

PRIME CONTRACTOR INFORMATION

PRIME CONTRACTOR CONTACT PERSON: N/A (until contract awarded)
PRIME CONTRACTOR COMPANY: N/A
PRIME CONTRACTOR STREET OR P.O. BOX: _____
PRIME CONTRACTOR CITY: _____ STATE: _____ ZIP: _____
PRIME CONTRACTOR PHONE # (INCLUDE AREA CODE): _____

PROJECT INFORMATION

PROJECT NAME: Water, Sewer & Drainage Replacement, Scenic Dr./Hwy 90, Phase I

TOTAL ACREAGE THAT WILL BE DISTURBED¹ (To be covered by the Large Construction General Permit the disturbed area must be five (5) acres or greater or part of a larger common plan of development or sale that will disturb five (5) acres or greater.): 7.5

DESCRIPTION OF CONSTRUCTION ACTIVITY: The construction consists of installing 15507' of water main and 11467' of sewer main, and 4191 feet of storm drain long with related manholes, fire hydrants, water valves, etc.

PROPOSED DESCRIPTION OF PROPERTY USE AFTER CONSTRUCTION HAS BEEN COMPLETED (include standard industrial classification code (SIC) if known): All property will be returned to its natural state.

SIC Code _____

PHYSICAL SITE ADDRESS (If the physical address is not available indicate the nearest named road. For linear projects, indicate the beginning of the project and identify all counties the project traverses.)

STREET: Scenic Drive

CITY: Pass Christian COUNTY: Harrison

ZIP: 39571

NEAREST NAMED RECEIVING STREAM: Mississippi Sound

ARE THERE RECREATIONAL STREAMS, PRIVATE/PUBLIC PONDS OR LAKES WITHIN 1/2 MILE DOWNSTREAM OF PROJECT BOUNDARY THAT MAY BE IMPACTED BY THE CONSTRUCTION ACTIVITY? No

EXISTING DATA DESCRIBING THE SOIL (for linear projects please describe in SWPPP): _____
See SWPPP.

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 THIS CNOI FOR A FACILITY THAT WILL REQUIRE OTHER PERMITS (Yes or No)? No

IF SO, CIRCLE WHICH ONE(S): AIR, HAZARDOUS WASTE, PRETREATMENT, STATE OPERATING, INDIVIDUAL NPDES, OTHER: No

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 CORPS OF ENGINEER SECTION 404 PERMIT PROVIDE APPROPRIATE DOCUMENTATION FROM THE CORPS THAT THE PROJECT HAS BEEN APPROVED.

IS A LAKE REQUIRING THE CONSTRUCTION OF A DAM BEING PROPOSED (Yes or No)? _____
IF SO, PROVIDE APPROPRIATE APPROVAL DOCUMENTATION FROM MDEQ OFFICE OF LAND AND WATER, DAM SAFETY.

IF THE PROJECT IS A SUBDIVISION, INDUSTRIAL PARK OR LARGE APARTMENT COMPLEX HOW WILL SANITARY SEWAGE BE DISPOSED? Circle one of the following and attach the pertinent documents.

1. Existing Municipal or Commercial System. Please attach plans and specifications for the collection system and the associated "Information Regarding Proposed Wastewater Projects" form. If the plans and specifications can not be provided, at the time of CNOI submittal, MDEQ will accept written acknowledgement from official(s) responsible for wastewater collection and treatment that the flows generated from the proposed project can and will be transported and treated properly. The letter must include the estimated flow.
2. Collection and Treatment System will be Constructed. Please attach a copy of the cover of the NPDES discharge permit from MDEQ or indicate the date the application was submitted to MDEQ (Date: _____.)
3. 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.
4. Individual Onsite Wastewater Disposal Systems for Subdivisions Greater than 35 Lots. A determination of the feasibility of installing a central sewage collection and treatment system must be made by MDEQ. A copy of the response from MDEQ concerning the feasibility study must be attached. If a central collection and wastewater system is not feasible, then please attach a copy of the Letter of General Acceptance from the State Department of Health or certification from a registered professional engineer that the platted lots should support individual onsite wastewater disposal systems.

INDICATE ANY LOCAL STORM WATER ORDINANCE WITH WHICH THE PROJECT MUST COMPLY AND SUBMIT ANY DOCUMENTATION OF APPROVAL:

N/A

STORM WATER POLLUTION PREVENTION PLAN (SWPPP) AND USGS QUAD MAP REQUIREMENT

ATTACH A CONSTRUCTION SWPPP THAT INCLUDES THE MINIMUM COMPONENTS FOUND IN PART IILC OF THE CONSTRUCTION PERMIT.

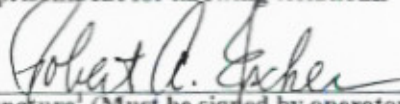
INDICATE ANY ASSOCIATION OR GENERIC SWPPP (In addition, attach a site map with the appropriate erosion and sediment controls identified. For linear projects [road and pipeline projects] provide drawings of typical controls used.):

Plan attached

ATTACH A USGS QUAD MAP OR COPY OF QUAD MAP EXTENDING AT LEAST ONE-HALF OF A MILE BEYOND THE SITE'S PROPERTY BOUNDARY OUTLINING THE SITE LOCATION (Quad maps can be obtained from MDEQ Office of Geology at 601-961-5523.) IF A COPY IS SUBMITTED PROVIDE THE NAME OF THE QUAD MAP (found in upper right hand corner of map).

Map attached

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.



Signature¹ (Must be signed by operator when different than owner)

2-22-07
Date Signed

Bob Escher, P.E.
Printed Name¹

Engineer
Title

¹This application shall be signed according to the General Permit, Part V.E., 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.
- Duty Authorized Representative.

Please submit the CNOI form to: Chief, Environmental Permits Division
MS Department of Environmental Quality, Office of Pollution Control
P.O. Box 10385
Jackson, Mississippi 39289-0385

Revised August 21, 2003

PRIME CONTRACTOR CERTIFICATION

By completing and submitting this form to MDEQ the prime contractor is certifying that (1) they have operational control over the erosion and sediment control specifications (including the ability to make modifications to such specifications) and (2) has day-to-day operational control of those activities at the site necessary to ensure compliance with the SWPPP and applicable permit conditions. The owner(s) of the property and the prime contractor associated with regulated construction activity on the property have joint and several responsibility for compliance with the permit. Notwithstanding any permit condition to the contrary, the coverage recipient and any person who causes pollution of waters of the state or places waste in a location where they are likely to cause pollution of any waters of the state shall remain responsible under applicable federal and state laws and regulations, and applicable permits.

PRIME CONTRACTOR INFORMATION

PRIME CONTRACTOR CONTACT PERSON: N/A PHONE NUMBER: N/A
PRIME CONTRACTOR COMPANY: N/A (Until contract awarded)
PRIME CONTRACTOR STREET (P.O. BOX): _____
PRIME CONTRACTOR CITY: _____ STATE: _____ ZIP: _____

OWNER INFORMATION

OWNER CONTACT PERSON: Bob Escher, P.E. PHONE NUMBER: 228-863-0667
OWNER COMPANY NAME: City of Pass Christian

PROJECT INFORMATION

CONSTRUCTION STORM WATER GENERAL PERMIT COVERAGE NUMBER: MSR10
PROJECT NAME: Water, Sewer & Drainage Replacement, Scenic Dr./Hwy 90, Phase I
DESCRIPTION OF CONSTRUCTION ACTIVITY: The construction consists of installing 15507' of water main and 11467' of sewer main, and 4191 feet of storm drain long with related manholes, fire hydrants, water valves, etc.
PHYSICAL SITE ADDRESS (If the physical address is not available indicate the nearest named road. For linear projects, indicate the beginning of the project and identify all counties the project traverses.)
STREET: Scenic Drive
CITY: Pass Christian COUNTY: Harrison

I certify that I am the prime contractor for this project and will comply with all the requirements in the above referenced general NPDES permit. I further 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.

Prime Contractor Signature¹ _____

Date Signed _____

Printed Name¹ _____

Title _____

¹This application shall be signed according to the General Permit, Part V.E., 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.
- Duly Authorized Representative.

This Prime Contractors Certification form shall be submitted to:
Chief, Environmental Permits Division
MS Department of Environmental Quality, Office of Pollution Control
P.O. Box 10385
Jackson, Mississippi 39289-0385