AI#35269 GnP20010001



### Mississippi Department of Environmental Quality

Office of Pollution Control – Environmental Permits Division POST OFFICE BOX 10385 • JACKSON, MS 39289-0385 TEL: (601) 961-5171 • FAX: (601) 354-6612

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# NOTICE OF INTENT (NOI) FOR COVERAGE UNDER DRY LITTER POULTRY CONCENTRATED ANIMAL FEEDING OPERATIONS GENERAL NPDES PERMIT NUMBER MSG15 少41 了

(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 ¼ 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 "N/A" (NOT APPLICABLE) TO SHOW THAT YOU CONSIDERED THE QUESTION.

### · I. GENERAL INFORMATION:

### CONTACT AND FACILITY INFORMATION

Name of Owner: Steven Dickerson		
Facility Name: Steven Dickerson		
Mailing Address:  Street or P.O. Box: 1576 Township Rd.		
City: Laurel	State: MS	Zip: 39443
Physical Site Address: (If the physical address is not avintersection.)  Street (can not be a P.O. Box)  Next to 56 Old Cult		rest named road or
City: Laurel		Zip: 39443
County: Jones	_	
Latitude (degrees/min/sec): N 31 36 36.99		
Longitude (degrees/min/sec): W 88 58 18.64		
Nearest named receiving stream: Tiger Creek		
Facility Telephone No. (Include Area Code):	601-426-2472	
Facility Fax No. (Include Area Code):		
Facility Cell Phone No. (Include Area Code):		
Other Contact Phone Numbers (Include Area Code):		
TYPES OF A	CTIVITY	
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 const	ruction activities distur	bing 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): 125000  Layers (SIC 0252): 170TAL AMOUNT: 179ES OF DRY LITTER CONTAINMENT Check all that apply and indicate total days of storage and the stora	Check any of the follow to control runoff and provided by the control runoff and provided by the constructed well and the constructed well and the constructed well and the constructed well are constructed well and the constructed well are constructed well and the constru	illage etland d
Type of Storage	Total Number of Days	Total Capacity (tons)
✓ Roofed Storage Shed		
Concrete Pad		
☐ Impervious Soil Pad	90	1224
Other: Specify	_	
Are all poultry houses, that have been construall occupied dwellings or commercial establisall adjoining property lines? Yes  Are all incinerators at least 150 feet from the relight commercial buildings not owned by the answered not one any of these questions wavier must be completed by all affected propostary Public. A copy of the Dry Litter Buffe http://www.deq.state.ms.us/MDEQ.nsf/page/eor call (601) 961-5171.	hments not owned by the applic  No, attach wavier  nearest residential or recreational applicant?  Yes  ons then attach a completed Pour owners and notarized by a regret Zone Waiver can be found at	ant and at least 150 feet from al area, all dwellings, and all No, attach wavier altry Buffer Zone Waiver. The State of Mississippi appointed
CONTRACT INFOMATION		
Is this facility a contract operation?	es No	
If yes, what is the name and address of the int	egrator?	
Name: Peco	Address: P.O. Box 1320, Bay	Springs, MS 39422

ATTACHMENTS		
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.		
Has a nutrient management plan been developed? ☐ Yes ☑ No		
If yes, when was the nutrient management plan submitted? Date:		
If no, when will the nutrient management plan be developed? Date: 1/12/06		
Is a nutrient management plan already being implemented for the facility?  Yes  No		
The date of the last revision of the nutrient management plan. Date:		
What is the estimated amount of litter generated per year? 1224 tons/year		
Total acreage needed for land application: 91		
Total acreage available for land application: 5.1		
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:		
Landowner will utilize what litter he can on his own land. What litter the landowner can not use he will remove to other locations.		

# 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 <a href="http://www.deq.state.ms.us/MDEQ.nsf/page/epd\_AgriculturalBranchEPD?OpenDocument">http://www.deq.state.ms.us/MDEQ.nsf/page/epd\_AgriculturalBranchEPD?OpenDocument</a> 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 INFORMATIO	TYPE OF INCINERATOR
Manufacturer Name:	Single chamber
Model Number:	Multiple chamber
Capacity (tons/hour):	Other, describe
Total number of incinerators on site:	
	incinerator and indicate the latitude and longitude coordinate
Please provide the manufacture date for e where installed on site in degrees, minute Date(s):	incinerator and indicate the latitude and longitude coordinate and seconds.  atitude: Longitude: Lo

	x if this section does not apply
Army Corps of Engine	is rerouting, filling, or crossing a water conveyance of any kind, contact the U.S. eers regulatory branch for possible permitting requirements. If the project requires a ction 404 Permit, provide appropriate documentation from the Corps that the project
Indicate any local stor documentation of appr	m water ordinance with which the project must comply and submit any roval.
PROJECT INFORM	ATION
Total acreages that wil	Il be disturbed: 5
Description of the con for the construction of 4 cl	struction activity:   1 chicken house will be torn down and 4 chicken house pads will be built hickenhouses.
Nearest named receivi	ng stream: Tiger Creek
	streams, private/public ponds or lakes within ½ mile downstream of project boundary by the construction activity?   Yes  No
Soil Characteristics:	Malbis - Fine Sandy Loam

Water in Accordance with the National Pollution Discharge Elimination System.

IV. CONSTRUCTION ACTIVITIES DISTURBING ONE ACRE OR MORE

#### 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 Owner	1-29-07 Date
Title	