

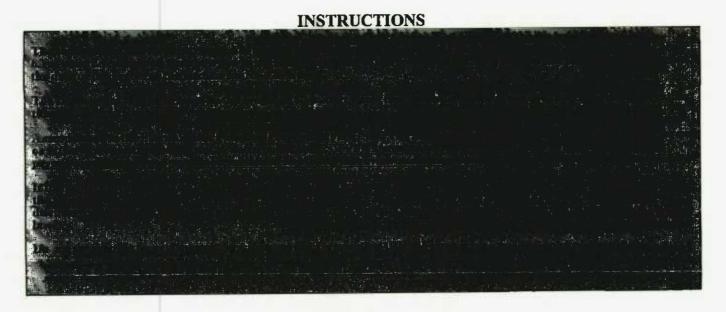




LARGE CONSTRUCTION GENERAL PERMIT FOR LAND DISTURBING ACTIVIES OF FIVE (5) OR MORE ACRES

RE-COVERAGE FORM

FOR COVERAGE UNDER MISSISSIPPI'S REISSUED
LARGE CONSTRUCTION STORM WATER GENERAL PERMIT MSR10
GENERAL NPDES COVERAGE NO. MSR10 5 5 4



Manager
20.00
ZIP: 39092

PROJECT/SITE INFORMATION PROJECT NAME: CLEAR ZONE RESTORATION CONTACT NAME & POSITION: JOSA GOLDON QUELLAY COTTO MONAGE CONTACT PHONE NUMBER (INCLUDE AREA CODE): 601-507-3317 PHYSICAL SITE ADDRESS (IF NOT AVAILABLE INDICATE NEAREST NAMED ROAD): STREET: NAVAL AIR STATION CITY: MERIDEAN LOUDELDACE COUNTY: PROVIDE THE COORDINATES OF THE PROJECT ENTRANCE OR START POINT: LATITUDE: 3 4 degrees 41 minutes 38 seconds LONGITUDE: 98 degrees 34 minutes 4 seconds STORM WATER POLLUTION PREVENTION PLAN (SWPPP) THE GENERAL PERMIT REQUIRES THE SWPPP TO BE ONSITE, UP-TO-DATE AND EFFECTIVE IN CONTROLLING STORM WATER POLLUTANTS. ACCORDINGLY, THE FOLLOWING QUESTIONS MUST BE ANSWERED YES OF N.A. TO RECEIVE RECOVERAGE. X YES IS A COPY OF THE SWPPP AT THE PERMITTED SITE OR LOCALLY AVAILABLE? NO 2. DOES SWPPP CONTAIN AN UP-TO-DATE ASSESSMENT OF POTENTIAL STORM WATER NO POLLUTANT SOURCES AND IDENTIFY BMPS TO EFFECTIVELY CONTROL THEM? 3. IF A SEDIMENT BASIN IS A PROJECT BMP, IS IT EQUIPPED WITH AN OUTLET YES or N.A. NO STRUCTURE THAT DISCHARGES ONLY FROM THE SURFACE OF THE BASIN (ACT5, T-5 (A))? NO DOES SWPPP PROHIBIT THE DISCHARGES LISTED IN ACT2, T-3 (3) OF THE PERMIT? Y YES NO DOES THE SWPPP REQUIRE VEGETATIVE PRACTICES TO BEGIN WITHIN 7 DAYS WHEN A DISTURBED AREA WILL BE LEFT FOR 14 DAYS (ACTS, T-4 (1)), INSTEAD OF 30 DAYS AS REQUIRED BY THE PREVIOUS PERMIT? 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 fines and imprisonment for knowing violations. I further certify that the project continues as described in the original notice of intent. Also, I certify that I understand when coverage is terminated I am no longer authorized to discharge storm water associated with construction activity under this general permit. I understand that discharging pollutants associated with construction activity to waters of the State without proper permit coverage is in violation of state I am aware of the significant changes in the renewed Large Construction Storm Water General Permit and certify the SWPPP for this project has been modified to incorporate these changes. Signature Preston Joshua Gordon Printed Name This application for re-coverage shall be signed according to ACT12, T-7 of the General Permit, 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.

After signing please mail to:

Chief, Environmental Permits Division,
MS Department of Environmental Quality, Office of Poliution Control
P.O. Box 2261
Jackson, Mississippi 39225