

A1: 64771



# WET DECK LOG SPRAY RECOVERY FORM

CURRENT COVERAGE NO.: MSG17 0098

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



Legal Company Name: B&G WOOD, INC. Facility Name: B AND G WOOD INC. LAKE FACILITY  
 Contact Name and Position: DONALD GRANTHAM, PRESIDENT AND OWNER  
 Contact Area Code and Phone Number: ( 601 ) 656 - 1262 Contact Email: sharon.bgwood@outlook.com  
 Primary SIC Code: ( \_\_\_\_\_ ) Primary NAICS Code (6-digit): ( 115310 )  
 Physical Site Address - Street: 320 BOB LOGAN DRIVE  
 City: LAKE State: MS Zip: 39092 County: SCOTT  
 Mailing Address - Street: 1300 Weyerhaeuser Street  
 City: Philadelphia State: MS Zip: 39350

Provide the coordinates of the Plant Entrance:  
 Latitude: 32 degrees 19 minutes 31.512 seconds Longitude: 89 degrees 20 minutes 23.928 seconds

Identify boiler blowdown, exterior equipment and vehicle wash waters, or engine washing waters and associated outfall. NO

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

Provide the coordinates of Outfall 001:  
 Latitude: 32 degrees 19 minutes 25 seconds Longitude: 89 degrees 19 minutes 50 seconds  
 Nearest named waterbody which storm water will enter: UNNAMED TRIBUTARY OF WARRIER CREEK

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: \_\_\_\_\_

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.

[Signature]  
Authorized Signature (shall be signed according to ACT 4, T-4 of the GP)  
DONALD GRANTHAM  
Printed Name

03/28/2022  
Date Signed  
President  
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

02 - received via email 3.28.22

UNITED STATES DEPARTMENT OF AGRICULTURE

OFFICE OF THE ASSISTANT SECRETARY FOR TECHNICAL ASSISTANCE



Washington, D.C. 20250

Dear Mr. [Name]:

Reference is made to your letter of [Date] regarding [Subject].

The information you requested is being provided to you as follows:

[Detailed description of the information provided, including any data, reports, or documents.]

If you have any questions regarding this information, please contact the [Department/Office] at [Phone Number].

Sincerely,  
 [Signature]

This document contains information that is exempt from public release under the Freedom of Information Act, 5 U.S.C. 552, because it is:

(b) (5) - [Exemption Category]

(b) (7) - [Exemption Category]

Very truly yours,  
 [Signature]

[Name]  
 [Title]



# Michael Watson

SECRETARY OF STATE

This is not an official certificate of good standing.

Name History

Name	Name Type
B & G WOOD, INC.	Legal

Business Information

<b>Business Type:</b>	Profit Corporation
<b>Business ID:</b>	717490
<b>Status:</b>	Good Standing
<b>Effective Date:</b>	05/21/2002
<b>State of Incorporation:</b>	Mississippi
<b>Principal Office Address:</b>	1300 Weyerhaeuser Street, P. O. Drawer 647 Philadelphia, MS 39350

Registered Agent

**Name**  
P DONALD GRANTHAM SR  
1300 Weyerhaeuser Street;P.O. Drawer 647  
Philadelphia, MS 39350

Officers & Directors

Name	Title
P Donald Grantham Sr 211 Lewis Ave P O Drawer 647, Po Box 647 Philadelphia, MS 39350	Incorporator
P. Donald Grantham Sr. 1300 Weyerhaeuser Street P. O. Drawer 647 Philadelphia, MS 39350	Director, President
Chad J. Grantham P. O. Box 1094 Philadelphia, MS 39350	Vice President
Sharon Ellingburg P. O. Drawer 647 Philadelphia, MS 39350	Secretary, Treasurer