

AI #7930

Jonathan



MISSISSIPPI DEPARTMENT OF
ENVIRONMENTAL QUALITY

RECEIVED

JUN 17 2011

Dept of Environmental Quality
Office of Pollution Control

WET DECK LOG SPRAY WITH RECIRCULATION GENERAL PERMIT RE-COVERAGE FORM

FOR COVERAGE UNDER MISSISSIPPI'S REISSUED
WET DECK LOG SPRAY WITH RECIRCULATION GENERAL PERMIT MSG17
GENERAL NPDES COVERAGE NO. MSG17 0073

INSTRUCTIONS

The submittal of this form is required to receive coverage under the reissued Wet Deck Log Spray with Recirculation General Permit. This form must be completed and returned to the address printed at the bottom of page 2 within 30 days of the date of the Letter of Instruction for Re-Coverage. For expanding facilities, please also complete Recoverage Form Addendum.

The signatory of this form must be the owner or operator who is the current coverage recipient (rather than the plant/site manager or environmental consultant). The coverage recipient is responsible for permit compliance.

If the facility is out of business or no longer a regulated facility, please request termination of coverage by completing the Request for Termination (RFT) Form found in the Wet Deck Log Spray with Recirculation General Permit. Facilities that continue to discharge wastewater without applicable permit coverage are in violation of state law.

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

ALL INFORMATION MUST BE COMPLETED (Enter "NA" if not applicable).

The Certificate of Coverage should be mailed to: ☐ owner/operator ☒ facility (please check one)

Are there any ongoing or proposed construction activities which involve the Wet Deck Log Spray Recirculation System (Please specify): N/A

COVERAGE RECIPIENT INFORMATION

CONTACT NAME & POSITION: PATRICIA SMITH, Corp. Sec.

COMPANY NAME: SMITH BROS. FOREST PRODUCTS, INC.

STREET OR P.O. BOX: PO BOX 90

CITY: BUCKATUNNA STATE: MS ZIP: 39322

PHONE NUMBER (INCLUDE AREA CODE): 601-648-2892

FACILITY INFORMATION

FACILITY NAME: Smith Bros. Forest Products, Inc.
CONTACT NAME & POSITION: Patricia Smith, Corp. Sec't.
CONTACT PHONE NUMBER (INCLUDE AREA CODE): 601-648-2892
PRIMARY STANDARD INDUSTRIAL CLASSIFICATION (SIC) CODE & DESCRIPTION OF INDUSTRIAL ACTIVITY:
2421 Sawmills & planing mills
PHYSICAL SITE ADDRESS: STREET: 110 CARSON Rd.
CITY: Buckatunna COUNTY: WAYNE ZIP: 39322
PROVIDE THE COORDINATES OF THE PLANT ENTRANCE:
LATITUDE: 31 degrees 31 minutes 58 seconds N LONGITUDE: 88 degrees 31 minutes 39 seconds W

WET DECK LOG SPRAY RECIRCULATION SYSTEM INFORMATION

HOW MANY OUTFALLS/RELEASE POINTS ARE ELIGIBLE FOR COVERAGE? 1
GEOGRAPHIC POSITION FOR OUTFALL(S) FROM WET DECK LOG SPRAY RECIRCULATION POND(S) (IF THE APPLICANT HAS MORE THAN ONE OUTFALL/ RELEASE POINT ELIGIBLE FOR COVERAGE, PLEASE USE THE SPACE TO THE RIGHT.):
LATITUDE: 31 degrees 53 minutes 20 seconds 31.532055
LONGITUDE: 88 degrees 52 minutes 72 seconds 88.52721
RECEIVING STREAM(S) (IF MORE THAN ONE OUTFALL IS COVERED, INDICATE THE RESPECTIVE RECEIVING STREAM FOR EACH OUTFALL.):
overflow of log spray goes into recirculating pond

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 I understand when coverage is terminated the facility is no longer authorized to discharge storm water associated with industrial activity under this general permit. I understand that discharging pollutants in storm water associated with industrial activity to waters of the state without NPDES coverage is in violation of state law.

Patricia G. Smith
Signature¹

6/15/11
Date
Corp Secretary
Title

Patricia G. Smith
Printed Name¹

¹This form shall be signed as follows:

- For a corporation, by a responsible corporate officer.
- For a partnership, by a general partner.
- For a sole proprietorship, by the proprietor.

After signing please mail to:

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



STATE OF MISSISSIPPI

HALEY BARBOUR

GOVERNOR

MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY

TRUDY D. FISHER, EXECUTIVE DIRECTOR

May 19, 2011

Waurice K. Smith
PO Box 90
Buckatunna, MS 39322

Dear Mr./Ms. Smith:

Re: Wet Deck Log Spray General Permit
Letter of Instruction for Recoverage
Smith Brothers Forest Products Inc
Wayne County
Coverage No. - MSG170073

The Mississippi Department of Environmental Quality's Permit Board has reissued the Wet Deck Log Spray with Recirculation General NPDES Permit (MSG17) on May 10, 2011. This General Permit authorizes discharges from wet deck log spray recirculation ponds, including water which is sprayed onto the timber, storm water run-off from the timber wet deck storage area, boiler blowdown, and exterior equipment and exterior vehicle washwater where no internal washing or engine washing is occurring and where no detergents or chemicals are being used. Additionally, the general permit allows the discharge of storm water from construction activities associated with the construction of the wet deck log spray system with a land disturbance area of one acre or greater. The above referenced facility has coverage under the previous general permit which expired on December 31, 2010.

The reissued general permit contains changes from the previous permit. Significant changes were made to reflect consistency with EPA permitting requirements for construction activities and for clarifications to existing regulations. No changes were made to the monitoring requirements found in the previous permit.

A wet decking operation that has been operating under the former Wet Deck Log Spray General Permit has three options: re-coverage, termination, or application for an individual permit.

Please read the following instructions carefully:

- Re-coverage. In order for the above referenced project to remain covered under a valid NPDES permit, the coverage recipient must complete the enclosed **Re-coverage Form** and send it to the indicated address within 30 days of the date of this letter. For proposed expansion activities, the coverage recipient must also complete the enclosed Recoverage Form Addendum and send it along with any required submittals to the indicated address within 30 days of the date of this letter. An updated Certificate of Permit Coverage will

OFFICE OF POLLUTION CONTROL

POST OFFICE BOX 2261 • JACKSON, MISSISSIPPI 39225-2261 • TEL: (601) 961-5171 • FAX: (601) 354-6612 • www.deq.state.ms.us

AN EQUAL OPPORTUNITY EMPLOYER