

## INDUSTRIAL STORMWATER GENERAL PERMIT RE-COVERAGE FORM

FOR COVERAGE UNDER MISSISSIPPI'S REISSUED INDUSTRIAL STORMWATER GENERAL PERMIT MSR00 GENERAL NPDES COVERAGE NO. MSR00 0 3 4 8

## **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: Hamp Sterling	, PE, Vice President			
EMAIL ADDRESS: hsterling@wgyates.com				
COMPANY NAME: Thompson Welding and I	Machine Works			
STREET OR P.O. BOX: P O Box 456				
CITY: Philadelphia	_state: MS	<sub>ZIP:</sub> 39350		
PHONE NUMBER (INCLUDE AREA CODE): (601) 260-2425				
FACILITY INFORMATION				
FACILITY NAME: Thompson Welding				
CONTACT NAME & POSITION: Jonathan Ludwig, Environmental Manager				
CONTACT PHONE NUMBER (INCLUDE AREA CODI	E): (404) 867-4796			
PRIMARY STANDARD INDUSTRIAL CLASSIFICATION (SIC) CODE & DESCRIPTION OF INDUSTRIAL ACTIVITY:  3 4 4 1 Steel Fabrication				

PHYSICAL SITE ADDRESS STREET: Weyerhaeuser Road				
CITY: Philadelphia COUNTY: Neshoba	ZIF	39350		
PROVIDE THE COORDINATES OF THE PLANT ENTRANCE:				
LATITUDE: 32 degrees 45 minutes 55 seconds LONGITUDE: 89 degrees 07 minutes 15 seconds				
NEAREST NAMED RECEIVING STREAM FOR STORM WATER LEAVING THE SITE: Kentawka Canal				
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 VIF NO, PLEASE ATTACH REQUIRED SWPPP AMENDMENTS (see Instruction		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.				
Many Shily	3/19/2021			
Signature	Date			
Hamp Sterling, PE	Vice President			
Printed Name <sup>1</sup>	Title			
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.				

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

## THOMPSONS WELDING AND MACHINE WORKS

March 19, 2021

Office of Pollution Control P. O. Box 2261 Jackson, MS 39225

Dear OPC:

Re:

Thompsons Welding

Philadelphia, Neshoba County Baseline Permit No. MSR000348

Re-Coverage Form

Please find enclosed the required Baseline Re-Coverage Form for the referenced facility. If you have any questions or need additional information, please feel free to contact me at (601) 260-2425. Thank you for your assistance with this matter.

Sincerely,

Hamp Sterling, P.E.

Environmental Manager

Enclosure



Dept. of Environmental Quality