



MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY

# LARGE CONSTRUCTION GENERAL PERMIT FOR LAND DISTURBING ACTIVITIES OF FIVE (5) OR MORE ACRES RE-COVERAGE FORM

FOR COVERAGE UNDER MISSISSIPPI'S REISSUED  
LARGE CONSTRUCTION STORM WATER GENERAL PERMIT MSR10  
GENERAL NPDES COVERAGE NO. MSR10 8 2 6 4

## INSTRUCTIONS

The submittal of this form is required to receive coverage under the reissued Large Construction General Permit. This form must be completed and returned to the address printed at the bottom of the back page of this form by April 30, 2022.

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).

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. Permits will be issued in the company name as it is registered with the Mississippi Secretary of State.

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. SWPPP amendments with the sole intent of incorporating new permit conditions do not need to be submitted to MDEQ for review and/or approval.

If the project is complete and final stabilization has been achieved, please request termination of coverage by completing the Request for Termination (RFT) Form found in the Large Construction Forms Package. Projects that continue to discharge storm water associated with construction activity without applicable permit coverage are in violation of state law.

Do not submit this form if submitting a Request for Termination (RFT) Form.

**ALL INFORMATION REQUESTS MUST BE ANSWERED** (Answer "NA" if not applicable)

## COVERAGE RECIPIENT INFORMATION

CONTACT NAME & POSITION: Lamar Rutland, P.E. - Director of Engineering

COMPANY LEGAL NAME: City of Hattiesburg

STREET OR P.O. BOX: 200 Forrest Street

CITY: Hattiesburg STATE: MS ZIP: 39401

PHONE NUMBER: (601) 545-4540 E-MAIL: lrutland@hattiesburgms.com

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**FACILITY SITE INFORMATION**

FACILITY SITE NAME: Forrest General Hospital Site Traffic Improvements

CONTACT NAME & POSITION: Jeff Cook, VP and General Counsel

CONTACT PHONE NUMBER: ( 601 ) 288-4458

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

STREET: US Highway 49 Between Hardy Street and Adeline Street

CITY: Hattiesburg COUNTY: Forrest ZIP: 39404

PROVIDE THE COORDINATES OF THE PROJECT ENTRANCE OR START POINT:

LATITUDE: 31 degrees 19 minutes 09 seconds LONGITUDE: -89 degrees 19 minutes 42 seconds

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

TOTAL ACREAGE DISTURBED: 10 ESTIMATED CONSTRUCTION PROJECT END DATE: 2024-12-31  
YYYY-MM-DD

**STORM WATER POLLUTION PREVENTION PLAN (SWPPP)**

THE GENERAL PERMIT REQUIRES THE SWPPP TO BE ONSITE, UP-TO-DATE AND EFFECTIVE IN CONTROLLING STORM WATER POLLUTANTS. ACCORDINGLY, THE FOLLOWING QUESTIONS MUST BE ANSWERED YES or N.A. TO RECEIVE RECOVERY.

1. IS A COPY OF THE SWPPP AT THE PERMITTED SITE OR LOCALLY AVAILABLE?  YES  NO
2. DOES SWPPP CONTAIN AN UP-TO-DATE ASSESSMENT OF POTENTIAL STORM WATER POLLUTANT SOURCES AND IDENTIFY BMPS TO EFFECTIVELY CONTROL THEM?  YES  NO
3. IF A SEDIMENT BASIN IS A PROJECT BMP, IS IT EQUIPPED WITH AN OUTLET STRUCTURE THAT DISCHARGES ONLY FROM THE SURFACE OF THE BASIN (ACTS, T-6 (A))? N/A  YES or N.A.  NO
4. DOES SWPPP PROHIBIT THE DISCHARGES LISTED IN ACT2, T-3 (3) OF THE PERMIT?  YES  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 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 discharge storm water associated with construction activity under this general permit. I understand that discharging pollutants associated with construction activity to waters of the State without proper permit coverage is in violation of state law.

I am aware of the significant changes in the renewed Large Construction Storm Water General Permit and certify the SWPPP for this project has been modified to incorporate these changes.

Lamar Rutland  
Signature<sup>1</sup>

3/11/22  
Date Signed

Lamar Rutland  
Printed Name<sup>1</sup>

Dir Engineering  
Title

<sup>1</sup>This application for re-coverage shall be signed according to ACT11, T-7 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,  
MS Department of Environmental Quality, Office of Pollution Control  
P.O. Box 2261  
Jackson, Mississippi 39225

Electronically:

<https://www.mdeq.ms.gov/construction-stormwater/>

MSR10 \_\_\_\_\_

(NUMBER TO BE ASSIGNED BY STATE)

APPLICANT IS THE:  OWNER  PRIME CONTRACTOR

**OWNER CONTACT INFORMATION**

OWNER CONTACT PERSON: Jeff Cook, VP and General Counsel  
OWNER COMPANY LEGAL NAME: Forrest General Hospital  
OWNER STREET OR P.O. BOX: P.O. Box 16389  
OWNER CITY: Hattiesburg STATE: MS ZIP: 39404  
OWNER PHONE #: (601) 288-4458 OWNER EMAIL: jwcook@forrestgeneral.com

**PRIME CONTRACTOR CONTACT INFORMATION**

PRIME CONTRACTOR CONTACT PERSON: NA  
PRIME CONTRACTOR COMPANY LEGAL NAME: NA  
PRIME CONTRACTOR STREET OR P.O. BOX: NA  
PRIME CONTRACTOR CITY: NA STATE: NA ZIP: NA  
PRIME CONTRACTOR PHONE #: (NA) PRIME CONTRACTOR EMAIL: NA

**FACILITY SITE INFORMATION**

FACILITY SITE NAME: Forrest General Hospital Site Traffic Improvements  
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: US Highway 49 Between Hardy Street and Adeline Street  
CITY: Hattiesburg STATE: MS COUNTY: Forrest ZIP: 39404  
FACILITY SITE TRIBAL LAND ID (N/A if not applicable): NA  
LATITUDE: 31 degrees 19 minutes 09 seconds LONGITUDE: -89 degrees 19 minutes 42 seconds  
LAT & LONG DATA SOURCE (GPS (Please GPS Project Entrance/Start Point) or Map Interpolation): Google Earth  
TOTAL ACREAGE THAT WILL BE DISTURBED <sup>1</sup>: 10  
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: 2020-09-01  
YYYY-MM-DD  
ESTIMATED CONSTRUCTION PROJECT END DATE: 2022-12-31  
YYYY-MM-DD  
DESCRIPTION OF CONSTRUCTION ACTIVITY: Roadway improvements including adding turn lanes and installation of 2 traffic signals  
PROPOSED DESCRIPTION OF PROPERTY USE AFTER CONSTRUCTION HAS BEEN COMPLETED:  
Roadways  
SIC Code \_\_\_\_\_ NAICS Code \_\_\_\_\_

NEAREST NAMED RECEIVING STREAM: Gordon's Creek

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.nsl/page/TWB\\_Total\\_Maximum\\_Daily\\_Load\\_Section](http://www.deq.state.ms.us/MDEQ.nsl/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 1/4 MILE DOWNSTREAM OF PROJECT BOUNDARY THAT MAY BE IMPACTED BY THE CONSTRUCTION ACTIVITY? YES  NO

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

Silty Clay

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

IF YES, INDICATE THE TYPE OF FLOCCULANT.  ANIONIC POLYACRYLAMIDE (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

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