



INDUSTRIAL STORMWATER GENERALMBERMIT RE-COVERAGE FORM

FOR COVERAGE UNDER MISSISSIPPI'S REISSUED INDUSTRIAL STORMWATER GENERAL PERMIT MSR00 GENERAL NPDES COVERAGE NO. MSR00 2 0 6 4

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: Stephen Castleman, Safety Director & DAR EMAIL ADDRESS: Scastleman@warrenpaving.com COMPANY NAME: Warren Paving Inc. STREET OR P.O. BOX: P.O. BOX 572 CITY: Hattiesburg STATE: MS ZIP: 39403 PHONE NUMBER (INCLUDE AREA CODE): O: 601-544-7811 C: 769-223-2886

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FACILITY INFORMATION
FACILITY NAME: Warren Paving Inc., Vicksburg Aggregate Site
CONTACT NAME & POSITION: Stephen Castleman, Safety Director & DAR
CONTACT PHONE NUMBER (INCLUDE AREA CODE): O: 601-544-7811 C: 769-223-2886
PRIMARY STANDARD INDUSTRIAL CLASSIFICATION (SIC) CODE & DESCRIPTION OF INDUSTRIAL ACTIVITY: 5 Z O I 3281: Cut Stone and Stone Products



PHYSICAL SITE ADDRESS STREET: 2056 Warrenton Road			
CITY: Vicksburg COUNTY: Warren	ZIP: 39180		
PROVIDE THE COORDINATES OF THE PLANT ENTRANCE:			
LATITUDE: 32 degrees 17 minutes 4.5 seconds LONGITUDE: -90 degrees 55 minutes 11 seconds			
NEAREST NAMED RECEIVING STREAM FOR STORM WATER LEAVING THE SITE: Mississippi River			
IS RECEIVING STREAM ON MDEQ's 303(d) LIST?	YES N	O	
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?	Y	ES NO	
IS THE SWPPP UP-TO-DATE AND EFFECTIVE IN CONTROLLING STORM IF NO, PLEASE ATTACH REQUIRED SWPPP AMENDMENTS (see Instruction		ES 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 PER	RMIT?	ES NO	
IS A REVISED COPY OF THE SWPPP ATTACHED?		ES 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.			
Boldy Dilleran	3-19-21		
Signature ¹	Date		
Bobby Sullivan	Vice President		
Printed Name¹	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



CONTRACTORS & ENGINEERS

POST OFFICE BOX 572 HATTIESBURG, MISSISSIPPI 39403 TELEPHONE (601) 544-7811 • FAX (601) 544-2005 POST OFFICE BOX 2545 GULFPORT, MISSISSIPPI 39503 TELEPHONE (228) 896-8003 • FAX (228) 896-8155

March 19, 2021

Certified Mail Number: 7017 3380 0000 5004 7195

MAR 2 2 2021

MDEQ

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

Re: Industrial Storm Water General Permit Re-Coverage Forms 3-Facilities

- 1) AIID #4615 Permit #MSR001990 Gulfport Asphalt Plant
- 2) AIID #54588 Permit #MSR002063 Moss Point Aggregate Site
- 3) AIID #56843 Permit #MSR002064 Vicksburg Aggregate Site

Chief:

Warren Paving hereby submits the Industrial Storm Water Re-Coverage Forms for the facility listed above. The Industrial Storm Water permit serves all operations on the referenced sites.

If you have questions or need additional information, please contact me (601-544-7811).

Sincerely,

Stephen Castleman, Safety Director

Attachments: Industrial Storm Water General Permit Re-Coverage Forms for 3-facilities

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