"> <li>• Does the SWPPP identify areas with a high potential for soil erosion, and specify prevention measures to limit erosion?</li> <li>• If so, have there been any changes to the facility which would increase the potential for soil erosion since the previous Annual SWPPP Evaluation?</li> </ul>	<p><input checked="" type="radio"/></p> <p><input type="radio"/></p>	<p><input type="radio"/></p> <p><input checked="" type="radio"/></p>	
<p><b><u>PREVENTIVE MAINTENANCE</u></b></p> <ul style="list-style-type: none"> <li>• Does the SWPPP contain a preventive maintenance program to insure the inspection and maintenance of storm water management devices?</li> <li>• If so, does the program specify protocol for inspecting and testing of equipment to preclude breakdowns or failures that may cause pollution?</li> </ul>	<p><input checked="" type="radio"/></p> <p><input checked="" type="radio"/></p>	<p><input type="radio"/></p> <p><input type="radio"/></p>	
<p><b><u>GOOD HOUSEKEEPING</u></b></p> <ul style="list-style-type: none"> <li>• Does the SWPPP describe and list practices appropriate to prevent pollutants from entering storm water from industrial activities due to poor housekeeping?</li> <li>• If so, do the practices describe or list the following: <ul style="list-style-type: none"> <li>○ Designated areas for equipment maintenance and repair.</li> <li>○ Provisions for waste receptacles at convenient locations.</li> <li>○ Provisions for regular collection of waste.</li> <li>○ Adequately maintained sanitary facilities.</li> <li>○ Secondary containment around any on-site fuel or chemical container with a capacity greater than 660 gallons or any combination of containers which have an aboveground storage capacity of more than 1,320 gallons.</li> <li>○ Secondary containment for raw material stockpiles.</li> </ul> </li> </ul>	<p><input checked="" type="radio"/></p> <p><input type="radio"/></p> <p><input checked="" type="radio"/></p> <p><input checked="" type="radio"/></p> <p><input checked="" type="radio"/></p> <p><input checked="" type="radio"/></p> <p><input checked="" type="radio"/></p> <p><input checked="" type="radio"/></p> <p><input checked="" type="radio"/></p>	<p><input type="radio"/></p> <p><input checked="" type="radio"/></p> <p><input type="radio"/></p> <p><input type="radio"/></p> <p><input type="radio"/></p> <p><input type="radio"/></p> <p><input type="radio"/></p> <p><input type="radio"/></p>	
<p><b><u>SPILL PREVENTION AND RESPONSE PROCEDURES</u></b></p> <ul style="list-style-type: none"> <li>• Does the SWPPP identify potential spill areas and their drainage points?</li> <li>• Does the SWPPP specify material handling procedures and storage requirements?</li> <li>• Does the SWPPP have procedures for cleaning up spills?</li> <li>• Have there been any changes at the facility in potential spill areas and/or their drainage points since the previous Annual SWPPP Evaluation?</li> </ul>	<p><input checked="" type="radio"/></p> <p><input checked="" type="radio"/></p> <p><input checked="" type="radio"/></p> <p><input type="radio"/></p>	<p><input type="radio"/></p> <p><input type="radio"/></p> <p><input type="radio"/></p> <p><input checked="" type="radio"/></p>	
<p><b><u>EMPLOYEE TRAINING</u></b></p> <ul style="list-style-type: none"> <li>• Does the SWPPP specify periodic training for personnel that are responsible for implementing and/or complying with the requirements of the SWPPP?</li> </ul>	<p><input checked="" type="radio"/></p>	<p><input type="radio"/></p>	

**II. DESCRIPTION OF STORM WATER MANAGEMENT CONTROLS (CONTINUED)**

<b>ILLCIT CONNECTIONS EVALUATION AND CERTIFICATION</b>	<b>Yes</b>	<b>No</b>	<b>Findings &amp; Remedial Action Documentation</b>
<ul style="list-style-type: none"> <li>• Does the SWPPP contain an illicit connection certification?</li> <li>• If so, was the certification evaluation and certification completed within the last 5 years?</li> <li>• Does the certification include the following?:                             <ul style="list-style-type: none"> <li>○ Method of evaluation, date(s), observation point(s), and result(s).</li> </ul> </li> </ul>	<input checked="" type="radio"/>	<input type="radio"/>	
<p><b><u>ROUTINE VISUAL SITE INSPECTIONS</u></b></p> <ul style="list-style-type: none"> <li>• Does the SWPPP describe the policy and procedures for routine visual inspections, including frequencies and areas to be inspected?</li> <li>• Does the SWPPP inspection policy describe procedures for collecting storm water if the inspection is conducted during or after a storm event?</li> <li>• If so, does the SWPPP inspection policy outline procedures to investigate, correct, and document instances in which visible pollutants are observed?</li> </ul>	<input checked="" type="radio"/>	<input type="radio"/>	
<p><b><u>STORM WATER MANAGEMENT</u></b></p> <ul style="list-style-type: none"> <li>• Does the SWPPP provide for the management of storm water volume through its diversion, infiltration, storage or re-use?</li> </ul>	<input checked="" type="radio"/>	<input type="radio"/>	
<b>III. NON-STORM WATER DISCHARGE MANAGEMENT</b>			
<p><b><u>NON-STORM WATER MANAGEMENT</u></b></p> <ul style="list-style-type: none"> <li>• Does the SWPPP identify any allowable non-storm water discharges?</li> <li>• Does the SWPPP identify and ensure the implementation of appropriate Best Management Practices (BMPs) for the non-storm water component of any discharge?</li> <li>• Have there been any changes or additions to the allowable non-storm water discharges since the previous Annual SWPPP Evaluation?</li> </ul>	<input checked="" type="radio"/>	<input type="radio"/>	
<b>IV. FACILITY CHANGES</b>			
<p><b><u>SWPPP AMENDMENT</u></b></p> <ul style="list-style-type: none"> <li>• Has there been a change in design, construction, operation, or maintenance, which may increase the discharge of pollutants to waters of the State or has the SWPPP been ineffective in controlling storm water pollutants?</li> </ul> <p><b>If so, amend the SWPPP and submit it to the MDEQ within 30 days of amendment.</b></p>	<input type="radio"/>	<input checked="" type="radio"/>	

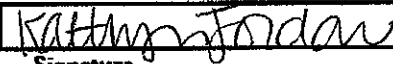
**V. MONTHLY INSPECTION SUMMARY (Previous 12 months)**

DATE (mm/dd/yy)	TIME	ANY DEFICIENCIES?		IF YES, WERE CORRECTIVE ACTIONS TAKEN?		INSPECTOR(S)
		YES	NO	YES	NO	
1.24.2020			✓		✓	Kathryn Jordan
2.13.2020			✓		✓	Kathryn Jordan
3.06.2020			✓		✓	Kathryn Jordan
4.09.2020			✓		✓	Kathryn Jordan
5.27.2020			✓		✓	Kathryn Jordan
6.09.2020			✓		✓	Kathryn Jordan
7.09.2020			✓		✓	Kathryn Jordan
8.13.2020		✓		✓		Kathryn Jordan
9.10.2020		✓		✓		Kathryn Jordan
10.13.2020		✓		✓		Kathryn Jordan
11.11.2020			✓		✓	Kathryn Jordan
12.08.2020			✓		✓	Kathryn Jordan

**SWPPP EVALUATION CERTIFICATION STATEMENT AND SIGNATURE:**

**SWPPP Evaluation and Certification:** This section must be completed by the person who conducted the SWPPP evaluation prior to submitting this form to the person with signature authority or a duly authorized representative.

*"I certify that this report is true, accurate, and complete to the best of my knowledge and belief."*

Kathryn Jordan		Product Engineer	12.08.2020
Name-Printed	Signature	Title	Date


**RO/DAR CERTIFICATION AND SIGNATURE**

**Permittee-Certification:**

The SWPPP is in compliance with the terms and conditions of the Individual NPDES Storm Water Permit.

The SWPPP is out of compliance with the terms and conditions of the Individual NPDES Storm Water Permit. The SWPPP will be amended and submitted to MDEQ within 30 days of amendment.

*"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 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."*

Bobby Childers		12/9/20
Printed Name of person with Signature Authority or a Duly Authorized Representative <sup>1</sup>	Signature of person with Signature Authority or a Duly Authorized Representative <sup>1</sup>	Date

<sup>1</sup> A person is a Duly Authorized Representative only if 1) the authorization is made in writing and submitted to the permit board ["Signatory Requirements"], and 2) the authorization specifies either an individual or a position having responsibility for the overall operation of the regulated activity, such as: manager, operator of a well or well field, superintendent, person of equivalent responsibility, or an individual or position having overall responsibility for environmental matters for the company.