

AI #17798  
MSRMS4003

**GENERAL PERMIT NOTICE OF INTENT FOR STORMWATER DISCHARGES ASSOCIATED WITH SMALL MUNICIPAL SEPARATE STORM SEWER SYSTEMS (MS4s) (Permit No. MSRMS4)**



Must be typed (may be completed on-line). All items must be completed accurately and in their entirety or the application will be deemed incomplete. Processing of the permit will not begin until all information is received. Please refer to the instructions for information about the required items. An original signature of the applicant is required.

**1. Name and Address of the MS4 Applicant:**

Name: City of Southaven

Mailing Address: 8710 Northwest Drive

City, State and Zip Code: Southaven, Mississippi 38671

County: DeSoto

County  City/Town  Other: \_\_\_\_\_

Local Contact (responsible for program implementation): Ron Smith, PE

Title: City Engineer Office Phone: (662) 393-2991

Cell Phone: 901-461-9019 Fax: 662-280 6556

E-mail address (local contact): rsmith@southaven.org

E-mail address (legally responsible person): mayor@southaven.org

**2. Location of the MS4:**

Location Description (narrative): The city of Southaven is a city of approx 42,567 people encompassing 34 square miles in Northcentral DeSoto County

**3. Location Map/Boundaries:**

a. The SWMP will be implemented  Urbanized Area Only  Entire Jurisdiction.

b. All entities except counties  
Location map must be attached showing city, town, or district boundaries, and urbanized area (UA) boundaries.

c. Counties only  
Location map must be attached showing county boundaries, unincorporated area boundaries within the county, and urbanized area (UA) boundaries.



4. Major receiving waters (state waters) within the permitted area:

|                  |       |       |
|------------------|-------|-------|
| Horn Lake Creek  | _____ | _____ |
| Rocky Creek      | _____ | _____ |
| Nolehoe Creek    | _____ | _____ |
| Bean Patch Creek | _____ | _____ |
| _____            | _____ | _____ |
| _____            | _____ | _____ |

All 303(d) listed impaired waterbodies located within the permitted area and the cause of impairment:

|       |       |       |
|-------|-------|-------|
| none  | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

5. Joint MS4 NOI No  Yes  If yes, complete Appendix A.

6. Population: 42,567

7. Attachments. Storm Water Management Plan as required by Part IV. of the General Permit for Small MS4s must be attached. Additional attachments include required maps (Item 3) and may include legal agreement(s) (Item 5).

8. Signature of Legally Responsible Person

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine or imprisonment.

  
 \_\_\_\_\_  
 Signature of Applicant<sup>1</sup>

3/16/09  
 \_\_\_\_\_  
 Date Signed

Charles "Greg" Davis  
 \_\_\_\_\_  
 Name (typed)

Mayor  
 \_\_\_\_\_  
 Title

<sup>1</sup> This MS4 NOI shall be signed according to the MS4 General Permit Part VI.E.