



### WET DECK LOG SPRAY RECOVERY FORM



CURRENT COVERAGE NO.: MSG170057

(Coverage number is located at the bottom left corner of your previous Certificate of Coverage)

Legal Company Name: Fly Timber Co. Inc. Facility Name: Fly Tick Lumber  
 Contact Name and Position: Josh Angle Forester  
 Contact Area Code and Phone Number: (662) 417-5935 Contact Email: Josh@Fly.com  
 Primary SIC Code: (        ) Primary NAICS Code (6-digit): (        )  
 Physical Site Address - Street: 1677 Hwy 7N  
 City: Grenada State: MS Zip: 38901 County: Grenada  
 Mailing Address - Street: 2178 Hwy 7N  
 City: Grenada State: MS Zip: 38901

Provide the coordinates of the Plant Entrance:

Latitude: 33 degrees 52 minutes 27 seconds Longitude: 89 degrees 49 minutes 27 seconds

Identify boiler blowdown, exterior equipment and vehicle wash waters, or engine washing waters and associated outfall. Wash Station

Identified the number of outfalls/release points under this coverage? 1

Provide the coordinates of Outfall 001:

Latitude: 33 degrees 52 minutes 10 seconds Longitude: 89 degrees 49 minutes 32 seconds

Nearest named waterbody which storm water will enter: \_\_\_\_\_

Provide the coordinates of Outfall 002:  N/A

Latitude: \_\_\_\_\_ degrees \_\_\_\_\_ minutes \_\_\_\_\_ seconds Longitude: \_\_\_\_\_ degrees \_\_\_\_\_ minutes \_\_\_\_\_ seconds

Nearest named waterbody which storm water will enter: \_\_\_\_\_

Provide the coordinates of Outfall 003:  N/A

Latitude: \_\_\_\_\_ degrees \_\_\_\_\_ minutes \_\_\_\_\_ seconds Longitude: \_\_\_\_\_ degrees \_\_\_\_\_ minutes \_\_\_\_\_ seconds

Nearest named waterbody which storm water will enter: River Pale Creek

Are there any discharges of storm water exposed to industrial activities or allowable non-storm water discharges which do not drain to and discharge from a WDLS recirculation pond?  YES  NO

If yes, a SWPPP is required to be submitted to address this industrial stormwater. The SWPPP is maintained on site and a copy is attached with this form.  YES  NO  N/A

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 the project continues as described in the original notice of intent. Also, I certify that I understand when coverage is terminated I am no longer authorized to emit regulated air emissions and discharge wastewater or storm water associated with industrial activity under this general permit. I understand that discharging pollutants associated with industrial activity to waters of the state without NPDES coverage is in violation of state law.

Josh Angle  
 Authorized Signature (shall be signed according to ACT 4, T-4 of the GP)  
Josh Angle  
 Printed Name

3/14/22  
 Date Signed  
Forester  
 Title

Submit signed form online at [www.mdeq.ms.gov/wdlsqp](http://www.mdeq.ms.gov/wdlsqp) or a hard copy to Water II Branch Manager, EPD, MDEQ, PO Box 2261, Jackson, MS 39225

m - received via email 3.14.22