

June 13, 2024

Chief, Environmental Permits Division MS Dept of Environmental Quality, Office of Pollution Control P.O. Box 2261 Jackson, Mississippi 39225

Re: Bollinger Mississippi Repair, LLC AI ID #6653 Hydrostatic Test Notice of Intent (HTNOI) For Coverage Under General Permit MSG130000

Dear Sir/Ma'am:

Environmental Management Services, Inc (EMS) has been tasked with submitting the HTNOI permit application on behalf of Bollinger Mississippi Repair, LLC. Please find the enclosed application forms. Bollinger Mississippi Repair, LLC is registered with the Mississippi Secretary of State as a Limited Liability Corporation. Please find attached to this letter documentation of registration in the State of Mississippi. Bollinger Mississippi Repair, LLC is primarily engaged in the repairing of ships and other associated equipment.

Please Note: Hydrostatic test water discharge events may range from piping sections equaling 1,000 gallons to tanks equaling 5,000 gallons. Testing is primarily on new piping and tanks, although used piping and tanks may be tested occasionally on site. Existing outfalls on site correspond with the facility's active Industrial Stormwater General Permit (MSR001316). Discharges to begin approximately March 2025. No chemical additives will be used in hydrostatic test waters. Hydrostatic test water is supplied via the facility's municipal water supply (Jackson County Utility Authority). The segment of Bayou Casotte for which the facility is located is not included in the latest adopted 2024 303d list. Bayou Casotte segment 200312 is listed on the 2024 303d list, but is upstream from the facility. TMDLs for Bayou Casotte include a June 2002 report for Phenol and a March 2007 report for Un-Ionized Ammonia and Total Toxins.

If you have any questions, or need additional information, please contact me at (601) 992-8233, or email me at SUtroska@env-mgt.com.

Sincerely, Environmental Management Services, Inc.

Steven Utroska, P.E., RPG Senior Engineer

Enclosures 2024 MS SOS LLC Annual Report Hydrostatic Test Notice of Intent Figure 1 – USGS Quadrangle Map Figure 2 – Facility Diagram

# F0108 Fee: \$ 250



## 2024003683

Business ID: 1180571 Filed: 01/03/2024 02:29 PM Michael Watson Secretary of State

P.O. BOX 136 JACKSON, MS 39205-0136 TELEPHONE: (601) 359-1633

### 2024 LLC Annual Report

### **Business Information**

Business ID: 1180571 State of Incorporation: DE Phone: (\*\*\*)\*\*\*-\*\*\* FEIN: \*\*-\*\*\*\* Business Name: Bollinger Mississippi Repair, LLC Business Email: aimeel@bollingershipyards.com

*Principal Address:* 601 Bayou Casotte Parkway Pascagoula, MS 39581

#### **Registered Agent**

Name:CORPORATION SERVICE COMPANYAddress:109 Executive Drive, Suite 3<br/>Madison, MS 39110

#### **Managers and Members**

#### **Managers**

#### Name:

Dino Chouest Manager, Vice President

Benjamin G Bordelon Manager, President

#### Address:

8364 Hwy. 308 Lockport, LA 70374

8365 Hwy. 308 Lockport, LA 70374

#### **Officers**

Title/Name:	Address:	<b>Director:</b>
President: Benjamin G Bordelon	8365 Hwy. 308 Lockport, LA 70374	
Vice President: Dino Chouest	8364 Hwy. 308 Lockport, LA 70374	
Secretary: Andrew St Germain	8365 Hwy. 308 Lockport, LA 70374	
Treasurer: Andrew St Germain	8365 Hwy. 308 Lockport, LA 70374	

 $\Box$  This LLC has a written Operating Agreement.

#### **NAICS Code/Nature of Business**

336611 - Ship Building and Repairing

#### **Signature**

By entering my name in the space provided, I certify that I am authorized to file this document on behalf of this entity, have examined the document and, to the best of my knowledge and belief, it is true, correct and complete as of this day *01/03/2024*.

Name:Address:Rachael B Battaglia8365 Hwy. 308, P.O. Box 250OtherLockport, LA 70374



## HYDROSTATIC TEST NOTICE OF INTENT (HTNOI)

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

GENERAL PERMIT MSG13 0646

(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.

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 surface waters or ground waters is to be used 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)

<b>APPLICANT IS THE:</b>	OWNER	OPERATOR	(Must chec	k one or both)	
	OWN	NER INFORMATION			
OWNER CONTACT NAME	& position: <u>Miro</u>	Vukojevic, Enviror	nmental Com	pliance Coordinator	
OWNER EMAIL ADDRESS:	mirov@bolling	gershipyards.co	m		
OWNER COMPANY NAME: Bollinger Shipyards Lockport, LLC					
OWNER STREET (P.O. BOX	.): <u>P.O. Box 25</u>	0			
OWNER CITY: Lockpor			TATE: LA	70374	
<b>OWNER PHONE # (INCLUD</b>	DE AREA CODE): (9	85) 532-2554			

OPERATOR INFOR	
OPERATOR CONTACT NAME & POSITION: Miro Vukoje	vic, Environmental Compliance Coordinator
OPERATOR EMAIL: mirov@bollingershipyar	ds.com
OPERATOR COMPANY: Bollinger Mississippi Re	pair, LLC
OPERATOR STREET (P.O. BOX): P.O. BOX 250	
OPERATOR CITY: LOCKPORT	STATE, LA 70374
OPERATOR PHONE # (INCLUDE AREA CODE): $(985) 53$	2-2554
FACILITY/PROJECT IN	FORMATION
FACILITY/PROJECT NAME: Bollinger Mississippi I	Repair, LLC
PIPELINE, STORAGE TANK OR FLOWLINE BEING TESTED	IS: NEW USED
IF USED, LIST PRIOR MATERIAL SERVICE OF EQUIPMENT	Γ:
PHYSICAL SITE ADDRESS (If not available, indicate nearest nar	med road. Linear projects indicate beginning of project):
	CITY: Pascagoula
COUNTY: Jackson	<u>ZIP:</u> 39581
Facility site tribal land ID (NA if not applicable)	
TYPE OF TREATMENT (IF PROVIDED):	
SIC Code 3 7 3 1 NAICS Code 3 3 6 6 1 1	
I certify under penalty of law that this document and all attachments were pro- system designed to assure that qualified personnel properly gathered and eval person or persons who manage the system, or those persons directly responsib the best of my knowledge and belief, true, accurate and complete. I am aware information, including the possibility of fines and/or imprisonment for knowing	uated the information submitted. Based on my inquiry of the ole for gathering the information, the information submitted is, to that there are significant negatives for submitting false
Signature <sup>1</sup> (Must be signed by operator when different than owner)	Date Signed
Tim Martigez Printed Name	Date Signed <u>EVP</u> <u>Repair</u> <u>Divicion</u> Title

<sup>1</sup>This application shall be signed according to ACT6, T-17 of the General Permit, 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.

HTNOI forms must be submitted to: Chief, Environmental Permits Division MS Dept of Environmental Quality, Office of Pollution Control 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.

				NEAREST RECEIVING STREAM <sup>2</sup>					-	US OF			
OUTALL NO.	LATITUDE <sup>1</sup> (deg/min/sec)	LONGITUDE <sup>1</sup> (deg/min/sec)	SOURCE OF FILL WATER	NAME	ON M 303 LIS <sup>-</sup> Yes	(D)		AS DL? <sup>3</sup>	EST. TOTAL DISCHARGE (MIL GAL)	PIPE FLOV	NK, LINE, VLINE C. Used	EXPECTED TEST DATE(S) (mm/dd/yr)	INDICATE WHETHER OUTFALL IS NEW OF EXISTING
001	30°20'17.55"N	88°30'44.73"W		Bayou Casotte		$\checkmark$	$\checkmark$		0.005	X		03/01/2025	Existing
002	30°20'19.41"N	88°30'44.15"W	Jackson Co. Utility Authority	Bayou Casotte			$\checkmark$		0.005	х		03/01/2025	Existing
003	30°20'25.76"N	88°30'42.57"W	Jackson Co. Utility Authority	Bayou Casotte		$\checkmark$	$\checkmark$		0.005	х		03/01/2025	Existing
004	30°20'27.70"N	88°30'41.98"W	Jackson Co. Utility Authority	Bayou Casotte		$\checkmark$	$\checkmark$		0.005	х		03/01/2025	Existing
005	30°20'30.44"N	88°30'41.21"W	Jackson Co. Utility Authority	Bayou Casotte		$\checkmark$	$\checkmark$		0.005	х		03/01/2025	Existing
006	30°20'34.29"N	88°30'40.11"W	Jackson Co. Utility Authority	Bayou Casotte		$\checkmark$	$\checkmark$		0.005	х		03/01/2025	Existing
007	30°20'35.40"N	88°30'39.77"W	Jackson Co. Utility Authority	Bayou Casotte		$\checkmark$	$\checkmark$		0.005	х		03/01/2025	Existing
008	30°20'13.92"N	88°30'50.79"W	Jackson Co. Utility Authority	Bayou Casotte		$\checkmark$	$\checkmark$		0.005	х		03/01/2025	Existing
009	30°20'27.41"N	88°30'58.17"W	Jackson Co. Utility Authority	Bayou Casotte		$\checkmark$	$\checkmark$		0.005	х		03/01/2025	Existing
010	30°20'37.59"N	88°30'38.71"W	Jackson Co. Utility Authority	Bayou Casotte		$\checkmark$	$\checkmark$		0.005	х		03/01/2025	Existing
011	30°20'38.63"N	88°30'35.79"W	Jackson Co. Utility Authority	Bayou Casotte		$\checkmark$	$\checkmark$		0.005	х		03/01/2025	Existing
012													1 02/15/17

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 <u>http://bit.ly/2gao6sW</u>. For additional information about NetDMR, please send an email to <u>netdmrhelp@mdeq.ms.gov</u> or contact Annette Brocks at 601-961-5252

<sup>&</sup>lt;sup>1</sup> List the latitude and longitude of its location to the nearest 15 seconds.

<sup>&</sup>lt;sup>2</sup> Name of the nearest named receiving stream as listed on a USGS Quad Map.

<sup>&</sup>lt;sup>3</sup> 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



REFERENCE: U.S.G.S TOPOGRAPHIC MAP 1996 PASCAGOULA SOUTH, MS 7.5 MINUTE SERIES HYDROSTATIC TEST NOTICE OF INTENT BOLLINGER MISSISSIPPI REPAIR, LLC PASCAGOULA, MS DATE: 06/11/2024 APPROVED BY: SGU SCALE: NOT TO SCALE CAD NO. BOL2-24-001 ENVIRONMENTAL FIGURE

MANAGEMENT SERVICES, INC.



Area Name				
Fuel Tank Storage Station				
Maintenance Shop				
Hazardous Waste Storage				
Dry Dock				
Slop Oil Tank				



400 esri

Dwg. No.:

20515

Figure 2

Imagery: Vivid Maxar 9/11/2021, ESRI