



# 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 4 12 8

### INSTRUCTIONS

The submittal of this form is required to receive coverage under the reissued Large Construction General Permit. This form must be completed and returned to the address printed at the bottom of the back page of this form within 30 days of the date of the Letter of Instruction for Re-Coverage.

The signatory of this form must be the owner or operator (prime contractor) who is the current coverage recipient (rather than the project manager or environmental consultant).

Amendments to the Storm Water Pollution Prevention Plan (SWPPP) are required to be attached if the plan is not current or is ineffective in controlling storm water pollutants. SWPPP amendments with the sole intent of incorporating new permit conditions do not need to be submitted to MDEQ for review and/or approval.

If the project is complete and final stabilization has been achieved, please request termination of coverage by completing the Request for Termination (RFT) Form found in the Large Construction Forms Package. Projects that continue to discharge storm water associated with construction activity without applicable permit coverage are in violation of state law.

Do not submit this form if submitting a Request for Termination (RFT) Form.

ALL INFORMATION REQUESTS MUST BE ANSWERED (Answer "NA" if not applicable).

COVERAGE RECIPIENT INFORMATION		
CONTACT NAME & POSITION: Bennett V, York, President		
COMPANY NAME: Courebrake Utilities Association, Inc.		
STREET OR P.O. BOX: 1/2 Sher Held Logo		
CITY: /tathesburg STATE: MS	ZIP:	39402
PHONE NUMBER (INCLUDE AREA CODE): 601, 264,0403		

TROJECT/SITE INFORMATION		
PROJECT NAME: Bellegrass Subdivision, Lagoon and Spray F	ield	
contact NAME & POSITION: Bennett V. Yark		
CONTACT PHONE NUMBER (INCLUDE AREA CODE): 601.264.0403		
PHYSICAL SITE ADDRESS (IF NOT AVAILABLE INDICATE NEAREST NAMED ROAD):		
CITY: COUNTY: Lamar		
CITY: COUNTY:	ZIP:	39402
PROVIDE THE COORDINATES OF THE PROJECT ENTRANCE OR START POINT:		
LATITUDE: 3 degrees 14 minutes 50 seconds LONGITUDE: 39 degrees 29	minutes 1	seconds
CTODA WATER ROLL WILON RREVENTION BLAN (CW/DR	<b>m</b> )	
STORM WATER POLLUTION PREVENTION PLAN (SWPP THE GENERAL PERMIT REQUIRES THE SWPPP TO BE ONSITE, UP-TO-DATE AND EFFECTIVE IS	CONTROLL	
WATER POLLUTANTS. ACCORDINGLY, THE FOLLOWING QUESTIONS MUST BE ANSWERED YRECOVERAGE.	ES or N.A. TO 1	RECEIVE
1. IS A COPY OF THE SWPPP AT THE PERMITTED SITE OR LOCALLY AVAILABLE?	YES	NO
2. DOES SWPPP CONTAIN AN UP-TO-DATE ASSESSMENT OF POTENTIAL STORM WATER POLLUTANT SOURCES AND IDENTIFY BMPS TO EFFECTIVELY CONTROL THEM?	YES	□ NO
3. IF A SEDIMENT BASIN IS A PROJECT BMP, IS IT EQUIPPED WITH AN OUTLET STRUCTURE THAT DISCHARGES <u>ONLY</u> FROM THE SURFACE OF THE BASIN (ACT5, T-5 (A))?	YES or N	A. NO
4. DOES SWPPP PROHIBIT THE DISCHARGES LISTED IN ACT2, T-3 (3) OF THE PERMIT?	YES	□ NO
5. DOES THE SWPPP REQUIRE VEGETATIVE PRACTICES TO BEGIN WITHIN 7 DAYS WHEN A DISTURBED AREA WILL BE LEFT FOR 14 DAYS (ACT5, T-4 (1)), INSTEAD OF 30 DAYS AS REQUIRED BY THE PREVIOUS PERMIT?	YES	No
I certify under penalty of law that this document and all attachments were prepared under my direction or supported designed to assure that qualified personnel properly gathered and evaluated the information submitted person or persons who manage the system, or those persons directly responsible for gathering the information the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalt 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 un terminated I am no longer authorized to discharge storm water associated with construction activity under this that discharging pollutants associated with construction activity to waters of the State without proper permit of law.	<ol> <li>Based on my the information ies for submitting derstand when on is general permit coverage is in violence.</li> </ol>	inquiry of the in submitted is, to ng false coverage is t. I understand blation of state
I am aware of the significant changes in the renewed Large Construction Storm Water General Permit and certain been modified to incorporate these changes.  Lanel side With the Book transfer of Lice, and Scarporation  By:  By:  Printed Name  Title	2011	or this project
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		

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

## Canebrake Utilities Association, Inc.

112 Sheffield Loop, Suite D Hattiesburg, MS 39402 Telephone: 601.264.0403 Facsimile: 601.264.0433

## **VIA Federal Express**

April 6, 2011

Mr. Harry Wilson Chief, Environmental Permits Division Mississippi Department of Environmental Quality, Office of Pollution Control 515 East Amite Street Jackson, MS 39201

Re: Large Construction General Permit For Land Disturbing Activities of Five (5) or More Acres

Re-Coverage Form

General NPDES Coverage No. MSR104128

Dear Mr. Wilson:

Enclosed for filing, please find a Re-Coverage Form submitted on behalf of Canebrake Utilities Association, Inc. in connection with the above referenced General Permit.

Thank you.

Sincerely,

Canebrake Utilities Association, Inc.

By:

Bennett W. York, President

RECEIVED

APR 0 7 2011

Dept of Environmental Quality