

INDUSTRIAL STORMWATER GENERAL PERMIT RE-COVERAGE FORM

FOR COVERAGE UNDER MISSISSIPPI'S REISSUED INDUSTRIAL STORMWATER GENERAL PERMIT MSR00 GENERAL NPDES COVERAGE NO. MSR00 2391 ____

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: Harman Singh EMAIL ADDRESS: Harman.Singh@valero.com COMPANY NAME: Valero Parkway Pipeline, LLC STREET OR P.O. BOX: One Valero Way, Mail Stop E2A CITY: San Antonio STATE: TX ZIP: 78259 PHONE NUMBER (INCLUDE AREA CODE): (210) 345-5637 FACILITY INFORMATION FACILITY NAME: Parkway Pipeline, LLC Collins Facility CONTACT NAME & POSITION: Brad Rekieta, Regional HSE/DOT Lead CONTACT PHONE NUMBER (INCLUDE AREA CODE): (409) 289-5503 PRIMARY STANDARD INDUSTRIAL CLASSIFICATION (SIC) CODE & DESCRIPTION OF INDUSTRIAL ACTIVITY: 4613 Refined Petroleum Pipelines

| PHYSICAL SITE ADDRESS STREET: 356 Mississipp | i Highway 588 | | | | |
|--|--|----------------|-----------------|--------------|--|
| CITY: Collins COUNTY: Covington | | | ZIP: 39428 | | |
| PROVIDE THE COORDINATES | OF THE PLANT ENTRANCE: | | | | |
| LATITUDE: 31 degrees 38 | minutes 6.54 seconds LON | GITUDE: 89 des | grees 31 minute | s 15 seconds | |
| NEAREST NAMED RECEIVING STREAM FOR STORM WATER LEAVING THE SITE: Okatoma Creek | | | | | |
| IS RECEIVING STREAM ON I | MDEQ's 303(d) LIST? | | YES | NO | |
| IF YES, HAS A TMDL BEEN ES | IENT? YES | NO | | | |
| STORM WATER POLLUTION PREVENTION PLAN (SWPPP) | | | | | |
| IS A COPY OF THE SWPPP AT T | HE PERMITTED SITE? | | | YES NO | |
| IS THE SWPPP UP-TO-DATE AND IF NO, PLEASE ATTACH REQUI | | 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 SW | PPP 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. | | | | | |
| Fred & Harret | | Februar | y 25, 2021 | | |
| Signature ¹ | | D | ate | | |
| Fred Hampton | | Vice Pre | Vice President | | |
| Printed Name ¹ | | T | itle | | |
| 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 Divisi MS Department of Environmental Q P.O. Box 2261 Jackson, Mississippi 39225 | | tion Control | | |



February 25, 2021

Certified Mail: 7014 0150 00002459 7322

Return Receipt Requested

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

RE: Parkway Pipeline LLC, Collins Facility Industrial Stormwater Re-Coverage Form General NPDES Coverage No. MSR002391



Dear Sir or Madam:

Enclosed is the Industrial Stormwater General Permit Re-Coverage Form for the Parkway Pipeline LLC, Collins Facility, coverage no. MSR002391, located in Collins, Covington County, Mississippi.

If you have any questions regarding the enclosed Re-Coverage Form, please contact me at (210) 345-5637 or at Harman.Singh@Valero.com.

Sincerely,

Harman Singh

Harman Sigh

Manager Environmental - Pipelines & Terminals

Enclosures

Industrial Stormwater General Permit Re-Coverage Form, Coverage No. MSR002391