

DRY LITTER POULTRY ANIMAL FEEDING OPERATION GENERAL PERMIT NOTICE OF INTENT (DLPNOI)



COVERAGE NUMBER: MSG20 0 1 1 For re-coverage, the coverage number must be completed for your specific project or this form will be considered incomplete and returned. The coverage number can be found at the bottom left corner of your previous Certificate of Coverage or in the subject heading of the Letter of Instruction for Recoverage.

I. GENERA	AL INFORMATION		AEGEIVED
A. CONTAC	T AND FACILITY INFORMATION		
Name of Owner:	F.H. Stockman		MAY 12 2021
Facility Name:	R. H. Stockman		MDFO
Mailing Address:			IVILALA
Street or I	P.O. Box: 55 LR 52814		
City:	aulding	State: Ms	Zip: 39348
Physical Site Add	ress:		
Street (car	n not be a P.O. Box) OI CR	52814	
City: _	faulding	State: Ms	Zip: 39348
County:	Jasper		
(For new	facilities) Latitude (degrees/min/sec):		Longitude:
(For new	facilities) Nearest named receiving stream	.:	
Facility Telephone	e No. (Include Area Code):	601-498-	8945
Facility Fax No. (I	include Area Code):		
Contact Cell Phon	e No. (Include Area Code):	601-498-	8943
Other Contact Pho	ne Numbers (Include Area Code):		
Contact Email :	chickenfeather tid Egmail.com		
B. ACTIVITY	TYPE (Check all that apply)		
Existing operation NOT proposing expansion. Number of existing houses:		5	
	ation of an incinerator(s). Number of exist		2
New or expar	nding operation. Number of proposed hou	ises: Number o	f proposed incinerators:

II. DRY LITTER POULTRY FEEDING OPERATION CHARACTERISTICS

A TYPE AND ANOTHER OF CHARACTER				
A. TYPE AND AMOUNT OF CHICKENS				
For Existing Facilities:				
Has the facility changed the number of houses or animal type (ie. broilers or layers)?				
No Yes – Identify Changes:				
For New Facilities:				
Check type and indicate amount				
☐ Broiler (SIC 0251): Pullet/Breeder (0252):				
B. <u>CONTRACT INFORMATION</u>				
Is this facility a contract operation? No Yes- Integrator Name: PEGO				
C. TYPE OF DRY LITTER STORAGE AND CAPACITY				
For Existing Facilities: Has the facility changed the litter storage type or the capacity?				
✓ No				
For New Facilities:				
List type of dry litter storage and capacity (tons):				
D. <u>NUTRIENT MANAGEMENT PLAN</u>				
If you do not have a current Comprehensive Nutrient Management Plan then one must be submitted, if your CNMP is current then complete the dates below:				
Development Date: 05/2021 Expiration Date: 05/2026				
The comprehensive nutrient management plan (CNMP) identified above expires five years from the date it was developed and an updated nutrient management plan must be submitted to MDEQ prior to its expiration date.				

	INCINERATOR	
	construct and/or operate poultry mo	cineration equipment located at the facility. If at a future date you wish to retality incineration equipment, you must submit an updated DLPNOI by Constructing and operating poultry mortality incineration equipment without a dividual permits is a violation of state law.
d	Yes, there is mortality incineration	equipment located at the facility. Complete section below:
	MORTALITY INCINERATION	EQUIPMENT
	r Existing Facilities: s the facility changed the number or	type of incinerators, or the fuel type burned?
	No Yes – Identify Changes	:
	r New Facilities:	Model Number:
1		Fuel Type:
	Note: This NOI shall be signed accordanimal Feeding Operations Multimed. For a corporation, by a responsible. For a partnership, by a general partnership, by the proprietorship, by the proprietorship, by the proprietorship.	rtner.
	expiration date. I certify under penalty of law that this supervision in accordance with a systhe information submitted. Based on directly responsible for gathering the belief, true, accurate and complete. I including the possibility of fine and it I further certify that the project continuaderstand when coverage is terminal.	agement plan identified Section II. D. expires five years from the date it and nutrient management plan must be submitted to MDEQ prior to its as document and all attachments were prepared under my direction or tem designed to assure that qualified personnel properly gathered and evaluated my inquiry of the person or persons who manage the system, or those persons information, the information submitted is, to the best of my knowledge and am aware that there are significant penalties for submitting false information, mprisonment for knowing violations. The second of the person of the
	Signature of Day 111 055	5/6/2021
	Signature of Responsible Official	Date
7	R.H. Steckman	OWNEr
		Title

III. CONSTRUCTION AND/OR OPERATION OF A POULTRY MORTALITY





MDEQ

MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY (MDEQ) DRY LITTER POULTRY ANIMAL FEEDING OPERATION MULTIMEDIA GENERAL POLLUTION CONTROL PERMIT NO. MSG20

DRY LITTER POULTRY FORMS PACKAGE

•	DRY LITTER POULTRY NOTICE OF INTENT (DLPNOI)	Annendix A
	CONTIGUOUS LANDOWNER NOTIFICATION LETTER	Annendiy R
	DRY LITTER POULTRY BUFFER ZONE WAIVER	Annendix C
	DRY LITTER POULTRY LAND APPLICATION LOG	Annendiy D
	LITTER TRANSFER FORM	Annandia E
•	MOKTALITY RECORDKEEPING LOG SHEET	Annendiy F
•	INCINERATION RECORDREEPING LOG SHEET	Appendix G
•	REQUEST FOR TRANSFER AND OR NAME CHANGE	Appendix H

These standard forms are used to apply for permit coverage under the Dry Litter Poultry Multimedia General Pollution Control Permit and for submittals and record keeping required by permit conditions after coverage has been granted. The forms are in adobe format on our website at www.deq.state.ms.us. Required information can be completed on screen, printed and signed.



Mississippi Department of Environmental Quality

Office of Pollution Control – Environmental Permits Division POST OFFICE BOX 2261 • JACKSON, MS 39225-2261 TEL: (601) 961-5171 • FAX: (601) 354-6612

www.deg.state.ms.us



DRY LITTER POULTRY ANIMAL FEEDING OPERATIONS GENERAL PERMIT MSG20

NOTICE OF INTENT

INSTRUCTIONS

All questions must be answered for this notice of intent to be considered complete. If an item does not apply, enter "N/A" for not applicable to show that you considered the question. Applicant must be the owner and/or operator of the property.

RE-COVERAGE FOR FACILITIES CURRENTLY COVERED UNDER THE DLPAFO GP MSG20:

To obtain re-coverage under this general permit (GP), existing facilities shall submit a complete Dry Litter Poultry Notice of Intent (DLPNOI) to the MDEQ within 30 days of the date of the Letter of Instruction for Re-Coverage. If a current Comprehensive Nutrient Management Plan (CNMP) is not on file at MDEQ then a current plan must be submitted with the DLPNOI. The CNMP must include a map with a compass direction header, and shows property boundaries and the approximate location of each existing structure (chicken house, incinerator, dead box, land application field(s), composting area, litter storage structure, etc.).

If the previous coverage included regulated construction activities greater than 5 acres which need to be continued then a Large Construction Notice of Intent (LCNOI) must be completed and submitted to MDEQ with the DLPNOI. For construction activities disturbing 1 – 5 acres, the requirements for Small Construction Storm Water must be implemented.

If the facility is out of business or no longer active, please request termination of coverage by completing the Request for Termination (RFT) Form found in the Dry Litter Poultry Forms Package. Facilities that continue to operate without applicable permit coverage are in violation of state law. The DLPNOI is not required to be submitted if the facility is submitting a request for termination of coverage.

COVERAGE FOR NEW OR EXPANDING FACILITIES:

For new or expanding facilities, in addition to the DLPNOI, the following additional submittals may be required:

- A Storm Water Pollution Prevention Plan (SWPPP), and LCNOI for construction activities totaling five (5) acres or more
- Contiguous Land Owner Notification(s) as identified in Condition S-2, ACT 2 of the DLPAFO GP No. MSG20. The
 notification should include a map with a compass direction header, and shows property boundaries and the
 approximate location of each existing structure (chicken house, incinerator, dead box, composting area, litter storage
 structure, etc.).
- Buffer Zone Waiver(s)
- Appropriate Section 404 Documentation (Wetlands)

All forms must be submitted to: Chief, Environmental Permits Division, Mississippi Department of Environmental Quality, PO Box 2261, Jackson, Mississippi 39225-2261.

*For construction activities disturbing 1 -5 acres, the Small Construction Notice of Intent (SCNOI) and SWPPP must be completed, but not submitted

The Construction Storm Water General Permits, NOI and other required forms can be found at the following links:

http://www.deq.state.ms.us/mdeq.nsf/page/epd/epdgeneral?OpenDocument