



MISSISSIPPI DEPARTMENT OF
ENVIRONMENTAL QUALITY

HYDROSTATIC TEST NOTICE OF INTENT (HTNOI)

FOR COVERAGE UNDER MISSISSIPPI'S HYDROSTATIC TEST

GENERAL PERMIT
GENERAL PERMIT MSG13 0588

(Number to be assigned by MDEQ)

INSTRUCTIONS

The Hydrostatic Test Notice of Intent (HTNOI) is for coverage under the Hydrostatic Test General Permit to discharge hydrostatic test water. Applicant must be the owner or operator. The coverage recipient is responsible for compliance with the conditions of the general permit.

Completed HTNOIs should be filed at least thirty (30) days prior to the commencement of regulated activity. Discharge of hydrostatic test water without written notification of coverage is a violation of state law.

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.

IF REGULATED LAND DISTURBING ACTIVITIES ARE TO OCCUR, LIST ACRES DISTURBED: 1.83
NOTE: If disturbing five (5) acres or more, a stormwater construction coverage is required.

A USGS quadrangle map or copy is a required submittal. The map shall extend at least one-half of a mile beyond the facility/ project property boundary. In the case of linear pipeline projects the map shall extend at least one-half of a mile beyond the pipeline right-of-way. The site location and outfalls must be outlined and labeled. Quad maps can be obtained from the Office of Geology (601-961-5523). If a copy is submitted, provide the name of the quadrangle map that is found in upper right hand corner.

Additional submittals may include the following:

- Labeled site drawing noting the outfall(s) associated with hydrostatic test water discharge(s)
- List of chemical Additives,
- Appropriate Section 404 documentation from U.S. Army Corps of Engineers, or
- Written authorization from the MDEQ, Office of Land and Water, if water withdrawal from surface waters or ground waters is to be used for the testing. For information call the Office of Land and Water at 601/961-5202

ALL REQUESTED INFORMATION MUST BE PROVIDED (Answer "NA" if not applicable)

APPLICANT IS THE: ☒ OWNER ☒ OPERATOR (Must check one or both)

OWNER INFORMATION

OWNER CONTACT NAME & POSITION: Jackson Lamb/Environmental Specialist

OWNER EMAIL ADDRESS: Jackson_Lamb@TCEnergy.com

OWNER COMPANY NAME: TC Energy

OWNER STREET (P.O. BOX): 700 Louisiana Street

OWNER CITY: Houston STATE: TX ZIP: 77002

OWNER PHONE # (INCLUDE AREA CODE): (832)320-5933

OPERATOR INFORMATION

OPERATOR CONTACT NAME & POSITION: Jackson Lamb/Environmental Specialist

OPERATOR EMAIL: Jackson_Lamb@TCEnergy.com

OPERATOR COMPANY: TC Energy

OPERATOR STREET (P.O. BOX): 700 Louisiana Street

OPERATOR CITY: Houston STATE: TX ZIP: _____

OPERATOR PHONE # (INCLUDE AREA CODE): (832)320-5933

FACILITY/PROJECT INFORMATION

FACILITY/PROJECT NAME: ATMOS Desoto Interconnect

PIPELINE, STORAGE TANK OR FLOWLINE BEING TESTED IS: ☒ NEW ☐ USED

IF USED, LIST PRIOR MATERIAL SERVICE OF EQUIPMENT: _____

PHYSICAL SITE ADDRESS (If not available, indicate nearest named road. Linear projects indicate beginning of project):

STREET: 11789 Ingram Mills Road CITY: _____

COUNTY: Desoto ZIP: 38611

Facility site tribal land ID (NA if not applicable) NA

TYPE OF TREATMENT (IF PROVIDED): NA

SIC Code _____ NAICS Code _____

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/or imprisonment for knowing violations.

Jackson Lamb
Signature¹ (Must be signed by operator when different than owner)

Jackson Lamb

Printed Name

4/8/2021

Date Signed

Environmental Specialist

Title

¹This application shall be signed according to ACT6, T-17 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, the mayor, or ranking elected official.

HTNOI forms must be submitted to: **Chief, Environmental Permits Division**
MS Dept of Environmental Quality, Office of Pollution Control
P.O. Box 2261
Jackson, Mississippi 39225

Revised: 03-15-17

OUTFALL INFORMATION
(To be submitted with HTNOI and Major Modification Forms)

INSTRUCTIONS:

1. For each outfall, complete the information in the table below (NOTE: Complete the last column of this form, only if it is being submitted with a Major Modification Form).
2. All outfalls must be spotted and labeled on a USGS quadrangle map.

| OUTALL NO. | LATITUDE ¹ (deg/min/sec) | LONGITUDE ¹ (deg/min/sec) | SOURCE OF FILL WATER | NEAREST RECEIVING STREAM ² | | | | EST. TOTAL DISCHARGE (MIL GAL) | STATUS OF TANK, PIPELINE, FLOWLINE ETC. | | EXPECTED TEST DATE(S) (mm/dd/yr) | INDICATE WHETHER OUTFALL IS NEW OF EXISTING | |
|------------|--|---|----------------------|---------------------------------------|-----------------------------------|-------------------------------------|--------------------------|-------------------------------------|---|------|-------------------------------------|---|-----|
| | | | | NAME | ON MDEQ 303(D) LIST? ³ | | HAS TMDL? ³ | | New | Used | | | |
| | | | | | Yes | No | Yes | | | | | | No |
| 001 | 34°49'2.80"N | 89°47'5.09"W | Municipal | Byhalia Creek | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 0.0005 | X | | | New |
| 002 | | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | |
| 003 | | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | |
| 004 | | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | |
| 005 | | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | |
| 006 | | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | |
| 007 | | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | |
| 008 | | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | |
| 009 | | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | |
| 010 | | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | |
| 011 | | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | |
| 012 | | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | |

Revised: 03/15/17

NOTE: To Comply with EPA's NPDES e-Reporting rule, MDEQ has implemented the use of U.S.EPA's NetDMR for the submittal of DMRs. Permittees required to submit DMRs must submit DMRs electronically using NetDMR. A training video and additional info can be found at <http://bit.ly/2gao6sW>. For additional information about NetDMR, please send an email to netdmrhelp@mdeq.ms.gov or contact Annette Brooks at 601-961-5252

¹ List the latitude and longitude of its location to the nearest 15 seconds.

² Name of the nearest named receiving stream as listed on a USGS Quad Map.

³ MDEQ's 303(d) List of Impaired Water Bodies and approved TMDLs can be found at: http://www.deq.state.ms.us/MDEQ.nsf/page/TWB_Total_Maximum_Daily_Load_Section



HYDROSTATIC TEST GENERAL PERMIT
COVERAGE NUMBER (MSG13 _____) COUNTY: Desoto

NOTIFICATION OF SURFACE DISCHARGE OF HYDROSTATIC TEST WATER

INSTRUCTIONS

In accordance with ACT 120, T-7 of the Hydrostatic Test General Permit, notification shall be submitted to MDEQ regarding the start date, time and anticipated duration of the surface discharge of hydrostatic test water from the subject project. Submittal of this notification form should be postmarked at least 15 days prior to the discharge start date to allow MDEQ, at its discretion, to schedule an observer to witness the discharge.

COVERAGE RECIPIENT INFORMATION

| | | |
|--|---|--------------------------------------|
| COMPANY NAME: <u>TC Energy</u> | | |
| CONTACT PERSON: <u>Jackson Lamb</u> | CONTACT'S PHONE NUMBER: <u>(832) 320-5933</u> | |
| PROJECT NAME: <u>ANR ATMOS Desoto Interconnect</u> | OUTFALL NUMBER(S): <u>001</u> | |
| DIRECTIONS TO OUTFALL: <u>From Hernando, MS; take I-55 north to I-269 N; continue on I-269 N for 13 miles; take exit 13 onto Red Banks Rd; turn right onto Red Banks Rd; continue south on Red Banks Rd for 3 miles; then turn right onto Ingram Mill Rd; in approximately 1.3 miles the discharge location will be on the right in an agricultural field.</u> | | |
| DISCHARGE START DATE: <u>5/10/2021</u> | DISCHARGE START TIME: <u>N/A</u> | DISCHARGE DURATION (hours): <u>3</u> |

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.

Jackson Lamb
Authorized Signature¹

Jackson Lamb

Printed Name

4/8/2021

Date

Environmental Specialist

Title

Submit this form to:

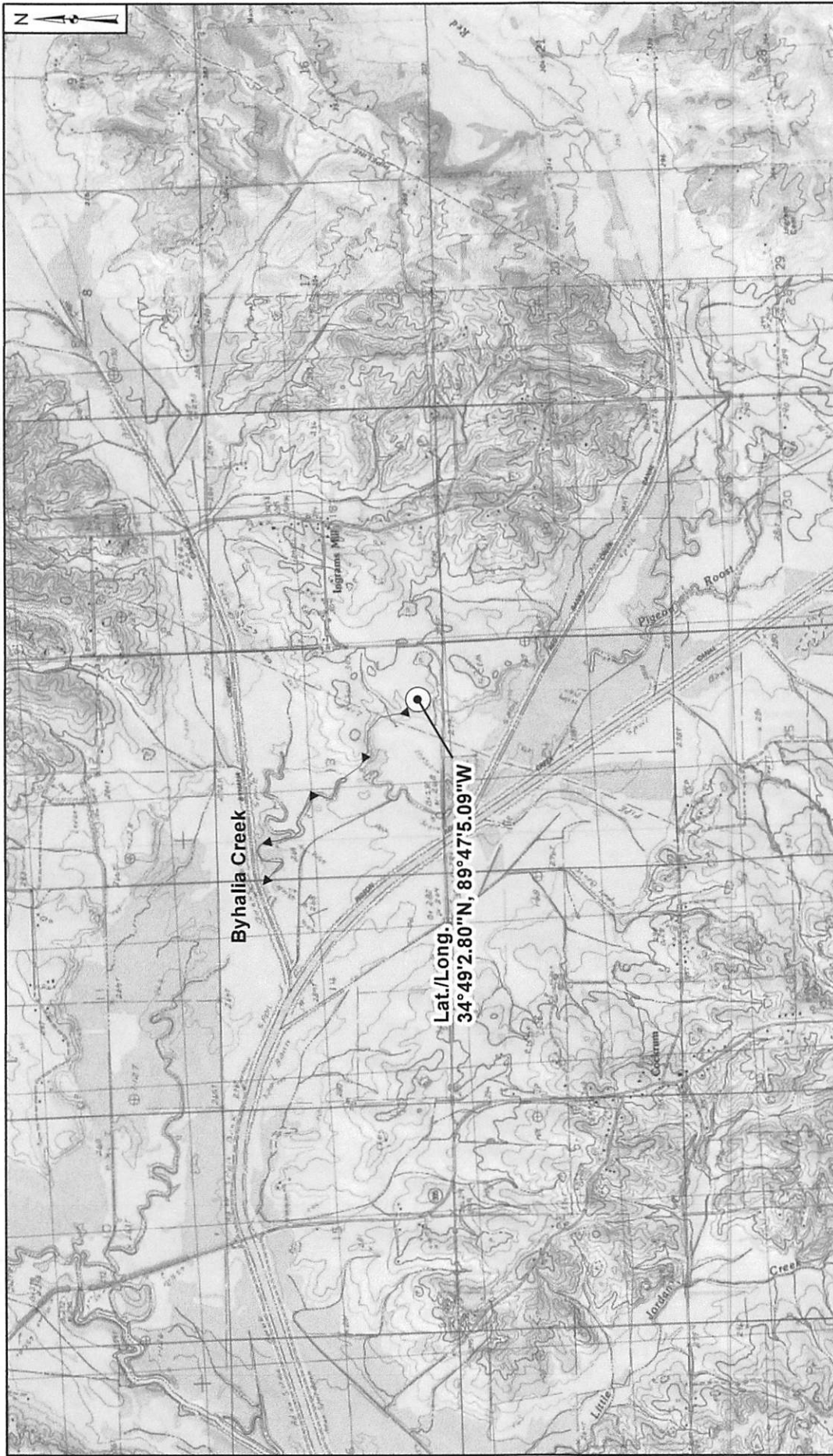
Chief, Environmental Compliance and Enforcement Division
MDEQ, Office of Pollution Control
P.O. Box 2261
Jackson, Mississippi 39225

Revised: 3-15-17

¹ This form shall be submitted with an original signature by an authorized individual in accordance with ACT 12, T-7 or T-8 of the General Permit.

ATTACHMENT B

Hydrostatic Discharge Map



Legend

- Outfall 001



Hydrostatic Discharge Map
USGS Quadrangle Map
 ANR ATMOS Desoto Interconnect
 Desoto County, Mississippi

Geosyntec
 consultants



Figure

1

Baton Rouge, LA

April 2021

Aerial Copyright © 2013 National Geographic Society, Inc.

ATTACHMENT A

Notice of Intent

April 8, 2021

Chief, Environmental Compliance and Enforcement Division
MDEQ, Office of Pollution Control
P.O. Box 2261
Jackson, MS 39225

**Subject: Notification of Surface Discharge of Hydrostatic Test Water
TC Energy – ANR Pipeline Company
General Permit MSG13xxxx**

Dear Chief,

As part of its ATMOS Desoto Interconnect Installation Project and pipeline integrity management program, TC Energy is proposing to hydrostatically test two sections of 4-inch pipeline on their ANR Pipeline System in Desoto County, Mississippi. The hydrostatic test will require approximately 500 gallons of water to be obtained from a nearby municipal source. No additives are proposed to be used during the testing. By way of this letter we are respectfully requesting coverage under Mississippi's Hydrostatic Test General Permit MSG13xxxx.

Should you have any questions or comments regarding this approval request, please contact me at (225) 325-3225.

Sincerely,

Coklin Nguyen
Geosyntec Consultants, Inc.

Attachment A: Notice of Intent
Attachment B: Hydrostatic Discharge Map

Enclosure

Copies to:

Jackson Lamb, TC Energy