AI: 85531



RECEIVED NOV 3 0 2023

INDUSTRIAL STORMWATER NOTICE OF INTENT (ISNOI)

FOR COVERAGE UNDER THE INDUSTRIAL STORMWATER GENERAL NPDES PERMIT MSR00 2523

(NUMBER TO BE ASSIGNED BY STATE)

INSTRUCTIONS

Applicant must be the owner or operator (i.e., legal entity that controls the facility's operation, or the plant/site manager, not the environmental consultant). The owner or operator that receives coverage is responsible for permit compliance. File at least 60 days prior to the commencement of the regulated industrial activity.

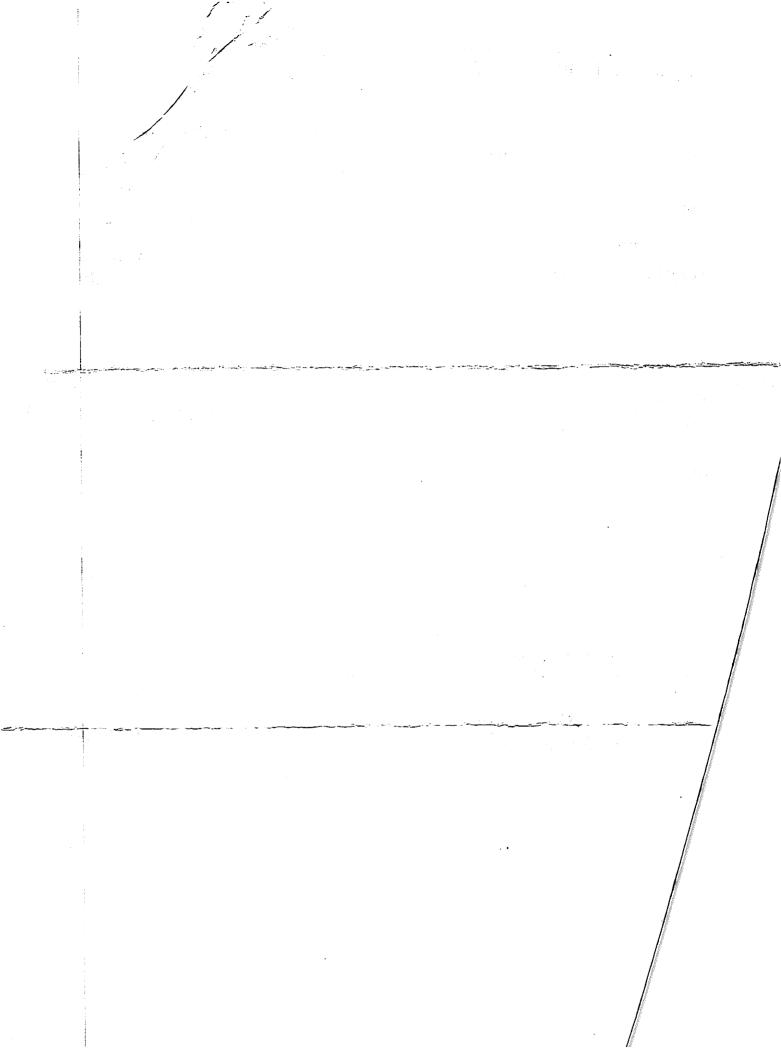
Submittals with this ISNOI must include a Storm Water Pollution Prevention Plan (SWPPP) with the minimum components found in ACTs 5-8 of the Industrial Stormwater General Permit. In addition, a United States Geological Survey (USGS) quadrangle map (or a copy) showing site location and extending at least 1/2 mile beyond the site's property boundary is required. If a copy is submitted, provide the name of the quadrangle map that is found in the upper right hand corner. Maps can be obtained from the MDEO, Office of Geology at 601-961-5523.

ALL FORM BLANKS MUST BE COMPLETED (enter "NA" if not applicable)

THE APPLICANT IS: OWNER OPERATOR (PLE	ASE CHECK ONE OR BOTH)
OWNER INFORMATION	- In the second
Owner Contact Name:	Position:
Owner Company Name:	
Owner Street (P.O. Box):	
Owner City: State:	Zip:
Owner Phone Number: () Owner Email:	
OPERATOR INFORMATION (if different th	an owner)
Operator Contact Name: William Dougherty	Position: Plant Manager
Operator Company Name: Advanced Drainage Systems	
Operator Street (P.O. Box): 205 Apache Dr	1 , 1989)
Operator City: Byram State: MS	_{Zip:} 39272
	dougherty@adspipe.com

FACILITY INFORMATION

Facility Name: Advanced Drainage Sy	stems, Inc.	
Nature of Business (Include 4-digit Standard Industri	al Classification Code (SIC) and description	n):
Receiving Stream: Big Creek		
Is receiving stream on MDEQ's 303(d) List?		Yes 🗌 No
Has a TMDL been established for the receiving stream	segment?	Yes 🔳 No
Physical Site Address:		
Street: 205 Apache Drive	City: Jackson	
County: Hinds		
Latitude: 32 degrees minutes 45 seconds		
Method Used to Determine Lat & Long (GPS of plant entran	nce) or Map Interpolation):	
Attach a copy of any existing laboratory data for each serformed, provide a summary for each parameter, in ximum values.	storm water outfall. If multiple sampling heluding sampling dates and the minimum, a	as been verage and
SARA Title III, Section 313 facility utilizing water ase attach a list of water priority chemicals pres]Yes ■No



DOCUMENTATION OF COMPLIANCE WITH OTHER REGULATIONS/REQUIREMENTS

Is this notice for a facility that will require other permits?	■ No t, □ Water State Operating,		
How will sanitary sewage be collected and treated?			
Indicate any local storm water ordinance with which the facility must con approval. SWPP	nply and submit any documentation of		
Is treatment of storm water provided at any outfall? Yes If yes, please describe:	■ No		
CERTIFICATION			
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 ¹ (Must be signed by operator when different than owner)	11/27/2023 Date Signed		
William Dougherty Printed Name ¹	Plant Manager		

¹This application shall be signed according to the General Permit, ACT 16, T-9, as follows:

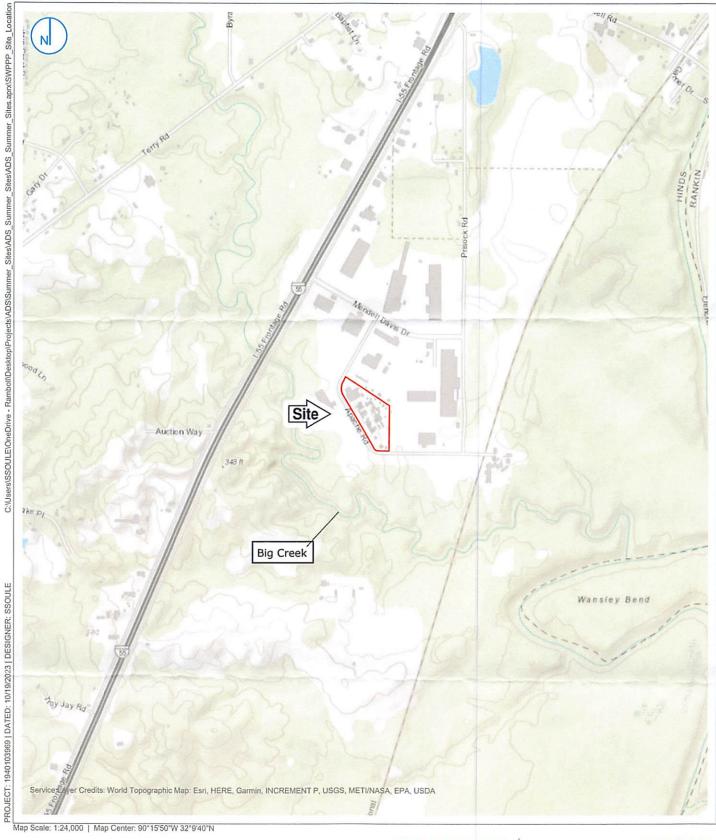
- For a corporation, by a responsible corporate officer.
- For a partnership, by a general partner.
- For a sole proprietorship, by the proprietor.
- For a municipal, state or other public facility, by principal executive officer, the mayor, or ranking elected official.

After signing please mail to:

Chief, Environmental Permits Division

MS Department of Environmental Quality, Office of Pollution Control

P.O. Box 2261 Jackson, MS 39225





1,000 2,000 _ Feet

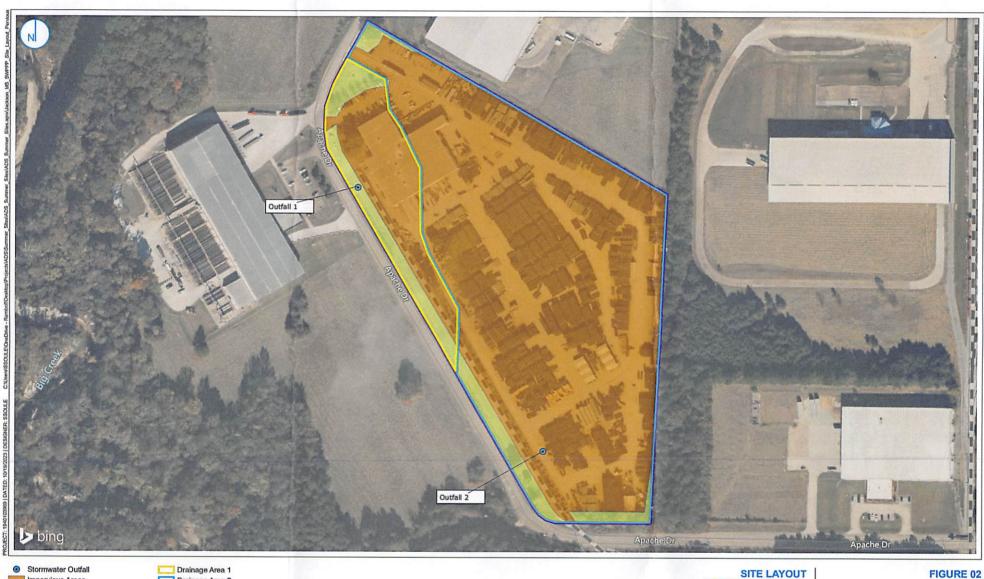
SITE LOCATION

ADS Jackson 205 Apache Dr Jackson, Mississippi 39272

FIGURE 01

RAMBOLL US CONSULTING, INC. A RAMBOLL COMPANY





Impervious Areas

Pervious Areas

Drainage Area 2

Site Boundary

SITE LAYOUT IMPERVIOUS / PERVIOUS

RAMBOLL US CONSULTING, INC.

ADS Jackson 205 Apache Dr Jackson, Mississippi 39272 RAMBOLL

