



MISSISSIPPI DEPARTMENT OF  
ENVIRONMENTAL QUALITY

# UNDERGROUND STORAGE TANK GROUNDWATER REMEDIATION GENERAL PERMIT

## RE-COVERAGE FORM

The submittal of this form is required to continue coverage under Mississippi's Reissued Underground Storage Tank Groundwater Remediation Storm Water General Permit MSG12

**COVERAGE NUMBER: MSG12 0 2 5 5 .** This 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 Certificate of Coverage or in the heading on the Letter of Instruction.

### INSTRUCTIONS

The submittal of this form is required to receive coverage under the reissued Underground Storage Tank (UST) Groundwater Remediation General Permit. This form must be completed and returned to the MDEQ at the address printed at the bottom of the back page of this form within 30 days of the date of the Letter of Instruction for Re-coverage.

The signatory of this form must be the owner or operator (who is the current coverage recipient). The owner or operator that receives coverage is responsible for permit compliance. Do not submit this form if submitting a "Request for Termination."

**ALL INFORMATION MUST BE COMPLETED** (Enter "NA" if not applicable).

### COVERAGE RECIPIENT INFORMATION

Contact Name and Position: William L. Burle, Jr. / President

Company Name: W. L. Burle Engineers, P.A.

Street (P.O. Box): PO Box 1293

City: Greenville State: MS Zip: 38702

Phone Number: ( 662 ) 332-2619

## PROJECT INFORMATION

Project Name: Quick Stop #9

Contact Name and Position: Richard Johnson / Owner

Contact Phone Number: ( 601 ) 735-4063

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

Street: 706 Main Street

City: Leakesville

County: Greene

Zip: 39451

## WASTEWATER DISCHARGE INFORMATION

Where is the remediated groundwater being discharged (check all that apply)?

☒ Surface Water (list nearest named receiving waterbody): Gallows Branch thence Chickasawhay River

☐ POTW

☐ Wastewater Collection Authority (if different than POTW)

If discharge is to a POTW and/or Wastewater Collection Authority, provide the following:

POTW Contact Name: \_\_\_\_\_

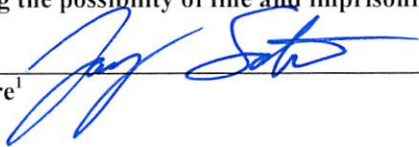
Title: \_\_\_\_\_ Telephone Number: (\_\_\_\_) \_\_\_\_\_

Wastewater Collection Authority Contact Name: \_\_\_\_\_

Title: \_\_\_\_\_ Telephone Number: (\_\_\_\_) \_\_\_\_\_

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<sup>1</sup>



Jay Santucci

Printed Name

June 1, 2022

Date

Treasurer

Title

<sup>1</sup> This form shall be signed according to the General Permit, ACT9, 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  
MDEQ, Office of Pollution Control  
P.O. Box 2261  
Jackson, MS 39225

Revised: April 6, 2011



104 EAST MARKETDRIDGE DRIVE  
(P.O. BOX 1709)  
RIDGELAND, MISSISSIPPI 39157 (39158-1709)  
P| 601-957-7813  
F| 601-957-8715

## LETTER OF TRANSMITTAL

DATE	6/1/2022	JOB NO.	07856-2-0221
ATTENTION Tracy Tomkins			
RE: Quick Stop #9 (MGPTF #11527)			
UST General Permit (MSG120255)			
Re-Coverage Form			
706 Main Street			
Leakesville, MS 39451			

RECEIVED  
JUN 06 2022  
Dept. of Environmental Quality

TO Tracy Tomkins  
MDEQ / EPD – Water I Branch  
P. O. Box 2261  
Jackson, MS 39225-2261

WE ARE SENDING YOU ☒ Attached ☐ Under separate cover via \_\_\_\_\_ the following items.

☐ Shop Drawings ☐ Prints ☐ Plans ☐ Samples ☐ Specifications  
☐ Copy of Letter ☐ Change Order ☐

COPIES	DATE	NO.	DESCRIPTION
1	6/1/2022		Quick Stop (MGPTF #11527) – UST Permit Re-Coverage Form

THESE ARE TRANSMITTED as checked below:

☐ For approval ☐ Approved as submitted ☐ Resubmit \_\_\_\_\_ copies for approval  
☒ For your use ☐ Approved as noted ☐ Submit \_\_\_\_\_ copies for distribution  
☐ As requested ☐ Returned for corrections ☐ Return \_\_\_\_\_ corrected prints  
☐ For review and comment ☐ \_\_\_\_\_  
☐ FOR BIDS DUE \_\_\_\_\_ ☐ PRINTS RETURNED AFTER LOAN TO US

REMARKS \_\_\_\_\_

Thank you,

Kira Calcote, P.E.

COPY TO \_\_\_\_\_ SIGNED: Kira Calcote

*If enclosures are not as noted, please notify us at once.*