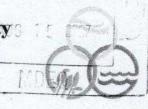




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NOTICE OF INTENT (NOI) FOR COVERAGE UNDER DRY LITTER POULTRY CONCENTRATED ANIMAL FEEDING OPERATIONS GENERAL NPDES PERMIT NUMBER MSG15 04 4 4

(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 OUAD 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: Sam McRaney	
Facility Name: McRaney's Farm	
Mailing Address:	
Street or P.O. Box: 69 Cook-McDonald Road	
City: Collins	State: MS Zip: 39428
Physical Site Address: (If the physical address is not avintersection.)	
	Character Time
City:Covington	State: Zip:
County: Covington Latitude (degrees/min/sec): N 31-37'-07.9"	
Longitude (degrees/min/sec): W 089-35'-21.3"	
Nearest named receiving stream: Town Creek	
Facility Telephone No. (Include Area Code):	(601) 765-6896
Facility Fax No. (Include Area Code):	N\A
Facility Cell Phone No. (Include Area Code):	(601) 577-6623
Other Contact Phone Numbers (Include Area Code):	N\A
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 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): 146,400 Layers (SIC 0252): 146,400 TOTAL AMOUNT: 146,400 Housed under roof Open confinement TYPES OF DRY LITTER CONTAINMENT Check all that apply and indicate total days of storage	Check any of the following to control runoff and professor of the following to control runoff and professor of the following setting setting the following setting set	Setbacks Conservation tillage Constructed wetland Infiltration field Grass filter Terrace STORAGE, AND CAPACITY	
Type of Storage	Total Number of Days	Total Capacity (tons)	
Roofed Storage Shed	305	1,590	
Concrete Pad			
☐ Impervious Soil Pad			
Other: Specify			
Are all poultry houses, that have been construall occupied dwellings or commercial establishall adjoining property lines? Yes Are all incinerators at least 150 feet from the light commercial buildings not owned by the NOTE: If answered no to any of these quest wavier must be completed by all affected pro Notary Public. A copy of the Dry Litter Buffehttp://www.deq.state.ms.us/MDEQ.nsf/page/or call (601) 961-5171.	nearest residential or recreational applicant? Yes ions then attach a completed Poult operty owners and notarized by a Ser Zone Waiver can be found at	area, all dwellings, and all No, attach wavier try Buffer Zone Waiver. The tate of Mississippi appointed	
Is this facility a contract operation?			
Name: Sanderson Farms	Address: P.O. Box 519, Collins MS 39428		

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.
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: PRESENTLY
If no, when will the nutrient management plan be developed? Date: N/A
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: N/A
What is the estimated amount of litter generated per year? 1,590 tons/year
Total acreage needed for land application: 153 Acres
Total acreage available for land application: 0
Will a third party remove litter off site? ✓ Yes □ No
If not land applying, describe alternative use(s) of the litter:

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 INFORMATIO	ON T	TYPE OF INCINERATOR Single chamber Multiple chamber Other, describe	
Manufacturer Name: Model Number:	c		
Capacity (tons/hour):			
Total number of incinerators on site:			
where installed on site in degrees, minute Date(s):	es, and seconds. Latitude:	Longitude:	
where installed on site in degrees, minute Date(s):	es, and seconds. Latitude: Latitude: Latitude: Latitude: Latitude:	Longitude: Longitude: Longitude: Longitude:	
where installed on site in degrees, minute Date(s): FUEL TYPE AND INCINERATOR TO Fuel Type:	es, and seconds. Latitude: Latitude: Latitude: Latitude: Latitude: EMPERATURE RA	Longitude: Longitude: Longitude: Longitude: NGE	
where installed on site in degrees, minute Date(s):	es, and seconds. Latitude: Latitude: Latitude: Latitude: Latitude: EMPERATURE RA	Longitude: Longitude: Longitude: Longitude: NGE	

IV. CONSTRUCTION ACTIVITIES DISTURBING ONE ACRE OR MORE

Check this box if this section does not apply

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 Corps of Engineer Section 404 Permit, provide appropriate documentation from the Corps that the project has been approved.

Indicate any local storm water ordinance with which the project must comply and submit any documentation of approval.

PROJECT INFORM	IATION		
Total acreages that wi	ll be disturbed: 10.2 Acres		
Description of the construction activity: Excavation & fill needed to construct 6 broiler house pads 44' x 500' in size. Egress and ingress road will be needed.			
Nearest named receive	ing stream: Town Creek		
	streams, private/public ponds or lakes within ½ mile downstream of project boundary by the construction activity?		
Soil Characteristics:	The soils are mapped as SbB. Savannah soils are loamy in nature with 2 to 5 % slopes		
found under "SW Permit to Constru	Vater Pollution Prevention Plan (SWPPP) that includes the minimum components PPP Details" on pages 38 through 43 of the Multimedia General Pollution Control act/Operate Air Emission Equipment and/or Manage Manure and Discharge Storm ance with the National Pollution Discharge Elimination System.		

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

8.4.07 Date

Title