

Mississippi Department of Environmental Quality

Office of Pollution Control – Environmental Permits Division POST OFFICE BOX 10385 • JACKSON, MS 39289-9385

TEL: (601) 961-5171 • FAX: (601) 354-6612 www.deg.state.ms.us

AI 19084

NOTICE OF INTENT (NOI) FOR COVERAGE UNDER

DRY LITTER POULTRY CONCENTRATED ANIMAL FEEDING OPERATIONS

GENERAL NPDES PERMIT NUMBER MSG150359

(Number to be assigned by State)

INSTRUCTIONS

APPLICANT MUST BE THE OWNER AND/OR OPERATOR OF THE PROPERTY ASSOCIATED WITH THE REGULATED ACTIVITY. ALL SUBMITTALS MUST INCLUDE THE FOLLOWING:

- A NUTRIENT MANAGEMENT PLAN
- A USGS QUAD MAP OR A COPY SHOWING THE SITE LOCATION
- A SITE DRAWING
- A STORM WATER POLLUTION PREVENTION PLAN (SWPPP), IF THERE IS TO BE CONSTRUCTION WORK TOTALING ONE ACRE OR MORE.

USGS QUAD MAPS SUBMITTED MUST EXTEND AT LEAST ONE MILE BEYOND THE PROPERTY BOUNDARIES OF THE FACILITY AND MUST CLEARLY SHOW ALL SPRINGS AND SURFACE WATER BODIES IN THE AREA. PLUS ALL DRINKING WATER WELLS WITHIN 1/4 MILE OF THE FACILITY. ADDITIONALLY, ALL PUBLIC DRINKING WELLS WITHIN ONE MILE OF THE FACILITY MUST BE IDENTIFIED.

THE SITE DRAWING MUST SHOW THE PROPERTY BOUNDARIES AND MUST INDICATE THE APPROXIMATE LOCATION OF EACH EXISTING AND PROPOSED STRUCTURE (HOUSE, INCINERATOR, DEAD BOX, LAND APPLICATION FIELD, COMPOSTING AREA, ETC). THE SITE DRAWING MUST INCLUDE A COMPASS DIRECTION HEADER.

SUBMIT AT LEAST 180 DAYS PRIOR TO COMMENCEMENT OF CONSTRUCTION OR PLANNED OPERATIONS. ALL FORMS MUST BE SUBMITTED TO: CHIEF, ENVIRONMENTAL PERMITS DIVISION, MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY, P.O. BOX 10385, JACKSON, MISSISSIPPI 39289-0385.

ALL QUESTIONS MUST BE ANSWERED. FOR THIS APPLICATION TO BE CONSIDERED, ALL QUESTIONS ON THIS FORM MUST BE ANSWERED. IF AN ITEM DOES NOT APPLY, ENTER "NA" (NOT APPLICABLE) TO SHOW THAT YOU CONSIDERED THE QUESTION.

I. GENERAL INFORMATION:

CONTACT AND FACILITY INFORMATION Name of Owner: Tames Strickland James Strickland Poultry Facility Name: Mailing Address: Street or P.O. Box: 2997 Sulpher Springs Rd. City: Cone hatta State: MS Zip: 39057 Physical Site Address: (If the physical address is not available indicate the nearest named road or intersection.) Street (can not be a P.O. Box) _ Same as above City: _____ State: ____ Zip: ____ County: Newton Latitude (degrees/min/sec): N 32.51965° Longitude (degrees/min/sec): WO89. 31569° Nearest named receiving stream: Boque Faliah (601) 625 - 8862 Facility Telephone No. (Include Area Code): Facility Fax No. (Include Area Code): Facility Cell Phone No. (Include Area Code): (601) 774-9231 Other Contact Phone Numbers (Include Area Code): TUBES OF ACTIVITY

THES OF ACTIVITY	
Check all that apply:	
New dry litter poultry operation	
Proposed dry litter poultry operation	
Construction and/or operation of an incinerator	
New or expanding operations that will require construction activities disturbing one acre or more	

II. CONCENTRATED POULTRY FEEDING OPERATION CHARACTERISTICS:

TYPE AND AMOUNT OF CHICKENS Check all that apply and indicate the amounts Boilers (SIC 0251): Layers (SIC 0252): TOTAL AMOUNT: Housed under roof Open confinement TYPES OF DRY LITTER CONTAINMENT,	Check any of the following to control runoff and pro Buffers Setbacks Conservation till Constructed weel Infiltration field Grass filter Terrace STORAGE, AND CAPACT	lage
Check all that apply and indicate total days of storage and t		
Type of Storage 40' x 80'	Total Number of Days	Total Capacity (tons)
Roofed Storage Shed to be built.	180	312
Concrete Pad		
☐ Impervious Soil Pad		
Other: Specify		
Are all poultry houses, that have been constructed all occupied dwellings or commercial establishme all adjoining property lines? Yes Are all incinerators at least 150 feet from the near light commercial buildings not owned by the application of these questions wavier must be completed by all affected property Notary Public. A copy of the Dry Litter Buffer Zohttp://www.deq.state.ms.us/MDEQ.nsf/page/epd or call (601) 961-5171.	ents not owned by the applicant No, attach wavier est residential or recreational icant? Yes // A then attach a completed Poult owners and notarized by a Sone Waiver can be found at	area, all dwellings, and all No, attach wavier ry Buffer Zone Waiver. The tate of Mississippi appointed
Is this facility a contract operation? Yes	☐ No	
If yes, what is the name and address of the integral	tor?	
Name: Peco Foods	Address: Sebostopol, M	S

Attach an USGS quad map or copy that extends at least one mile beyond the property boundaries of the facility and clearly show all springs and surface water bodies in the area, plus all drinking water wells within ¼ mile of the facility. Additionally, all public drinking wells within one mile of the facility must be identified. Quad maps can be obtained from MDEQ Office of Geology at (601) 961-5523.
Attach a site drawing showing the property boundaries and must indicate the approximate location of each existing and proposed structure (house, incinerator, dead box, land application field, composting area, etc). The site drawing must include a compass direction header.
NUTRIENT MANAGEMENT PLAN Answer the following
Has a nutrient management plan been developed? ☑ Yes □ No
If yes, when was the nutrient management plan submitted? Date: 5/19/04
If no, when will the nutrient management plan be developed? Date:
Is a nutrient management plan already being implemented for the facility?
The date of the last revision of the nutrient management plan. Date: 4/5/06 - 2 house addition
What is the estimated amount of litter generated per year?
Total acreage needed for land application: 48ac./cake 500 - Cake
Total acreage available for land application: 53.9
Will a third party remove litter off site? ☐ Yes ☒ No
If yes, how much litter will be transferred to other persons per year? tons/year
If not land applying, describe alternative use(s) of the litter:

ATTACHMENTS

III. CONSTRUCTION AND/OR OPERATION OF A POULTRY MORTALITY INCINERATOR

Check this box if this section does not apply

NOTE: Coverage for construction and/or operation of poultry mortality incinerators is for incinerators that have previously submitted approved stack test. For a list of incinerators that have approved stack tests on file please visit http://www.deq.state.ms.us/MDEQ.nsf/page/epd_AgriculturalBranchEPD?OpenDocument-or-call (601) 961-5171.

Carcasses generated at facilities other than the one identified in this NOI are not permitted for incineration under this coverage. Only chicken carcasses generated on site are permitted for incineration. All other materials such as leaves, trash, and construction debris, are strictly forbidden.

MANUFACTURER'S INFORMATION	ON TY	TYPE OF INCINERATOR	
Manufacturer Name: Sing		Single chamber	
Model Number:		☐ Multiple chamber	
Capacity (tons/hour):		Other, describe	
Total number of incinerators on site:			
where installed on site in degrees, minut	tes, and seconds. Latitude: Latitude: Latitude:	Longitude: Longitude: Longitude: Longitude: Longitude: Longitude: Longitude: Longitude:	
where installed on site in degrees, minut Date(s):	tes, and seconds. Latitude: Latitude: Latitude: Latitude:	Longitude: Longitude: Longitude: Longitude: Longitude:	
where installed on site in degrees, minut Date(s): FUEL TYPE AND INCINERATOR 7	tes, and seconds. Latitude: Latitude: Latitude: Latitude: Latitude:	Longitude: Longitude: Longitude: Longitude: Longitude:	

Corps of Engineer Section 404 Permit, provide a has been approved.	appropriate documentation from the Corps that the project
Indicate any local storm water ordinance with widocumentation of approval.	hich the project must comply and submit any
PROJECT INFORMATION	
Total acreages that will be disturbed: 2.5	5
Description of the construction activity:	construct (2) 44' x 500' Broiler
	ng ramps, gravel roads, è drainage
Nearest named receiving stream: Boque F	Faliah
Are there recreational streams, private/public por that may be impacted by the construction activity	nds or lakes within ½ mile downstream of project boundary? Yes No
Soil Characteristics: Shubuta Clay Loam	soil gently to strongly sloping, with poor moisture relations.
	Plan (SWPPP) that includes the minimum components through 43 of the Multimedia General Pollution Control

Permit to Construct/Operate Air Emission Equipment and/or Manage Manure and Discharge Storm

Water in Accordance with the National Pollution Discharge Elimination System.

IV. CONSTRUCTION ACTIVITIES DISTURBING ONE ACRE OR MORE

NOTE: If the project is rerouting, filling, or crossing a water conveyance of any kind, contact the U.S. Army Corps of Engineers regulatory branch for possible permitting requirements. If the project requires a

Check this box if this section does not apply

V. CERTIFICATION

Note: This application shall be signed according to the General Permit, page 3, as follows:

- · For a corporation, by a responsible corporate officer.
- · For a partnership, by a general partner.
- · For a sole proprietorship, by the proprietor.

I certify that to the best of my knowledge and belief formed after reasonable inquiry, the statements and information in this application are true, complete, and accurate, and that as a responsible official, my signature shall constitute an agreement that the applicant assumes the responsibility for any alteration, additions, or changes in operation that may be necessary to achieve and maintain compliance with all applicable Rules and Regulations. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Signature of Responsible Official

Date

Title

Customer(s): JAMIE STRICKLAND

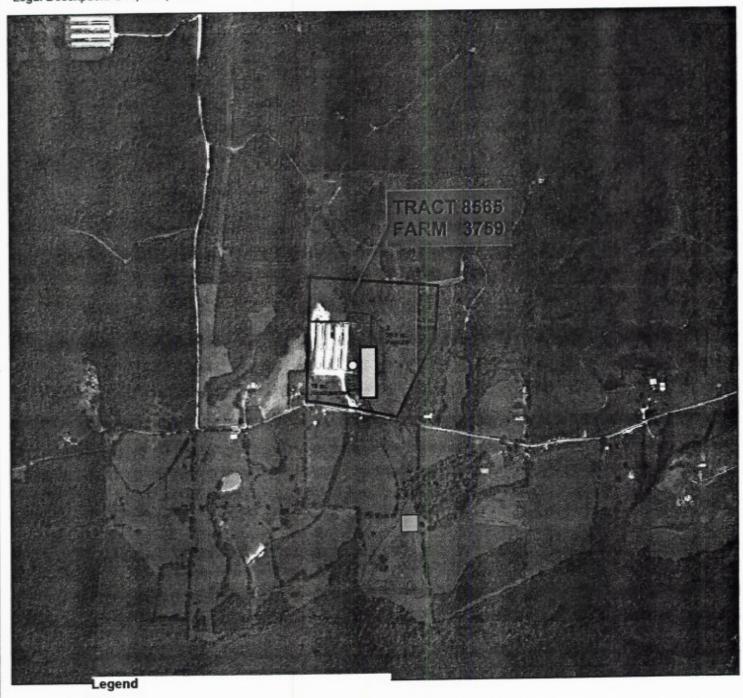
District: NEWTON COUNTY SOIL & WATER CONSERVATION DISTRICT

Field Office: DECATUR SERVICE CENTER

Agency: NRCS

Assisted By: Kenneth D Crosby State and County: MS, NEWTON

Legal Description: S19, T8N, R10E



■ Tract Boundaries

Proposed Site for 2 - 44' x 500' Broiler Houses

Field Boundaries

CNMP SITE PLAN T8565

nublic wells

public wells

O Composter Image: naip_1-1_2n_s_ms101_2005_1.sid 610 0 610 1,220 1,830 2,440 Feet



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