HYDROSTATIC TEST NOTICE OF INTENT (HTNOI)

FOR COVERAGE UNDER MISSISSIPPI'S HYDROSTATIC TEST GENERAL PERMIT GENERAL PERMIT MSG13

(Number to be assigned by MDEQ)

INSTRUCTIONS

The Hydrostatic Test Notice of Intent (HTNOI) is for coverage under the Hydrostatic Test General Permit to discharge hydrostatic test water. Applicant must be the owner or operator. The coverage recipient is responsible for compliance with the conditions of the general permit.

Completed HTNOIs should be filed at least thirty (30) days prior to the commencement of regulated activity. <u>Discharge of hydrostatic test</u> water without written notification of coverage is a violation of state law.

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

IF REGULATED LAND DISTURBING ACTIVITIES ARE TO OCCUR, LIST ACRES DISTURBED: NOTE: If disturbing five (5) acres or more, a stormwater construction coverage is required.

A USGS quadrangle map or copy is a required submittal. The map shall extend at least one-half of a mile beyond the facility/ project property boundary. In the case of linear pipeline projects the map shall extend at least one-half of a mile beyond the pipeline right-of-way. The site location and outfalls must be outlined and labeled. Quad maps can be obtained from the Office of Geology (601-961-5523). If a copy is submitted, provide the name of the quadrangle map that is found in upper right hand corner.

Additional submittals may include the following:

- Labeled site drawing noting the outfall(s) associated with hydrostatic test water discharge(s)
- · List of chemical Additives,
- Appropriate Section 404 documentation from U.S. Army Corps of Engineers, or
- Written authorization from the MDEQ, Office of Land and Water, if water withdrawal from for the testing. For information call the Office of Land and Water at 601/961-5202

ALL REQUESTED INFORMATION MUST BE PROVIDED (Answer "NA" if not applicable)

APPLICANT IS THE:	OWNER	OPERATOR	(Must c	check one or both)	
	OWN	VER INFORMATION			
OWNER CONTACT NAME &	POSITION: Cal	e LeBlanc			
OWNER EMAIL ADDRESS:			om		
OWNER COMPANY NAME:	Gulf South Pi	peline Company	, LLC		
OWNER STREET (P.O. BOX)	g Greenway	Plaza, Suite 28	00	e	
OWNER CITY: Houston		s	TATE: TX	ZIP: 77046	
OWNER PHONE # (INCLUDE	E AREA CODE): (7	13) 479-8080			

OPERATOR INFORMATI	ON						
OPERATOR CONTACT NAME & POSITION: Cale LeBlan	С						
OPERATOR EMAIL: Kelsey.Gocke@bwpipelines.com							
OPERATOR COMPANY: Gulf South Pipeline Company	v. LLC						
OPERATOR COMPANT: 9 Greenway Plaza, Sui							
OPERATOR CITY: Houston	_{STATE} : TX _{ZIP} : 77046						
OPERATOR PHONE # (INCLUDE AREA CODE): (713) 479-80	180						
FACILITY/PROJECT INFORM	IATION						
FACILITY/PROJECT NAME: Index 130 Hydro 1 Pro	oject						
PIPELINE, STORAGE TANK OR FLOWLINE BEING TESTED IS:	☐ NEW ■ USED						
IF USED, LIST PRIOR MATERIAL SERVICE OF EQUIPMENT: Na	atural gas						
PHYSICAL SITE ADDRESS (If not available, indicate nearest named ro							
STREET: Eagle Post Road	CITY: Florence						
COUNTY: Rankin County							
Facility site tribal land ID (NA if not applicable) N/A							
TYPE OF TREATMENT (IF PROVIDED):							
SIC Code 4922 NAICS Code 221210							
I certify under penalty of law that this document and all attachments were prepared system designed to assure that qualified personnel properly gathered and evaluated person or persons who manage the system, or those persons directly responsible for the best of my knowledge and belief, true, accurate and complete. I am aware that the information, including the possibility of fines and/or imprisonment for knowing violation.	the information submitted. Based on my inquiry of the gathering the information, the information submitted is, to here are significant penalties for submitting false						
Cale L'Islanc	9/2/2022						
Signature ¹ (Must be signed by operator when different than owner)	Date Signed						
Cale LeBlanc	Director Environmental, New Projects						
Printed Name	Title						
 ¹This application shall be signed according to ACT6, T-17 of the General Po 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 of 							

MS Dept of Environmental Quality, Office of Pollution Control

HTNOI forms must be submitted to: Chief, Environmental Permits Division

P.O. Box 2261

Jackson, Mississippi 39225

Revised: 03-15-17

OUTFALL INFORMATION

(To be submitted with HTNOI and Major Modification Forms)

INSTRUCTIONS:

- 1. For each outfall, complete the information in the table below (NOTE: Complete the last column of this form, only if it is being submitted with a Major Modification Form).
- 2. All outfalls must be spotted and labeled on a USGS quadrangle map.

OUTALL	LATITUDE ¹	LONGITUDE 1	SOURCE OF	NEAREST RECEIVING STREAM ²						STATUS OF			
					ON MDEQ 303(D) LIST? 3		HAS TMDL? ³		EST. TOTAL DISCHARGE	TANK, PIPELINE, FLOWLINE ETC.		EXPECTED TEST DATE(S)	INDICATE WHETHER OUTFALL IS NEW OF
NO.	(deg/min/sec)	(deg/min/sec)	FILL WATER	NAME	Yes	No	Yes	No	(MIL GAL)	New	Used	(mm/dd/yr)	EXISTING
001	32.140150°	-90.119369°	Municipal	Unnamed Tributary of Mountain Creek		√		√	151,000		Χ	9/25/2022	New
002													
003													
004													
005													
006													
007													
008													
009													
010													
011													
012												a.	

Revised: 03/15/17

NOTE: To Comply with EPA's NPDES e-Reporting rule, MDEQ has implemented the use of U.S.EPA's NetDMR for the submittal of DMRs. Permittees required to submit DMRs must submit DMRs electronically using NetDMR. A training video and additional info can be found at http://bit.ly/2gao6sW. For additional information about NetDMR, please send an email to netdmrhelp@mdeq.ms.gov or contact Annette Brocks at 601-961-5252

¹ List the latitude and longitude of its location to the nearest 15 seconds.

² Name of the nearest named receiving stream as listed on a USGS Quad Map.

³ MDEQ's 303(d) List of Impaired Water Bodies and approved TMDLs can be found at: http://www.deq.state.ms.us/MDEQ.nsf/page/TWB_Total_Maximum_Daily_Load_Section