AI: 806995

MSR10 8614

(NUMBER TO BE ASSIGNED BY STATE)

APPLICANT IS THE: ☑ **OWNER** ☑ **PRIME CONTRACTOR**

OWNER CONTACT INFORMATION

OWNER CONTACT PERSON: Nelson W. Carr

OWNER COMPANY LEGAL NAME: Blessed Investments Team, LLC

OWNER STREET OR P.O. BOX: P.O. Box 2353

OWNER CITY: Gulfport **STATE:** MS **ZIP:** 39503

OWNER PHONE #: (228) 860-2203 **OWNER EMAIL:** wcbuildersms@gmail.com

PRIME CONTRACTOR CONTACT INFORMATION

PRIME CONTRACTOR CONTACT PERSON: Nelson W. Carr

PRIME CONTRACTOR COMPANY LEGAL NAME: WC Builders

PRIME CONTRACTOR STREET OR P.O. BOX: P.O. Box 2353

PRIME CONTRACTOR CITY: Gulfport **STATE:** MS **ZIP:** 39503

PRIME CONTRACTOR PHONE #: (228) 860-2203 **PRIME CONTRACTOR EMAIL:** wcbuildersms@gmail.com

FACILITY SITE INFORMATION

FACILITY SITE NAME: Anchors Landing Subdivision

FACILITY SITE ADDRESS (If the physical address is not available, please indicate the nearest named road. For linear projects indicate the beginning of the project and identify all counties the project traverses.)

STREET: 820 Camp Wilkes Rd.

CITY: Biloxi STATE: MS COUNTY: Harrison ZIP: 39532

FACILITY SITE TRIBAL LAND ID (N/A If not applicable): N/A

LATITUDE: 30 **degrees** 25 **minutes** 58.46N **seconds** **LONGITUDE:** 88 **degrees** 57 **minutes** 31.56W **seconds**

LAT & LONG DATA SOURCE (GPS *(Please GPS Project Entrance/Start Point)* or Map Interpolation): Google Maps

TOTAL ACREAGE THAT WILL BE DISTURBED [1]: 19.33+/-

IS THIS PART OF A LARGER COMMON PLAN OF DEVELOPMENT? YES ☐ NO ☑

IF YES, NAME OF LARGER COMMON PLAN OF DEVELOPMENT:
AND PERMIT COVERAGE NUMBER: MSR10____

ESTIMATED CONSTRUCTION PROJECT START DATE: 1-15-22 (YYYY-MM-DD)

ESTIMATED CONSTRUCTION PROJECT END DATE: 6-1-22 (YYYY-MM-DD)

DESCRIPTION OF CONSTRUCTION ACTIVITY: Clearing,Grubbing,Water/Sewer Install; Sub-Surf. Drainage

PROPOSED DESCRIPTION OF PROPERTY USE AFTER CONSTRUCTION HAS BEEN COMPLETED:
66 Lot Residential Subdivision

SIC Code ____ **NAICS Code** ______

MR-received 12.16.21

NEAREST NAMED RECEIVING STREAM: Back Bay Biloxi

IS RECEIVING STREAM ON MISSISSIPPI'S 303(d) LIST OF IMPAIRED WATER BODIES? (The 303(d) list of impaired waters and TMDL stream segments may be found on MDEQ's web site: http://www.deq.state.ms.us/MDEQ.nsf/page/TWB_Total_Maximum_Daily_Load_Section) YES☐ NO☑

HAS A TMDL BEEN ESTABLISHED FOR THE RECEIVING STREAM SEGMENT? YES☐ NO☑

ARE THERE RECREATIONAL STREAMS, PRIVATE/PUBLIC PONDS OR LAKES WITHIN ½ MILE DOWNSTREAM OF PROJECT BOUNDRY THAT MAY BE IMPACTED BY THE CONSTRUCTION ACTIVITY? YES☐ NO☑

EXISTING DATA DESCRIBING THE SOIL (for linear projects please describe in SWPPP):
Hydric Soil

WILL FLOCCULANTS BE USED TO TREAT TURBIDITY IN STORM WATER? YES☐ NO☑

IF YES, INDICATE THE TYPE OF FLOCCULANT.
☐ **ANIONIC POLYACRYLIMIDE (PAM)**
☐ **OTHER** _____

IF YES, DOES THE SWPPP DESCRIBE THE METHOD OF INTRODUCTION, THE LOCATION OF INTRODUCTION AND THE LOCATION OF WHERE FLOCCULATED MATERIAL WILL SETTLE? YES☐ NO☐

[1]Acreage for subdivision development includes areas disturbed by construction of roads, utilities and drainage. Additionally, a housesite of at least 10,000 ft^2 per lot (entire lot, if smaller) shall be included in calculating acreage disturbed.

DOCUMENTATION OF COMPLIANCE WITH OTHER REGULATIONS/REQUIREMENTS

COVERAGE UNDER THIS PERMIT WILL NOT BE GRANTED UNTIL ALL OTHER REQUIRED MDEQ PERMITS AND APPROVALS ARE SATISFACTORILY ADDRESSED

IS LCNOI FOR A FACILITY THAT WILL REQUIRE OTHER PERMITS? YES ☑ NO ☐

IF YES, CHECK ALL THAT APPLY: ☐ AIR ☐ HAZARDOUS WASTE ☐ PRETREATMENT

☐ WATER STATE OPERATING ☑ INDIVIDUAL NPDES ☐ OTHER: _____

IS THE PROJECT REROUTING, FILLING OR CROSSING A WATER CONVEYANCE OF ANY KIND? (If yes, contact the U.S. Army Corps of Engineers' Regulatory Branch for permitting requirements.) YES ☑ NO ☑

IF THE PROJECT REQUIRES A CORPS OF ENGINEER SECTION 404 PERMIT, PROVIDE APPROPRIATE DOCUMENTATION THAT:

- **The project has been approved by individual permit, or**
- **The work will be covered by a nationwide permit and NO NOTIFICATION to the Corps is required, or**
- **The work will be covered by a nationwide or general permit and NOTIFICATION to the Corps is required**

IS A LAKE REQUIRING THE CONSTRUCTION OF A DAM BEING PROPOSED? (If yes, provide appropriate approval documentation from MDEQ Office of Land and Water, Dam Safety.) YES ☐ NO ☑

IF THE PROJECT IS A SUBDIVISION OR A COMMERCIAL DEVELOPMENT, HOW WILL SANITARY SEWAGE BE DISPOSED? Check one of the following and attach the pertinent documents.

☑ **Existing Municipal or Commercial System. Please attach plans and specifications for the collection system and the associated "Information Regarding Proposed Wastewater Projects" form or approval from County Utility Authority in Hancock, Harrison, Jackson, Pearl River and Stone Counties. If the plans and specifications can not be provided at the time of LCNOI submittal, MDEQ will accept written acknowledgement from official(s) responsible for wastewater collection and treatment that the flows generated from the proposed project can and will be transported and treated properly. The letter must include the estimated flow.**

☐ **Collection and Treatment System will be Constructed. Please attach a copy of the cover of the NPDES discharge permit from MDEQ or indicate the date the application was submitted to MDEQ (Date: _____.)**

☐ **Individual Onsite Wastewater Disposal Systems for Subdivisions Less than 35 Lots. Please attach a copy of the Letter of General Acceptance from the Mississippi State Department of Health or certification from a registered professional engineer that the platted lots should support individual onsite wastewater disposal systems.**

☐ **Individual Onsite Wastewater Disposal Systems for Subdivisions Greater than 35 Lots. A determination of the feasibility of installing a central sewage collection and treatment system must be made by MDEQ. A copy of the response from MDEQ concerning the feasibility study must be attached. If a central collection and wastewater system is not feasible, then please attach a copy of the Letter of General Acceptance from the State Department of Health or certification from a registered professional engineer that the platted lots should support individual onsite wastewater disposal systems.**

INDICATE ANY LOCAL STORM WATER ORDINANCE WITH WHICH THE PROJECT MUST COMPLY:

City of Biloxi Mississippi Stormwater Ordinance

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.

Signature of Applicant[1] (owner or prime contractor)	**Date Signed**
Nelson W. Carr	Owner
Printed Name[1]	**Title**

[1]This application shall be signed 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

Please submit the LCNOI form to:

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

PRIME CONTRACTOR CERTIFICATION

LARGE CONSTRUCTION GENERAL PERMIT

Coverage No. MSR10 __ __ __ __ County _____

(Fill in your Certificate of Coverage Number and County)

MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY

By completing and submitting this form to MDEQ, the prime contractor is certifying that (1) they have operational control over the erosion and sediment control specifications (including the ability to make modifications to such specifications) or (2) they have day-to-day operational control of those activities at the site necessary to ensure compliance with the SWPPP and applicable permit conditions.

The owner(s) of the property and the prime contractor associated with regulated construction activity on the property have joint and severable responsibility for compliance with the permit. Notwithstanding any permit condition to the contrary, the coverage recipient and any person who causes pollution of waters of the state or places waste in a location where they are likely to cause pollution of any waters of the state shall remain responsible under applicable federal and state laws and regulations and applicable permits.

PRIME CONTRACTOR INFORMATION

PRIME CONTRACTOR CONTACT PERSON: Nelson W. Carr **PHONE NUMBER:** (228) 860-2203

PRIME CONTRACTOR COMPANY: WC Builders

PRIME CONTRACTOR STREET (P.O. BOX): P.O. Box 2353

PRIME CONTRACTOR CITY: Gulfport **STATE:** MS **ZIP:** 39503

E-MAIL ADDRESS: wcbuildersms@gmail.com

OWNER INFORMATION

OWNER CONTACT PERSON: Same as above **PHONE NUMBER:** (___)_____

OWNER COMPANY NAME: _____

PROJECT INFORMATION

PROJECT NAME: Anchors Landing Subdivision

DESCRIPTION OF CONSTRUCTION ACTIVITY: Clearing, Grubbing, Water/Sewer Installation, Sub-Surface Drainage.

PHYSICAL SITE ADDRESS (If the physical address is not available indicate the nearest named road. For linear projects, indicate the beginning of the project and identify all counties the project traverses.)

STREET: 820 Camp Wilkes Rd.

CITY: Biloxi **COUNTY:** Harrison

I certify that I am the prime contractor for this project and will comply with all the requirements in the above referenced general NPDES permit. I further 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.

_____ _____

Prime Contractor Signature[1] **Date Signed**

Nelson W. Carr Owner

Printed Name[1] **Title**

[1]This application shall be signed 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.

This Prime Contractors Certification form shall be submitted to:

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

Revised: 10/25/16

Keep a Copy at the Construction Site and Also Submit this Page to:
Chief, Environmental Permits Division
MS Department of Environmental Quality, Office of Pollution Control
P.O. Box 2261
Jackson, Mississippi 39225-2261

Registration Form for Residential Lot Coverage
under Mississippi's Large Construction Storm Water General Permit
INSTRUCTIONS

MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY

Coverage recipients for residential subdivision construction that do not retain responsibility for permit compliance for individual lots are to furnish this Registration to buyers of individual lots at the time of purchase. In addition, the attached Requirements for Individual Lots in Residential Subdivisions, the Site Inspection and Certification Form and the Large Construction Storm Water General Permit shall also be given to buyers of individual lots at the time of purchase. This form is providing notification to buyers of lots in residential developments, that being part of a "larger common plan of development or sale," coverage is required under Mississippi's Large Construction Storm Water General Permit. To comply with the permit, **the Registration Form must be submitted to MDEQ** at the address listed above and a Storm Water Pollution Prevention Plan (SWPPP) must be developed and implemented to reduce pollutants in storm water discharges during construction activity. **The SWPPP is <u>not</u> required to be submitted to MDEQ.** A copy of the SWPPP and Registration Form must be kept at the construction site or locally available (i.e., able to be produced within an hour of being requested by a state or local inspector). See the following attachments for information on SWPPP development. In addition, **a copy of the completed Registration Form(s) must be retained by the developer and submitted to the MDEQ when requesting termination of permit coverage.** If the buyer or homebuilder sells the lot before a house is built, they must provide this form to the new owner. All questions must be answered. Answer "NA" if the question is not applicable. For further information, contact MDEQ at 601/961-5171 or access our website address: www.deq.state.ms.us/MDEQ.nsf/page/epd_epdgeneral.

ORGINAL COVERAGE RECIPIENT NAME: _____

COMPANY NAME: _____

STREET OR P.O. BOX: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

PHONE # (INCLUDE AREA CODE): _____

BUYER / HOMEBUILDER: _____

COMPANY NAME (IF APPROPRIATE): _____

STREET OR P.O. BOX: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

BUYER PHONE # (INCLUDE AREA CODE): _____

RESIDENTIAL SUBDIVISON NAME: _____

LARGE CONSTRUCTION STORM WATER PERMIT COVERAGE NUMBER: MSR10: ___ ___ 860-2203 860-2203

LOT NUMBER(s) (attach an additional sheet if necessary): _____ **LOT SIZE(s):** _____

PHYSICAL SITE ADDRESS (IF NOT AVAILABLE INDICATE THE NEAREST NAMED ROAD):

STREET: _____

CITY: _____ **COUNTY:** _____ **ZIP:** _____

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 persons 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. As a buyer / homebuilder, I further certify that I have read and understand the terms and conditions of Mississippi's Large Construction Storm Water General Permit and that I am responsible for installing and maintaining the appropriate pollution control measures for the purchased lot(s) identified.

Original Coverage Recipient Signature[1]	19.33+/- **Date Signed**
Printed Name	**Title**
Buyer / Homebuilder Signature[1]	**Date Signed**
Printed Name	**Title**

[1]**This application shall be signed according to ACT11, T-7 of the Large Construction General Permit.**

Revised: 12/12/16

REQUIREMENTS FOR LOTS IN RESIDENTIAL SUBDIVISION WHICH ARE COVERED BY THE LARGE CONSTRUCTION STORM WATER GENERAL PERMIT

As a homebuilder on a lot that is part of a regulated subdivision, you are also regulated under the State's storm water regulations and are required to take steps to keep soil and sediment from leaving the lot. When rain falls on exposed soil it can wash away valuable topsoil. It also carries sediment, nutrients and other pollutants into streets, gutters and ditches, where it then travels to lakes, rivers, streams or wetlands. Polluted runoff can cause excessive growth of aquatic weeds and algae and reduce recreational opportunities such as swimming and fishing. Sediment laden runoff can also destroy fish habitat reducing productive fishing opportunities. In addition, sediment-laden runoff can also clog pipes, ditches, streams and basins resulting in increased flooding and maintenance cost. Therefore, the homebuilder is required to minimize off-site damage from soil erosion, sediment leaving the construction site, and poor "housekeeping" practices. This requirement must be accomplished by developing and implementing a Storm Water Pollution Prevention Plan (SWPPP). Some examples of individual lot SWPPPs are attached for your convenience. Sketch the controls on a copy of your site plan. Narrative notes on the site plan may also be used in addition to the erosion control symbols.

In developing and implementing the SWPPP, controls must be used from each control group (vegetative, structural, housekeeping) to prevent erosion and sediment and other pollutants from leaving the site. Commonly used controls include:

Vegetative Controls

Temporary vegetation includes annual grasses that sprout quickly such as annual rye, browntop millet, oats, and winter wheat. These grow quickly with little care and can protect the soil from rainfall and act as a filter. They will not provide permanent cover. Permanent cover must be established as indicated below. When a disturbed area will be left undisturbed for fourteen (14) days or more, the appropriate temporary or permanent vegetative practices shall be implemented immediately.

Mulching is the placement of hay grass, woodchips, straw, or synthetic material on the soil to provide temporary cover to protect the soil from rain. Mulching may be the only option during the winter when seeding or sodding is not possible. Mulch must stay in place to be effective. Netting, stakes or chemical binders are used to anchor some types of mulch. Be sure to reinstall washed-out mulch and anchor if necessary until permanent cover is established.

Permanent stabilization is the establishment of a permanent vegetative cover on disturbed areas using either sod, perennial seed, trees or shrubs. When a disturbed area will be left undisturbed for fourteen (14) days or more, the appropriate temporary or permanent vegetative practices shall be implemented immediately. Silt fences, and other temporary measures must be removed following permanent stabilization.

Vegetative buffer zones are undisturbed or planted vegetated areas that are between construction activities and water bodies.

Structural Controls

Silt fences are temporary sediment barriers made of filter fabric buried at the bottom, stretched, and supported by stakes. The silt fence slows runoff and allows it to puddle or pond, so soil and sediment can settle out before leaving the site. The bottom eight to twelve inches of fence must either be sliced in or buried in a trench about four to six inches deep by four to six inches wide. **Silt fences that are not buried are improperly installed. They have no useful function, are a waste of money, and may result in enforcement action**. Stakes must be on the downstream side of the fence and spaced about 3 feet apart. Silt fence must not be installed across streams, ditches, waterways, or other concentrated flow areas. Place fences on the contour or perpendicular to the slope of the hill so that water and sediment will pond behind the fence. **Turn ends uphill** to prevent water going around the end. Install on the downslope, downhill, downstream, or low side of your lot. Keep the fence/barrier in place until grass is established.

Slope drains are piping or lined channels that carry storm water downslope without erosion. A good example would be a downspout extender. Extenders may be used to protect temporarily stabilized areas from roof runoff. Extenders can direct water from roof gutters to paved or grassed areas. Remove extenders following permanent stabilization.

Construction entrance/exits are stone stabilized site entrances which reduce sediment tracked onto public roads. Apply gravel or crushed rock to the driveway area and restrict traffic to this one route. Use 3 to 6 inch gravel over a geotextile fabric. At the end of each day sweep or scrape up any soil tracked onto the street. Limit "standard" vehicle access (including workers' vehicles) to only streets and roads, keep vehicles off of future yard areas; limit tracking of mud onto streets by requiring any required vehicles to use designated access drives. Streets are conduits for storm water, it is important to keep mud and sediment off the streets.

Stockpiles of sand or soil should be covered with plastic or tarps at the end of each workday, or surrounded with silt fence or haybales. Do not locate a stockpile near a street, storm drain inlet, or ditch.

Erosion control blankets or mats are machine-produced mats of straw or other fibers held together with netting that provide temporary or permanent stabilization in critical areas, such as slopes or channels, so that vegetation may be established.

Storm Drain Inlets on the lot must be protected by surrounding or covering with a filter material until final stabilization has been achieved.

Additional Controls: The above controls are the more common practices used at small construction sites. There are a number of other controls, techniques and manufactured product available. A few examples include hydro seeding, diversion berms, silt dikes and fiber logs. Even something as simple as a tarp or plastic may provide temporary cover for small exposed areas. You may wish to contact an erosion and sediment control specialist, local building official, or MDEQ for further information. In addition, MDEQ has several guidance manuals that may be of assistance and the internet has abundant guidance on construction BMPs.

Housekeeping Controls: Pollutants that may enter storm water from construction sites because of poor housekeeping include oils, grease, paints, gasoline, solvents, litter, debris, and sanitary waste. Good housekeeping practices include:

- Frequent cleaning of trash and debris, providing waste receptacles at convenient locations and providing regular collection of waste;
- Directing concrete trucks to the subdivision's designated wash-off area(s) or back to the Ready-Mix facility;
- Providing protected storage areas for chemicals, paints, solvents, fertilizers, and other potentially toxic materials; and
- Providing adequately maintained sanitary facilities.

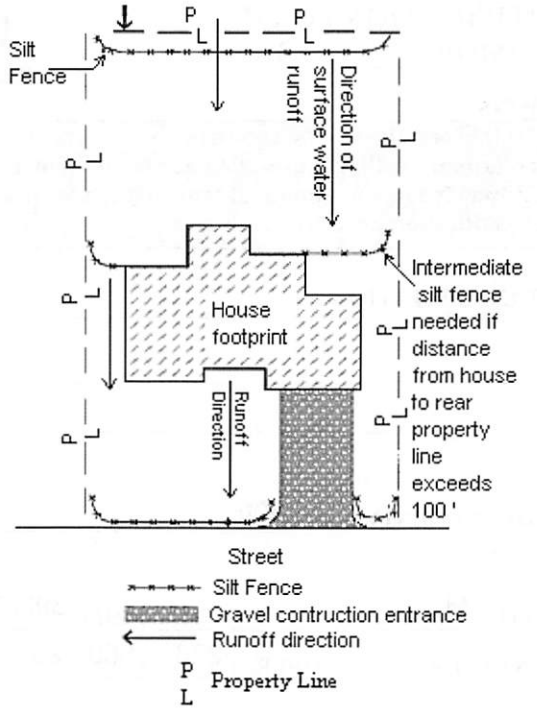
In addition, you should be aware that State air regulations prohibit the open burning of residential solid waste.

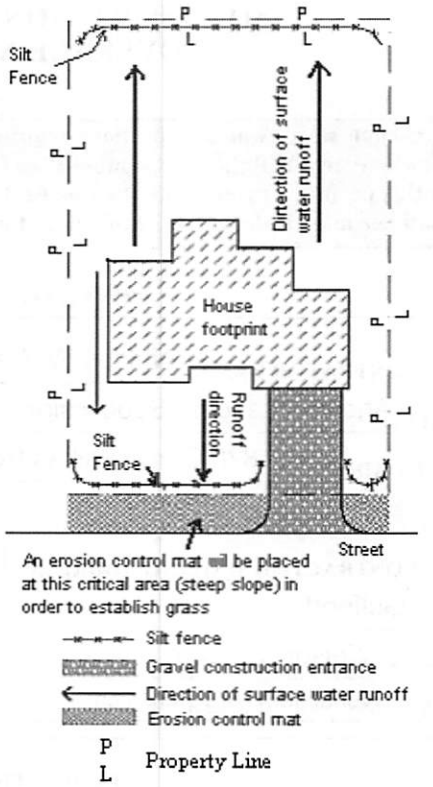
Inspection Requirements. Homebuilders shall inspect all erosion controls as often as is necessary, but no less than weekly, to ensure that appropriate erosion and sediment controls have been properly constructed and maintained to prevent erosion and sediment from leaving the site and determine if additional or alternative control measures are required. The inspection results shall be recorded on the Site Inspection and Certification Form contained in the Large Construction Forms Package. MDEQ strongly recommends that homebuilders perform "walk through" inspections daily. It is a responsibility of the homebuilder to install additional and/or alternative erosion and sediment controls when existing controls prove to be ineffective in preventing sediment from leaving the site.

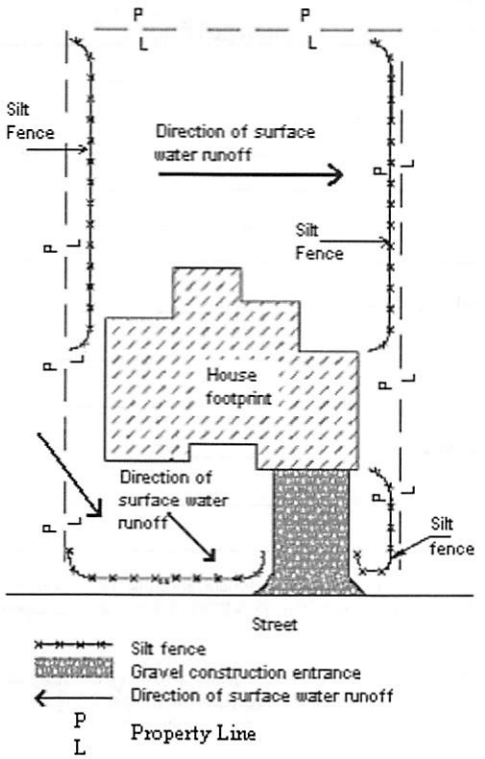
Retention of Records. All records, reports, forms and information resulting from activities required by this permit shall be retained for a period of at least three years from the date of the document origin.

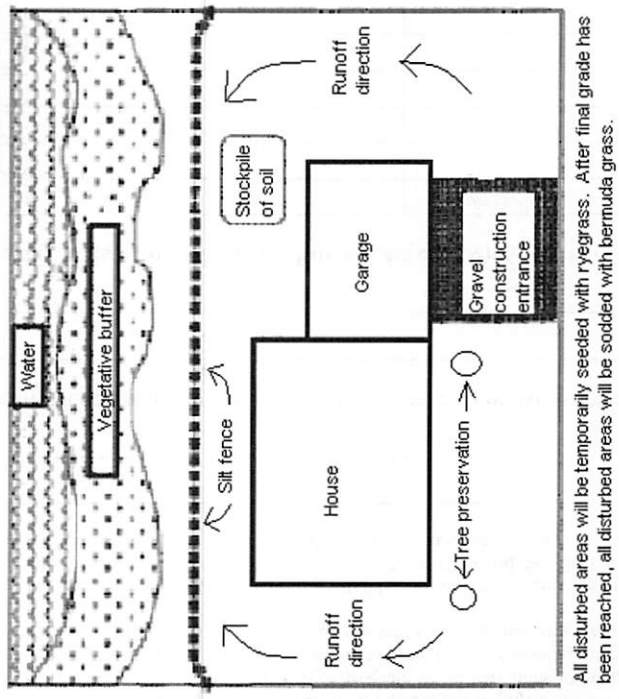
Duty to Comply. Lot owners must comply with the applicable permit conditions. See Activities 3, 5, 6, 7, 10 and 11 in the Large Construction Storm Water General Permit for applicable conditions. Any noncompliance with the applicable permit conditions and aforementioned conditions including sediment leaving the lot constitutes a violation of the Mississippi Water Pollution Control Law and is grounds for enforcement action. It shall not be an acceptable defense that controls were not installed because subsequent activities would require their replacement or cause their destruction.

EXAMPLE INDIVIDUAL LOT EROSION AND SEDIMENT CONTROL PLANS









Keep a Copy Available at the Permitted Facility or Locally Available
Submit the Inspection Reports Only if Requested by the Mississippi Department of Environmental Quality (MDEQ)

LARGE CONSTRUCTION GENERAL PERMIT
SITE INSPECTION AND CERTIFICATION FORM
COVERAGE NUMBER (MSR10 _ _ _ _)

MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY

INSTRUCTIONS

Results of construction storm water inspections required by ACT6 of this permit shall be recorded on this report form and kept with the Storm Water Pollution Prevention Plan (SWPPP) in accordance with the inspection documentation provisions of ACT9 of the this permit. Inspections shall be performed at least weekly for a minimum of four inspections per month. The coverage number must be listed at the top of all Inspection and Certification Forms.

COVERAGE RECIPIENT INFORMATION

OWNER/PRIME CONTRATOR NAME: Nelson W. Carr

PROJECT NAME: Anchors Landing Subdivision

PROJECT STREET ADDRESS: 820 Camp Wilkes Rd.

PROJECT CITY: Biloxi **PROJECT COUNTY:** Harrison

OWNER/PRIME CONTRACTOR MAILING ADDRESS: P.O. Box 2353

MAILING CITY: Gulfport **STATE:** MS **ZIP:** 39503

CONTACT PERSON: Nelson W. Carr **CONTACT PHONE NUMBER:** (228) 860 2203

EMAIL ADDRESS: Wcbuildersms@gmail.com

INSPECTION DOCUMENTATION

DATE (mo/day/yr)	TIME (hr:min AM/PM)	ANY DEFICIENCIES? (CHECK IF YES)	INSPECTOR(S)
		☐	
		☐	
		☐	
		☐	
		☐	
		☐	

Deficiencies Noted During any Inspection (give date(s); attach additional sheets if necessary): _____

Corrective Action Taken or Planned (give date(s); attach additional sheets if necessary): _____

Based upon this inspection, which I or personnel under my direct supervision conducted, I certify that all erosion and sediment controls have been implemented and maintained, except for those deficiencies noted above, in accordance with the Storm Water Pollution Prevention Plan (SWPPP) and sound engineering practices as required by the above referenced permit. I further certify that the LCNOI and SWPPP information is up to date.

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 gather and evaluate the information submitted. Based on my inquiry of the person or persons 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.

Authorized Signature _____ Date _____

Nelson W. Carr
Printed Name

Owner
Title

MAJOR MODIFICATION FORM
FOR LARGE CONSTRUCTION GENERAL PERMIT
Coverage No. MSR10 __ __ __ __ County _____

MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY

INSTRUCTIONS

Coverage recipients shall notify the Mississippi Department of Environmental Quality at least 30 days in advance of the following activities (check all that apply). This form should be submitted with a modified Storm Water Pollution Prevention Plan (SWPPP), updated USGS topographic map, Corps of Engineers Section 404 documentation and wastewater collection and treatment information, as appropriate.

☐ **SWPPP details have been developed and are ready for MDEQ review for subsequent phases of an existing, covered project.**

☐ **"Footprint" identified in the original LCNOI is proposed to be enlarged.**

This form must be signed by the current coverage recipient under Mississippi's Large Construction General Permit. A different developer of new phases of existing subdivisions must apply for separate permit coverage through the submittal of a new complete LCNOI package. Coverage recipients are authorized to discharge storm water associated with proposed expansions of existing subdivisions or subsequent phases, under the conditions of the General Permit, only upon receipt of written notification of approval by MDEQ. All other modifications, such as changes of erosion and sediment controls used, must be in accordance with ACT6, S-1 (6) and S-2 (7) of the General Permit.

ALL INFORMATION MUST BE COMPLETED (indicate "N/A" where not applicable)

COVERAGE RECIPIENT INFORMATION

COVERAGE RECIPIENT CONTACT NAME: _____ TEL # (_____) _____

COMPANY NAME: _____

STREET OR P.O. BOX: _____

CITY: _____ STATE: _____ ZIP: _____ E-MAIL: _____

PROJECT INFORMATION

PROJECT NAME: _____

CITY: _____

ADDITIONAL ACREAGE TO BE DISTURBED: _____ TOTAL PROJECT ACREAGE: _____

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.

_____ _____
Signature (must be signed by coverage recipient) Date

_____ _____
Printed Name Title

Please submit this form to:

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

Revised: 12/12/16

Environmental Permits for Industrial Facilities
Request for Transfer of Permit, General Permit Coverage and/or Name Change

Instructions: For Ownership Change-Complete all Items on Page 1 (except Item VIII) and Page 2 (reverse side).
For Name Change Only-Complete Items I, II, V, VI, VII, VIII, and Page 2 (reverse side).
Note-This form should be submitted to MDEQ when a transferal date is finalized but prior to the actual transfer.

Item I.

Facility Name: _____

Location: (Do Not Use P.O. Box)

Street: _____

City: _____ State: MS Zip: _____

County: _____

Telephone: (_____)_____

Item II.

Responsible official after transfer or name change:

Name: _____

Title: _____

Mailing Address:
Street/P.O. Box: _____

City: _____ State: _____ Zip: _____

Telephone (_____)_____

Item III.

Previous Permittee[1]: _____

Mailing Address:

Street/P.O. Box:_____

City: _____ State: _____ Zip: _____

Telephone: (_____)_____

Item IV.

New Permittee[1]: _____

Mailing Address:

Street/P.O. Box:_____

City: _____ State: _____ Zip: _____

Telephone: (_____)_____

Item V.

Industrial Activity SIC Code: _____

Brief Description:

Item VI.

Will Facility Operations Change? Yes_____ No_____

If yes, the appropriate applications and permits may require modification prior to change.

Item VII.

Will Facility Name Change? Yes_____ No_____

If Yes, Provide New Name for Permit Coverage.

New Name:_____

Item VIII.

Signature for Name Change

Print Name: _____

Authorized Signature[2]: _____

Title: _____ Date: _____

Item IX.

We the undersigned request transfer of permit(s) and/or permit coverage(s) listed on the backside of this form.

From:_____

To:_____ Acquisition Date:_____

By signature below, the recipient certifies that: 1) they are aware of the requirements of the permit(s), 2) the applicant can demonstrate to the Permit Board it has the financial resources and operational expertise and 3) agrees to accept responsibility and liability for the permit(s) listed on the back of this document. By signature below, the previous permittee is requesting that the permit(s) and/or permit coverage(s) be transferred to the recipient. The transfer of the permit(s) or permit coverage(s) will be by written notification from the Office of Pollution Control (OPC). The OPC may require submittal of information regarding financial capability and past compliance history of the recipient.

_____ _____

Print New Permittee[1] Name Print Previous Permittee[1] Name

_____ _____

New Authorized Signature[2] Previous Authorized Signature[2]

_____ _____ _____ _____

Title Date Title Date

[1]A Permittee is a company or individual that has been issued an individual permit or coverage under a general permit.
[2]Authorized Signature must be owner or in the case of a corporation, a corporate officer as defined in Regulations 11 Miss. Admin. Code Pt. 2, Ch. 2. and 11 Miss. Admin. Code Pt. 6, Ch. 1.

Mississippi Department of Environmental Quality/Office of Pollution Control
P.O. Box 2261
Jackson, Mississippi 39225
(601) 961-5171

Item X. Storm Water

(Check One)

☐ A Storm Water Pollution Prevention Plan (SWPPP) is not required for the site.

☐ The recipient certifies that they have received a copy of the Office of Pollution Control approved SWPPP from the original owner.

☐ The recipient is submitting a new SWPPP, which is attached to this form.

☐ A copy of the SWPPP cannot be obtained from the original owner.

Item XI. Hazardous Waste ID Number

EPA ID No. _____

(Check One)

☐ An EPA Hazardous Waste ID Number is not required for the site.

☐ The site's EPA ID Number is listed above and a Notification of Regulated Waste Activity Form is attached.

Item XII. Permit(s) and/or Coverage(s) to be Transferred

Permit Type: _____ Permit/Coverage No.: _____ Permit Issuance Date: _____ Date of General Permit Coverage: _____ Permit Expiration Date: _____	Permit Type: _____ Permit/Coverage No.: _____ Permit Issuance Date: _____ Date of General Permit Coverage: _____ Permit Expiration Date: _____
Permit Type: _____ Permit/Coverage No.: _____ Permit Issuance Date: _____ Date of General Permit Coverage: _____ Permit Expiration Date: _____	Permit Type: _____ Permit/Coverage No.: _____ Permit Issuance Date: _____ Date of General Permit Coverage: _____ Permit Expiration Date: _____
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Permit Type: _____ Permit/Coverage No.: _____ Permit Issuance Date: _____ Date of General Permit Coverage: _____ Permit Expiration Date: _____	OTHER INFORMATION:

INSPECTION SUSPENSION FORM

UNDER LARGE CONSTRUCTION STORM WATER GENERAL NPDES PERMIT MSR10

MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY

INSTRUCTIONS

Coverage recipients under Mississippi's Large Construction Storm Water General Permit may temporarily suspend required weekly inspections of erosion and sediment controls and monthly record keeping by submission of this form. Inspections may be suspended only when land disturbing activities have ceased, no further land disturbing activities are planned for a period of at least six (6) months, the site is stable with no active erosion, and vegetative cover has been established (see ACT9, S-1). The coverage recipient is responsible for all permit conditions during the suspension period and nothing in this condition shall limit the rights of MDEQ to take enforcement or other actions against the coverage recipient. Once land disturbing activities resume MDEQ must be notified and all inspections and record keeping required by the permit must also resume. Color photographs, representative of the construction site, must be submitted with this inspection form.

COVERAGE RECIPIENT INFORMATION

COVERAGE RECIPIENT CONTACT PERSON: _____

COMPANY NAME: _____

STREET OR P.O. BOX: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE # (INCLUDE AREA CODE): _____ E-MAIL: _____

PROJECT INFORMATION

CONSTRUCTION STORM WATER GENERAL PERMIT COVERAGE NUMBER: MSR10 __ __ __ __

PROJECT NAME: _____

CITY: _____ COUNTY: _____

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. **I further certify that: land disturbing activities have ceased, no further land disturbing activities are planned for a period of at least six (6) months, the site is stable with no active erosion, and vegetative cover has been established.**

_____ _____

Signature (must be signed by coverage recipient) Date Signed

_____ _____

Printed Name Title

Please submit this form to:

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

Revised: 12/10/2016

Request for Termination (RFT) of Coverage

MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY

LARGE CONSTRUCTION GENERAL PERMIT

Coverage No. MSR10 __ __ __ __ County _____

(Fill in your Certificate of Coverage Number and County)

This form must be submitted within thirty (30) days of achieving final stabilization (see ACT10, S-1 of general permit). Failure to submit this form is a violation of permit conditions.

The signatory of this form must be the owner or operator (prime contractor) who is the current coverage recipient (rather than the project manager or environmental consultant).

(Please Print or Type)

Project Name: _____

Physical Site Street Address (if not available, indicate nearest named road): _____

City: _____ **County:** _____ **Zip:** _____

Coverage Recipient Company Name: _____

Street Address / P.O. Box: _____

City: _____ **State:** _____ **Zip:** _____

Coverage Recipient Contact Name and Position: _____ **Tel. #:** (____) _____

Has another owner(s) or operator(s) assumed control over all areas of the site that have not reached final stabilization?

RESIDENTIAL SUBDIVISIONS:

- ☐ **YES. A copy of the Registration Form for Residential Lot Coverage for each lot or out parcel that has been sold and a site map, indicating which lots have been sold, are attached.**
- ☐ **NO. Coverage may not be terminated until all areas have reached final stabilization.**

COMMERCIAL DEVELOPMENT:

- ☐ **YES. A copy of the site map, indicating which out-parcels have been sold, is attached.**
- ☐ **NO. Coverage may not be terminated until all areas have reached final stabilization.**

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 understand that by submitting this Request for Termination and receiving written confirmation, I will no longer be authorized to discharge storm water associated with construction activity under this general permit. Discharging pollutants associated with construction activity to waters of the State without proper permit coverage is a violation of state law. I also understand that the submittal of this Request for Termination does not release an owner or operator from liability for any violations of this permit or the Clean Water Act.

Authorized Name (Print)	Telephone	Signature	Date Signed
_____	_____	_____	_____

[1]This application shall be signed according to the General Permit, ACT11, T-7 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
MS Department of Environmental Quality, Office of Pollution Control
P.O. Box 2261
Jackson, Mississippi 39225

Revised: 12/01/16

TME
TERRY MORAN
ENGINEERING & SURVEYING

TERRY MORAN, P.E., P.L.S.
P.O. Box 4075 Ph (228) 896-4733
Biloxi, MS 39535 Fax (228) 896-6769

December 14, 2021

Mississippi State Department of Environmental Quality
Stormwater Division
515 East Amite Street
Jackson, Mississippi 39201

RE: Request for LCNOI Approval
Parcel No. 1209F-03-024.000
City of Biloxi, Harrison County, MS

To Whom It May Concern:

For your review, please find enclosed the LCNOI application along with the two sets of construction plans and specification, SWPPP, drainage calculations, and the conditional Corp of Engineers wetland permit for the above referenced project.

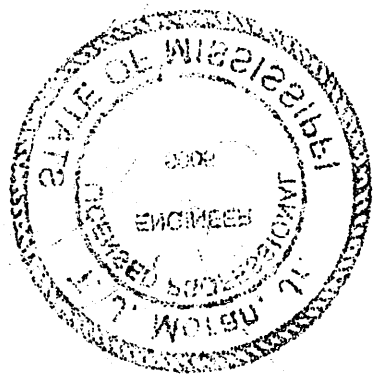
If you have any questions or need any additional information, please contact me at (228) 896-6768.

Sincerely,

Terry Moran, P.E., P.L.S.

T. J. Moran, Jr.
LICENSED PROFESSIONAL
ENGINEER
6005
STATE OF MISSISSIPPI

20-180
enclosures


STATE OF WISCONSIN
REGISTERED PROFESSIONAL
ENGINEER