



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 6 1. 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: Roy Hill, RPG Senior Lead Consultant, Geologist

Company Name: WSP USA Inc.

Street (P.O. Box): P.O. Box 1278

City: Madison State: MS Zip: 39130

Phone Number: (601) 853-2134

PROJECT INFORMATION

Project Name: Dodge's Store #683

Contact Name and Position: Roy Hill, RPG Senior Lead Consultant, Geologist

Contact Phone Number: (601) 853-2134

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

Street: 4267 Highway 82 West

City: Leland

County: Washington

Zip: 38756

WASTEWATER DISCHARGE INFORMATION

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

Surface Water (list nearest named receiving waterbody): Black Bayou

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.

Roy Hill
Signature¹

06/30/22

Date

Roy Hill
Printed Name

Senior Lead Consultant
Title

¹This 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



Michael Watson
SECRETARY OF STATE

Office of the Secretary of State
Jackson, Mississippi

Certificate of Good Standing

I, MICHAEL WATSON, Secretary of State of the State of Mississippi, and as such, the legal custodian of the records as required by the laws of Mississippi, to be filed in my office, do hereby certify:

That on the 10th day of September, 1997, the State of Mississippi issued a Charter/Certificate of Authority to:

WSP USA INC.

That the state of incorporation is New York.

That the period of duration is perpetual.

That according to the records of this office, Articles of Dissolution or a Certificate of Withdrawal have not been filed.

That according to the records of this office, a current Annual Report has been delivered to the Office of the Secretary of State.

I further certify that all fees, taxes and penalties owed to this state, as reflected in the records of the Secretary of State, have been paid and that the corporation is in existence or has authority to transact business in Mississippi.

That insofar as the records of this office are concerned, the said WSP USA Inc. is in good standing at this time.

Given under my hand and seal of office
the 30th day of June, 2022

A handwritten signature in black ink that reads "Michael Watson".

Certificate Number: CN22142653

Verify this certificate online at <http://corp.sos.ms.gov/corpcnv/verifycertificate.aspx>



June 30, 2022

Chief, Environmental Permits Division
Mississippi Department of Environmental Quality
Office of Pollution Control
Post Office Box 2261
Jackson, Mississippi 39225

WSP USA Inc.
P. O. Box 1278
Madison, MS 39130
+1 (601) 853-2134
www.wsp.com

Re: Letter of Instruction for Re-Coverage
Coverage Numbers
MSG120247 - Jr. Food Mart #72
MSG120261 - Dodge's Store #683
MSG120152 - Queen City Truck Stop

RECEIVED
JUL 05 2022
Dept. of Environmental Quality

Dear Sir/Madam:

WSP USA Inc. (WSP) has enclosed the Re-coverage Forms for the following Underground Storage Tank, Groundwater Remediation, General Permits:

- MSG120247 - Jr. Food Mart #72, 100 South Fir Avenue, Collins, MS;
- MSG120261 - Dodge's Store #683, 4267 Highway 82 West, Leland, MS; and
- MSG120152 - Queen City Truck Stop, 5502 North Frontage Road, Meridian, MS.

If you have questions or need additional information, please contact Roy Hill at (601) 853-2134.

Sincerely,
WSP USA Inc.

Roy Hill, RPG
Senior Lead Consultant

Nonie McKnight
Local Business Line Leader

Attachment: Re-Coverage Forms