MSR10	8	8	4	3	

(NUMBER TO BE ASSIGNED BY STATE)

APPLICANT IS THE:	ER PRIME CONTRACTOR			
OWNER	R CONTACT INFORMATION			
OWNER CONTACT PERSON: Deirdre Salo	ois			
OWNER COMPANY LEGAL NAME: Madiso	on Grandview Land LLC			
OWNER STREET OR P.O. BOX: 6190 Cocl	hran Rd - Suite A			
OWNER CITY: Solon	STATE: OH	ZIP: 44	zip: <u>44139</u>	
OWNER PHONE #: (440) 914-9000	STATE: OH ZIP: 44139 OWNER EMAIL: dsalois@carnegiecos.com			
	ACTOR CONTACT INFORMATION			
PRIME CONTRACTOR CONTACT PERSON:	: TBD			
PRIME CONTRACTOR COMPANY LEGAL				
PRIME CONTRACTOR STREET OR P.O. BO	OX:			
PRIME CONTRACTOR CITY:				
PRIME CONTRACTOR PHONE #: ()	PRIME CONTRACTOR EMAIL:			
FACIL	LITY SITE INFORMATION			
FACILITY SITE NAME: The Avenue at Grandv	view			
FACILITY SITE ADDRESS (If the physical addrindicate the beginning of the project and identify all	ll counties the project traverses.)			
STREET: Grandview Boulevard (Northea	ast Corner of the Intersection of Grandviev MSCOUNTY: Madison	w Boulevard and Ma	39110	
FACILITY SITE TRIBAL LAND ID (N/A If no			·	
LATITUDE: 32 degrees 27 minutes 35 see LAT & LONG DATA SOURCE (GPS (Please GPS) TOTAL ACREAGE THAT WILL BE DISTURED	conds LONGITUDE: 90 degrees 08 Project Entrance/Start Point) or Map Interpolation):			
IS THIS PART OF A LARGER COMMON PLA	AN OF DEVELOPMENT?	YES 🗆	NO 🗷	
IF YES, NAME OF LARGER COMMON PLAN AND PERMIT COVERAGE NUMBER: I	N OF DEVELOPMENT: MSR10			
ESTIMATED CONSTRUCTION PROJECT ST	TART DATE:	2022-11-25 <u>YYYY-MM-DE</u>		
ESTIMATED CONSTRUCTION PROJECT EN	ND DATE:	2023-07-25 YYYY-MM-DE		
DESCRIPTION OF CONSTRUCTION ACTIV	TITY: Construction of Roadway and Utilities	s to support future de	evelopment.	
PROPOSED DESCRIPTION OF PROPERTY US	USE AFTER CONSTRUCTION HAS BEE			
SIC Code NAICS Code				

NEAREST NAMED RECEIVING STREAM: Brashear 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 MDI http://www.deq.state.ms.us/MDEQ.nsf/page/TWB_Total_Maximum_Daily_Load_Section)	YES□ EQ's web site:	NO☑		
HAS A TMDL BEEN ESTABLISHED FOR THE RECEIVING STREAM SEGMENT?	YES□	\mathbf{NO}		
ARE THERE RECREATIONAL STREAMS, PRIVATE/PUBLIC PONDS OR LAKES WITHIN ½ MILE DOWNSTREAM OF PROJECT BOUNDRY THAT MAY BE IMPACTED B ACTIVITY?	YES□ Y THE CONST	NO ☑ TRUCTION		
EXISTING DATA DESCRIBING THE SOIL (for linear projects please describe in SWPPP): Clays, Silts & Sands				
WILL FLOCCULANTS BE USED TO TREAT TURBIDITY IN STORM WATER?	YES□	NO		
IF YES, INDICATE THE TYPE OF FLOCCULANT. ANIONIC POLYACRYLIM OTHER				
IF YES, DOES THE SWPPP DESCRIBE THE METHOD OF INTRODUCTION, THE LOCAT AND THE LOCATION OF WHERE FLOCCULATED MATERIAL WILL SETTLE?	ION OF INTRO YES □	DDUCTION NO 🗹		

 $^{^{1}}$ Acreage for subdivision development includes areas disturbed by construction of roads, utilities and drainage. Additionally, a housesite of at least 10,000 ft² per lot (entire lot, if smaller) shall be included in calculating acreage disturbed.

DOCUMENTATION OF COMPLIANCE WITH OTHER REGULATIONS/REQUIREMENTS COVERAGE UNDER THIS PERMIT WILL NOT BE GRANTED UNTIL ALL OTHER REQUIRED MDEQ PERMITS AND APPROVALS ARE SATISFACTORILY ADDRESSED

IS LC	CNOI FOR A FACILITY THAT WILL REQUIRE OTHER PERMITS?		YES 🗆	NO 🗹	
IF YE	ES, CHECK ALL THAT APPLY: AIR HAZARDOUS WASTE		PRETREATME	NT	
	□ WATER STATE OPERATING □ INDIVIDUAL NPDES		OTHER:		
	IE PROJECT REROUTING, FILLING OR CROSSING A WATER CONVEYAN NY KIND? (If yes, contact the U.S. Army Corps of Engineers' Regulatory Branch		YES □ rmitting requiren	NO ☑ nents.)	
	HE PROJECT REQUIRES A CORPS OF ENGINEER SECTION 404 PERMIT, P. UMENTATION THAT:	ROVII	DE APPROPRIA	TE	
•	The project has been approved by individual permit, or				
•	The work will be covered by a nationwide permit and NO NOTIFICATION to the	Corps	s is required, or		
•	The work will be covered by a nationwide or general permit and NOTIFICATION	V to the	e Corps is require	ed	
	LAKE REQUIRING THE CONSTRUCTION OF A DAM BEING PROPOSED? s, provide appropriate approval documentation from MDEQ Office of Land and W	⁄ater, I	YES □ Dam Safety.)	NO 🗹	
	IF THE PROJECT IS A SUBDIVISION OR A COMMERCIAL DEVELOPMENT, HOW WILL SANITARY SEWAGE BE DISPOSED? Check one of the following and attach the pertinent documents.				
	Existing Municipal or Commercial System. Please attach plans and specifications associated "Information Regarding Proposed Wastewater Projects" form or appropriate the plans of LCNOI submittal, MDEQ will accept written acknowledgement from official(s) collection and treatment that the flows generated from the proposed project can a properly. The letter must include the estimated flow.	oval fro tions c respo	om County Utility an not be provide nsible for wastew	Authority in ed at the time ater	
	Collection and Treatment System will be Constructed. Please attach a copy of the permit from MDEQ or indicate the date the application was submitted to MDEQ	cover ((Date:	of the NPDES dis	charge)	
	☐ Individual Onsite Wastewater Disposal Systems for Subdivisions Less than 35 Lots. Please attach a copy of the Letter of General Acceptance from the Mississippi State Department of Health or certification from a registered professional engineer that the platted lots should support individual onsite wastewater disposal systems.				
	Individual Onsite Wastewater Disposal Systems for Subdivisions Greater than 35 feasibility of installing a central sewage collection and treatment system must be n response from MDEQ concerning the feasibility study must be attached. If a cent is not feasible, then please attach a copy of the Letter of General Acceptance from certification from a registered professional engineer that the platted lots should su disposal systems.	nade by ral coll the St	y MDEQ. A copy lection and waste ate Department o	of the water system f Health or	
INDI	CATE ANY LOCAL STORM WATER ORDINANCE WITH WHICH THE PROJ	JECT I	MUST COMPLY	:	
City o	f Madison				

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 of Applicant¹ (owner or prime contractor)

70/26/22 Date Signed

Deirdre Salvis

Director Property Management & Construction

Title

Printed Name1

¹This application shall be signed 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

Please submit the LCNOI form to:

Chief, Environmental Permits Division

MS Department of Environmental Quality, Office of Pollution Control

P.O. Box 2261

Jackson, Mississippi 39225