



MISSISSIPPI DEPARTMENT OF
ENVIRONMENTAL QUALITY

NO EXPOSURE CERTIFICATION for Exclusion from NPDES Storm Water Permitting

Submission of this **No Exposure Certification** constitutes notice that the entity identified below does not require permit authorization for its storm water discharges associated with industrial activity due to the existence of a condition of no exposure. This certification must be submitted every five years from the date of submittal.

A condition of no exposure exists at an industrial facility when all industrial materials and activities are protected by a storm resistant shelter to prevent exposure to rain, snow, snowmelt, and/or runoff. Industrial materials or activities include, but are not limited to, material handling equipment or activities, industrial machinery, raw materials, intermediate products, by-products, final products, or waste products. Material handling activities include the storage, loading and unloading, transportation, or conveyance of any raw material, intermediate product, final product, or waste product. A storm resistant shelter is not required for the following industrial materials and activities (40 CFR 122.26(g)(2)):

- drums, barrels, tanks, and similar containers that are tightly sealed, provided those containers are not deteriorated and do not leak. "Sealed" means banded or otherwise secured and without operational taps or valves;
- adequately maintained vehicles used in material handling; and
- final products, other than products that would be mobilized in storm water discharges (e.g., rock salt).

A **No Exposure Certification** must be provided for each facility qualifying for the no exposure exclusion. In addition, the exclusion from NPDES permitting is available on a facility-wide basis only, not for individual outfalls. If any industrial activities or materials are or will be exposed to precipitation, the facility is not eligible for the no exposure exclusion.

By signing and submitting this **No Exposure Certification** form, the entity is certifying that a condition of no exposure exists at its facility or site, and is obligated to comply with the terms and conditions of the conditional exclusion for "no exposure" of industrial activities and materials to storm water found in 40 CFR 122.26(g). Please mail the completed form to: **Chief, Environmental Permits Division, Office of Pollution Control, P.O. Box 2261, Jackson, MS 39225**

For this certification to be considered, all questions on this form must be answered. If an item does not apply to you, enter "NA" (for "not applicable") to show that you considered the question. All answers must be printed or typed.

Facility Operator Information (All correspondence will be sent to this address).

1. Contact Name: James Houston 2. Phone Number: 601-428-7289
3. Legal Company Name: Houston Processing Plant, LLC
4. Mailing Address: Street: 185 Houston Road
- City: Laurel State: MS Zip Code: 39443
5. Email: houstonprocessing@gmail.com

Facility/Site Location Information (If no street address exists, provide the nearest named road [e.g., Intersection of Routes 9 and 55]. Do not use a P.O. Box number).

1. Facility Name: Houston Processing Plant, LLC
2. Street Address: 185 Houston Road
- City: Laurel County: Jones Zip Code: 39443
3. Email: houstonprocessing@gmail.com

NO EXPOSURE CERTIFICATION

Facility/Site Location Information (Continued)

3. Latitude: 31° 45' 9.396" Longitude: -89° 8' 14.6112" Source: Google Maps
calculatorsoup.com
(to convert)

4. Nearest named receiving stream: Brushy Branch

5. Was the facility or site previously covered under an NPDES storm water permit?

☐ Yes

☒ No

If yes, enter the NPDES permit or coverage number: _____

6. Does this facility have other environmental permits?

☒ Yes

☐ No

If yes, provide type (Air, Hazardous Waste, NPDES, Pretreatment, State Operating) and permit number

NPDES - MS 00 38091

7. SIC/Activity Codes: Primary: 2011 Secondary (if applicable): _____

Exposure Checklist

Are any of the following materials or activities exposed to precipitation, now or in the foreseeable future?
(Please check either "Yes" or "No".)

	Yes	No
1. Using, storing or cleaning industrial machinery or equipment, and areas where residuals from using, storing or cleaning industrial machinery or equipment remain and are exposed to storm water	☐	☒
2. Materials or residuals on the ground or in storm water inlets from spills/leaks	☐	☒
3. Materials or products from past industrial activity	☐	☒
4. Material handling equipment (except adequately maintained vehicles)	☐	☒
5. Materials or products during loading/unloading or transporting activities	☐	☒
6. Materials or products stored outdoors (except final products intended for outside use [e.g., new cars] where exposure to storm water does not result in the discharge of pollutants)	☐	☒
7. Materials contained in open, deteriorated or leaking storage drums, barrels, tanks, and similar containers	☐	☒
8. Materials or products handled/stored on roads or railways owned or maintained by the discharger	☐	☒
9. Waste material (except waste in covered, non-leaking containers [e.g., dumpsters])	☐	☒
10. Application or disposal of process wastewater (unless otherwise permitted)	☐	☒
11. Particulate matter or visible deposits of residuals from roof stacks and/or vents not otherwise regulated (i.e., under an air quality control permit) and evident in the storm water outflow	☐	☒

If you answer "Yes" to any of these questions (1) through (11), you are not eligible for the no exposure exclusion and must be covered by an NPDES Storm Water Permit (individual permit or coverage under a general permit.)

NO EXPOSURE CERTIFICATION

Certification Statement

I certify under penalty of law that I have read and understand the eligibility requirements for claiming a condition of "no exposure" and obtaining an exclusion from NPDES storm water permitting.

I certify under penalty of law that there are no discharges of storm water contaminated by exposure to industrial activities or materials from the industrial facility or site identified in this document (except as allowed under 40 CFR 122.26(g)(2)).

I understand that I am obligated to submit a no exposure certification form once every five years to MDEQ and, if requested, to the operator of the local municipal separate storm sewer system (MS4) into which the facility discharges (where applicable). I understand that I must allow the MDEQ or MS4 operator where the discharge is into the local MS4, to perform inspections to confirm the condition of no exposure and to make such inspection reports publicly available upon request. I understand that I must obtain coverage under an NPDES permit prior to any point source discharge of storm water from the facility. I understand that a copy of this certification must be retained at the facility.

Additionally, 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 fine and imprisonment for knowing violations.

Print Name¹: James Houston

Print Title¹: Owner / Operator / Manager

Signature¹: James M. Houston

Date: 4-3-20

¹Certification shall be signed according to the Mississippi Water Pollution Control Regulations (11 Miss. Admin. Code Pt. 6, R. 1.1.2.C(1).)

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.

Instructions and Additional Information

Law

Federal law at 40 CFR Part 122.26 prohibits point source discharges of storm water associated with industrial activity to waters of the U.S. without a National Pollutant Discharge Elimination System (NPDES) permit. However, according to 40 CFR 122.26(g), NPDES permit coverage is not required for discharges of storm water associated with industrial activities identified at 40 CFR 122.26 (b)(14)(i)-(ix) and (xi) if the discharger can certify that a condition of "no exposure" exists at the industrial facility or site. Storm water discharges from construction activities identified in 40 CFR 122.26(b)(14)(x) are not eligible for the no exposure exclusion. Submission of this **No Exposure Certification** constitutes notice that the entity identified above does not require permit authorization for its storm water discharges associated with industrial activity due to the existence of a condition of no exposure.

Obtaining and Maintaining the No Exposure Exclusion

This form is used to certify that a condition of "no exposure" exists at the industrial facility or site described herein. By signing and submitting this **No Exposure Certification** form, the entity is certifying that a condition of no exposure exists at its facility or site, and is obligated to comply with the terms and conditions of 40 CFR 122.26(g). A **No Exposure Certification** must be provided for each facility qualifying for the no exposure exclusion. In addition, the exclusion from NPDES permitting is available on a facility-wide basis only, not for individual outfalls. If any industrial activities or materials are or will be exposed to precipitation, the facility is not eligible for the no exposure exclusion. If conditions change resulting in the exposure of materials and activities to storm water, the facility operator must obtain coverage under an NPDES storm water permit immediately. This certification must be resubmitted at least once every five years. The "no exposure" certification is non-transferable.

Instructions for Determining a Facility's Latitude and Longitude

Enter the latitude and longitude of the facility entrance in degrees/minutes/seconds. Latitude and longitude can be obtained from United States Geological Survey (USGS) quadrangle or topographic maps, GPS, or by accessing web sites that have latitude and longitude finders.

Latitude and longitude for a facility in decimal form must be converted to degrees (°), minutes (') and seconds (") for proper entry on the certification form. To convert decimal latitude or longitude to degrees/minutes/seconds, follow the steps in the following example.

Example: Convert decimal latitude 45.1234567 to degrees (°), minutes ('), and seconds (").

a/ The number to left of the decimal point are the degrees: 45°.

b/ To obtain minutes, multiply the first four numbers to the right of the decimal point by 0.006: $1234 \times 0.006 = 7.404$

c/ The numbers to the left of the decimal point in the result obtained in (b) are the minutes: 7'.

d/ To obtain seconds, multiply the remaining three numbers to the right of the decimal from the result obtained in (b) by 0.06: $404 \times 0.06 = 24.24$. Since the numbers to the right of the decimal point are not used, the result is 24".

e/ The conversion for 45.1234567 = 45° 7' 24".

EPA Identification Number		NPDES Permit Number		Facility Name Houston Processing Plant, LLC		Form Approved 03/05/19 OMB No. 2040-0004	
Form 1 NPDES		U.S. Environmental Protection Agency Application for NPDES Permit to Discharge Wastewater GENERAL INFORMATION					
SECTION 1. ACTIVITIES REQUIRING AN NPDES PERMIT (40 CFR 122.21(f) and (f)(1))							
Activities Requiring an NPDES Permit	1.1 Applicants <i>Not Required</i> to Submit Form 1						
	1.1.1 Is the facility a new or existing publicly owned treatment works ? If yes, STOP. Do NOT complete Form 1. Complete Form 2A. ☒ No			1.1.2 Is the facility a new or existing treatment works treating domestic sewage ? If yes, STOP. Do NOT complete Form 1. Complete Form 2S. ☒ No			
	1.2 Applicants <i>Required</i> to Submit Form 1						
	1.2.1 Is the facility a concentrated animal feeding operation or a concentrated aquatic animal production facility ? ☐ Yes → Complete Form 1 and Form 2B. ☒ No			1.2.2 Is the facility an existing manufacturing, commercial, mining, or silvicultural facility that is currently discharging process wastewater ? ☒ Yes → Complete Form 1 and Form 2C. ☐ No			
	1.2.3 Is the facility a new manufacturing, commercial, mining, or silvicultural facility that has not yet commenced to discharge ? ☐ Yes → Complete Form 1 and Form 2D. ☒ No			1.2.4 Is the facility a new or existing manufacturing, commercial, mining, or silvicultural facility that discharges only nonprocess wastewater ? ☐ Yes → Complete Form 1 and Form 2E. ☒ No			
	1.2.5 Is the facility a new or existing facility whose discharge is composed entirely of stormwater associated with industrial activity or whose discharge is composed of both stormwater and non-stormwater ? ☐ Yes → Complete Form 1 and Form 2F unless exempted by 40 CFR 122.26(b)(14)(x) or (b)(15). ☒ No						
SECTION 2. NAME, MAILING ADDRESS, AND LOCATION (40 CFR 122.21(f)(2))							
Name, Mailing Address, and Location	2.1 Facility Name Houston Processing Plant, LLC						
	2.2 EPA Identification Number						
	2.3 Facility Contact						
	Name (first and last) James Houston		Title Owner/Operator/Man.		Phone number 601-428-7289		
	Email address houstonprocessing@gmail.com						
	2.4 Facility Mailing Address						
	Street or P.O. box 185 Houston Road						
City or town Laurel			State MS		ZIP code 39443		

EPA Identification Number		NPDES Permit Number		Facility Name		Form Approved 03/05/19 OMB No. 2040-0004	
		MS 00 38091		Houston Proc. Plant, LLC			
Name, Mailing Address, and Location Continued	2.5	Facility Location					
		Street, route number, or other specific identifier 185 Houston Road					
		County name Jones	County code (if known)				
		City or town Laurel	State MS		ZIP code 39443		
SECTION 3. SIC AND NAICS CODES (40 CFR 122.21(f)(3))							
SIC and NAICS Codes	3.1	SIC Code(s)		Description (optional)			
		2011					
	3.2	NAICS Code(s)		Description (optional)			
		311611					
SECTION 4. OPERATOR INFORMATION (40 CFR 122.21(f)(4))							
Operator Information	4.1	Name of Operator James Houston					
	4.2	Is the name you listed in Item 4.1 also the owner? ☒ Yes ☐ No					
	4.3	Operator Status ☐ Public—federal ☐ Public—state ☐ Other public (specify) _____ ☒ Private ☐ Other (specify) _____					
	4.4	Phone Number of Operator 601-428-7289					
Operator Information Continued	4.5	Operator Address					
		Street or P.O. Box 185 Houston Road					
		City or town Laurel	State MS		ZIP code 39443		
		Email address of operator houstonprocessing@gmail.com					
SECTION 5. INDIAN LAND (40 CFR 122.21(f)(5))							
Indian Land	5.1	Is the facility located on Indian Land? ☐ Yes ☒ No					

EPA Identification Number	NPDES Permit Number MS 00 38091	Facility Name Houston Prod. Plant, LLC	Form Approved 03/05/19 OMB No. 2040-0004
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SECTION 6. EXISTING ENVIRONMENTAL PERMITS (40 CFR 122.21(f)(6))

Existing Environmental Permits	6.1	Existing Environmental Permits (check all that apply and print or type the corresponding permit number for each)		
		☒ NPDES (discharges to surface water) MS 00 38091	☐ RCRA (hazardous wastes)	☐ UIC (underground injection of fluids)
		☐ PSD (air emissions)	☐ Nonattainment program (CAA)	☐ NESHAPs (CAA)
		☐ Ocean dumping (MPRSA)	☐ Dredge or fill (CWA Section 404)	☐ Other (specify)

SECTION 7. MAP (40 CFR 122.21(f)(7))

Map	7.1	Have you attached a topographic map containing all required information to this application? (See instructions for specific requirements.) ☒ Yes ☐ No ☐ CAFO—Not Applicable (See requirements in Form 2B.)
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SECTION 8. NATURE OF BUSINESS (40 CFR 122.21(f)(8))

Nature of Business	8.1	Describe the nature of your business. Meat processing. Custom and retail.
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SECTION 9. COOLING WATER INTAKE STRUCTURES (40 CFR 122.21(f)(9))

Cooling Water Intake Structures	9.1	Does your facility use cooling water? ☐ Yes ☒ No → SKIP to Item 10.1.
	9.2	Identify the source of cooling water. (Note that facilities that use a cooling water intake structure as described at 40 CFR 125, Subparts I and J may have additional application requirements at 40 CFR 122.21(r). Consult with your NPDES permitting authority to determine what specific information needs to be submitted and when.)

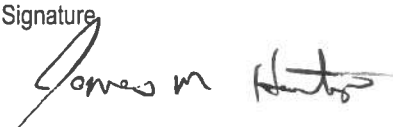
SECTION 10. VARIANCE REQUESTS (40 CFR 122.21(f)(10))

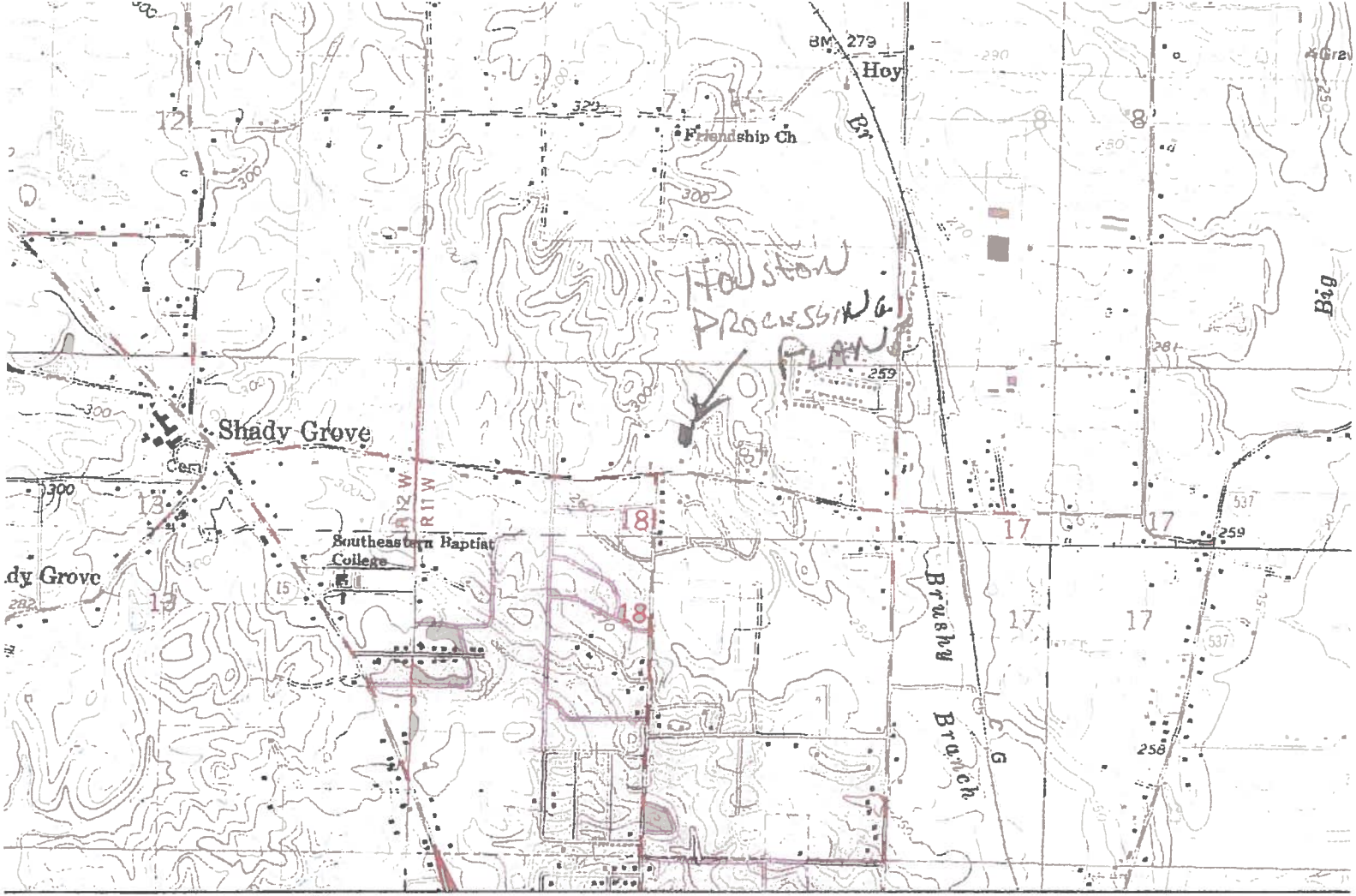
Variance Requests	10.1	Do you intend to request or renew one or more of the variances authorized at 40 CFR 122.21(m)? (Check all that apply. Consult with your NPDES permitting authority to determine what information needs to be submitted and when.)
		☐ Fundamentally different factors (CWA Section 301(n)) ☐ Water quality related effluent limitations (CWA Section 302(b)(2)) ☐ Non-conventional pollutants (CWA Section 301(c) and (g)) ☐ Thermal discharges (CWA Section 316(a)) ☒ Not applicable

EPA Identification Number	NPDES Permit Number	Facility Name
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Form Approved 03/05/19
OMB No. 2040-0004

SECTION 11. CHECKLIST AND CERTIFICATION STATEMENT (40 CFR 122.22(a) and (d))

Checklist and Certification Statement	11.1	In Column 1 below, mark the sections of Form 1 that you have completed and are submitting with your application. For each section, specify in Column 2 any attachments that you are enclosing to alert the permitting authority. Note that not all applicants are required to provide attachments.	
		Column 1	Column 2
	☒	Section 1: Activities Requiring an NPDES Permit	☐ w/ attachments
	☐	Section 2: Name, Mailing Address, and Location	☐ w/ attachments
	☒	Section 3: SIC Codes	☐ w/ attachments
	☒	Section 4: Operator Information	☐ w/ attachments
	☒	Section 5: Indian Land	☐ w/ attachments
	☒	Section 6: Existing Environmental Permits	☐ w/ attachments
	☒	Section 7: Map	☒ w/ topographic map ☐ w/ additional attachments
	☒	Section 8: Nature of Business	☐ w/ attachments
	☒	Section 9: Cooling Water Intake Structures	☐ w/ attachments
	☒	Section 10: Variance Requests	☐ w/ attachments
	☐	Section 11: Checklist and Certification Statement	☐ w/ attachments
	11.2	Certification Statement <i>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 gather and evaluate 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 fine and imprisonment for knowing violations.</i>	
	Name (print or type first and last name)	Official title	
	James Houston	Owner/Manager/Operator	
	Signature 	Date signed 4-3-20	



0 0.5 Mi
0 2000 Ft

Map provided by MyTopo.com



Michael Watson
SECRETARY OF STATE

Office of the Secretary of State
Jackson, Mississippi

March 19, 2020

Certificate of Reinstatement

HOUSTON PROCESSING PLANT, LLC
185 Houston Road, 185 Houston Road
Laurel, MS 39443

This Certificate is issued because the Secretary of State has determined the following:

1. The ground or grounds for dissolution/revocation did not exist or have been eliminated;
2. The corporate name is available for use; and
3. All taxes owed by the corporation have been paid

This Certificate of Reinstatement relates back to and takes effect as of the effective date of administrative dissolution/revocation and the corporation resumes carrying on its business as if the administrative dissolution/revocation has never occurred.

Given under my hand and seal of office
the 19th day of March, 2020

Michael Watson



Michael Watson
SECRETARY OF STATE

Invoice Number: 14709366

Invoice Date: 03/19/2020

Customer Information

Mr. James Houston
185 Houston Road
Laurel, Mississippi 39443

Description	Tracking Number	Qty	Item Cost	Amount Paid
Reinstate Domestic - Online	2020114464		\$ 50.00	\$ 50.00
MSI Transaction Fee			\$ 3.14	\$ 3.14
Payment Details				
			Invoice Total:	\$ 53.14
			Payment Total:	\$ 53.14
			Amount Due:	\$ 0.00
Payment Method				
Payment Type: Credit Card				

Include invoice number on all correspondence and send to:

Mississippi Secretary of State's Office
P.O. Box 136
Jackson, MS 39205

To discuss payment for Corporation items
call:
(601) 359-1633

EPA Identification Number		NPDES Permit Number MS 00 38091		Facility Name Houston Processing Plant, LLC		Form Approved 03/05/19 OMB No. 2040-0004	
Form 2C NPDES		U.S. Environmental Protection Agency Application for NPDES Permit to Discharge Wastewater EXISTING MANUFACTURING, COMMERCIAL, MINING, AND SILVICULTURE OPERATIONS					
SECTION 1. OUTFALL LOCATION (40 CFR 122.21(g)(1))							
Outfall Location	1.1	Provide information on each of the facility's outfalls in the table below.					
	Outfall Number	Receiving Water Name	Latitude		Longitude		
	001	Unnamed tributary of Brushy Branch	31° 45' 9.396"		-89° 8' 14.6112"		
			° ' "		° ' "		
			° ' "		° ' "		
SECTION 2. LINE DRAWING (40 CFR 122.21(g)(2))							
Line Drawing	2.1	Have you attached a line drawing to this application that shows the water flow through your facility with a water balance? (See instructions for drawing requirements. See Exhibit 2C-1 at end of instructions for example.) ☒ Yes ☐ No					
SECTION 3. AVERAGE FLOWS AND TREATMENT (40 CFR 122.21(g)(3))							
Average Flows and Treatment	3.1	For each outfall identified under Item 1.1, provide average flow and treatment information. Add additional sheets if necessary.					
	Outfall Number _____						
	Operations Contributing to Flow						
	Operation				Average Flow		
	Meat Processing plant				.003 mgd		
					mgd		
					mgd		
					mgd		
	Treatment Units						
	Description (include size, flow rate through each treatment unit, retention time, etc.)				Code from Table 2C-1		Final Disposal of Solid or Liquid Wastes Other Than by Discharge

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		MS 00 28091	Houston Processing Plant, LLC	

Average Flows and Treatment Continued	3.1 cont.	**Outfall Number** 001		
		Operations Contributing to Flow		
		Operation		Average Flow
		washing up slaughter floor	} all together	.003 mgd
		washing up cutting room		.003 mgd
		washing up stuffing room		.003 mgd
				mgd
		Treatment Units		
		Description (include size, flow rate through each treatment unit, retention time, etc.)	Code from Table 2C-1	Final Disposal of Solid or Liquid Wastes Other Than by Discharge
		Outfall Number		
		Operations Contributing to Flow		
		Operation		Average Flow
				mgd
				mgd
				mgd
				mgd
Treatment Units				
Description (include size, flow rate through each treatment unit, retention time, etc.)	Code from Table 2C-1	Final Disposal of Solid or Liquid Wastes Other Than by Discharge		

System Users	3.2	Are you applying for an NPDES permit to operate a privately owned treatment works? ☐ Yes ☒ No → SKIP to Section 4.
	3.3	Have you attached a list that identifies each user of the treatment works? ☐ Yes ☐ No

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SECTION 6. IMPROVEMENTS (40 CFR 122.21(g)(6))

Upgrades and Improvements	6.1	Are you presently required by any federal, state, or local authority to meet an implementation schedule for constructing, upgrading, or operating wastewater treatment equipment or practices or any other environmental programs that could affect the discharges described in this application?			
		☐ Yes ☒ No → SKIP to Item 6.3.			
	6.2	Briefly identify each applicable project in the table below.			
	Brief Identification and Description of Project	Affected Outfalls (list outfall number)	Source(s) of Discharge	Final Compliance Dates	
				Required	Projected
	6.3	Have you attached sheets describing any additional water pollution control programs (or other environmental projects that may affect your discharges) that you now have underway or planned? <i>(optional item)</i>			
		☐ Yes ☐ No ☒ Not applicable			

SECTION 7. EFFLUENT AND INTAKE CHARACTERISTICS (40 CFR 122.21(g)(7))

Effluent and Intake Characteristics	See the instructions to determine the pollutants and parameters you are required to monitor and, in turn, the tables you must complete. Not all applicants need to complete each table.				
	Table A. Conventional and Non-Conventional Pollutants				
	7.1	Are you requesting a waiver from your NPDES permitting authority for one or more of the Table A pollutants for any of your outfalls?			
		☐ Yes ☒ No → SKIP to Item 7.3.			
	7.2	If yes, indicate the applicable outfalls below. Attach waiver request and other required information to the application.			
		Outfall Number _____ Outfall Number _____ Outfall Number _____			
	7.3	Have you completed monitoring for all Table A pollutants at each of your outfalls for which a waiver has not been requested and attached the results to this application package?			
		☐ Yes ☐ No; a waiver has been requested from my NPDES permitting authority for all pollutants at all outfalls.			
	Table B. Toxic Metals, Cyanide, Total Phenols, and Organic Toxic Pollutants				
	7.4	Do any of the facility's processes that contribute wastewater fall into one or more of the primary industry categories listed in Exhibit 2C-3? (See end of instructions for exhibit.)			
	☐ Yes ☒ No → SKIP to Item 7.8.				
7.5	Have you checked "Testing Required" for all toxic metals, cyanide, and total phenols in Section 1 of Table B?				
	☐ Yes ☐ No				
7.6	List the applicable primary industry categories and check the boxes indicating the required GC/MS fraction(s) identified in Exhibit 2C-3.				
	Primary Industry Category	Required GC/MS Fraction(s) (Check applicable boxes.)			
		☐ Volatile	☐ Acid	☐ Base/Neutral	☐ Pesticide
		☐ Volatile	☐ Acid	☐ Base/Neutral	☐ Pesticide
		☐ Volatile	☐ Acid	☐ Base/Neutral	☐ Pesticide

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Effluent and Intake Characteristics Continued	7.7	Have you checked "Testing Required" for all required pollutants in Sections 2 through 5 of Table B for each of the GC/MS fractions checked in Item 7.6? ☐ Yes ☐ No	
	7.8	Have you checked "Believed Present" or "Believed Absent" for all pollutants listed in Sections 1 through 5 of Table B where testing is not required? ☒ Yes ☐ No	
	7.9	Have you provided (1) quantitative data for those Section 1, Table B, pollutants for which you have indicated testing is required or (2) quantitative data or other required information for those Section 1, Table B, pollutants that you have indicated are "Believed Present" in your discharge? ☐ Yes ☐ No	
	7.10	Does the applicant qualify for a small business exemption under the criteria specified in the instructions? ☐ Yes → Note that you qualify at the top of Table B, then SKIP to Item 7.12. ☐ No	
	7.11	Have you provided (1) quantitative data for those Sections 2 through 5, Table B, pollutants for which you have determined testing is required or (2) quantitative data or an explanation for those Sections 2 through 5, Table B, pollutants you have indicated are "Believed Present" in your discharge? ☐ Yes ☐ No	
	Table C. Certain Conventional and Non-Conventional Pollutants		
	7.12	Have you indicated whether pollutants are "Believed Present" or "Believed Absent" for all pollutants listed on Table C for all outfalls? ☒ Yes ☐ No	
	7.13	Have you completed Table C by providing (1) quantitative data for those pollutants that are limited either directly or indirectly in an ELG and/or (2) quantitative data or an explanation for those pollutants for which you have indicated "Believed Present"? ☐ Yes ☐ No	
	Table D. Certain Hazardous Substances and Asbestos		
	7.14	Have you indicated whether pollutants are "Believed Present" or "Believed Absent" for all pollutants listed in Table D for all outfalls? ☒ Yes ☐ No	
	7.15	Have you completed Table D by (1) describing the reasons the applicable pollutants are expected to be discharged and (2) by providing quantitative data, if available? ☐ Yes ☐ No	
	Table E. 2,3,7,8-Tetrachlorodibenzo-p-Dioxin (2,3,7,8-TCDD)		
	7.16	Does the facility use or manufacture one or more of the 2,3,7,8-TCDD congeners listed in the instructions, or do you know or have reason to believe that TCDD is or may be present in the effluent? ☐ Yes → Complete Table E. ☒ No → SKIP to Section 8.	
	7.17	Have you completed Table E by reporting <i>qualitative</i> data for TCDD? ☐ Yes ☐ No	
SECTION 8. USED OR MANUFACTURED TOXICS (40 CFR 122.21(g)(9))			
Used or Manufactured Toxics	8.1	Is any pollutant listed in Table B a substance or a component of a substance used or manufactured at your facility as an intermediate or final product or byproduct? ☐ Yes ☒ No → SKIP to Section 9.	
	8.2	List the pollutants below.	
	1.	4.	7.
	2.	5.	8.
	3.	6.	9.

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SECTION 9. BIOLOGICAL TOXICITY TESTS (40 CFR 122.21(g)(11))

Biological Toxicity Tests	9.1	Do you have any knowledge or reason to believe that any biological test for acute or chronic toxicity has been made within the last three years on (1) any of your discharges or (2) on a receiving water in relation to your discharge? ☐ Yes ☒ No → SKIP to Section 10.			
	9.2	Identify the tests and their purposes below.			
		Test(s)	Purpose of Test(s)	Submitted to NPDES Permitting Authority?	Date Submitted
				☐ Yes ☐ No	
				☐ Yes ☐ No	

SECTION 10. CONTRACT ANALYSES (40 CFR 122.21(g)(12))

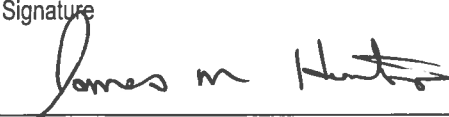
Contract Analyses	10.1	Were any of the analyses reported in Section 7 performed by a contract laboratory or consulting firm? ☐ Yes ☒ No → SKIP to Section 11.		
	10.2	Provide information for each contract laboratory or consulting firm below.		
		Laboratory Number 1	Laboratory Number 2	Laboratory Number 3
	Name of laboratory/firm			
	Laboratory address			
	Phone number			
	Pollutant(s) analyzed			

SECTION 11. ADDITIONAL INFORMATION (40 CFR 122.21(g)(13))

Additional Information	11.1	Has the NPDES permitting authority requested additional information? ☐ Yes ☒ No → SKIP to Section 12.		
	11.2	List the information requested and attach it to this application.		
	1.	4.		
	2.	5.		
	3.	6.		

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SECTION 12. CHECKLIST AND CERTIFICATION STATEMENT (40 CFR 122.22(a) and (d))

Checklist and Certification Statement	12.1	In Column 1 below, mark the sections of Form 2C that you have completed and are submitting with your application. For each section, specify in Column 2 any attachments that you are enclosing to alert the permitting authority. Note that not all applicants are required to complete all sections or provide attachments.	
		Column 1	Column 2
	☒ Section 1: Outfall Location	☐ w/ attachments	
	☒ Section 2: Line Drawing	☐ w/ line drawing	☐ w/ additional attachments
	☒ Section 3: Average Flows and Treatment	☐ w/ attachments	☐ w/ list of each user of privately owned treatment works
	☒ Section 4: Intermittent Flows	☐ w/ attachments	
	☐ Section 5: Production	☐ w/ attachments	
	☐ Section 6: Improvements	☐ w/ attachments	☐ w/ optional additional sheets describing any additional pollution control plans
	☐ Section 7: Effluent and Intake Characteristics	☐ w/ request for a waiver and supporting information ☐ w/ small business exemption request ☐ w/ Table A ☐ w/ Table C ☐ w/ Table E	☐ w/ explanation for identical outfalls ☐ w/ other attachments ☐ w/ Table B ☐ w/ Table D ☐ w/ analytical results as an attachment
	☐ Section 8: Used or Manufactured Toxics	☐ w/ attachments	
	☐ Section 9: Biological Toxicity Tests	☐ w/ attachments	
	☐ Section 10: Contract Analyses	☐ w/ attachments	
	☐ Section 11: Additional Information	☐ w/ attachments	
	☐ Section 12: Checklist and Certification Statement	☐ w/ attachments	
	12.2	Certification Statement <i>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 gather and evaluate 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 fine and imprisonment for knowing violations.</i>	
	Name (print or type first and last name)	Official title	
	James M. Houston	Owner/Operator	
	Signature 	Date signed 4-3-20	

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TABLE A. CONVENTIONAL AND NON CONVENTIONAL POLLUTANTS (40 CFR 122.21(g)(7)(iii)) ¹									
Pollutant	Waiver Requested (if applicable)	Units (specify)	Effluent				Intake (Optional)		
			Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long-Term Average Value	Number of Analyses	
] Check here if you have applied to your NPDES permitting authority for a waiver for <i>all</i> of the pollutants listed on this table for the noted outfall.									
Biochemical oxygen demand (BOD ₅)	☐	Concentration							
		Mass							
Chemical oxygen demand (COD)	☐	Concentration							
		Mass							
Total organic carbon (TOC)	☐	Concentration							
		Mass							
Total suspended solids (TSS)	☐	Concentration							
		Mass							
Ammonia (as N)	☐	Concentration							
		Mass							
Flow	☐	Rate							
Temperature (winter)	☐	°C							
Temperature (summer)	☐	°C							
pH (minimum)	☐	Standard units							
pH (maximum)	☐	Standard units							

Sampling shall be conducted according to sufficiently sensitive test procedures (i.e., methods) approved under 40 CFR 136 for the analysis of pollutants or pollutant parameters or required under 40 CFR chapter I, subchapter N or O. See instructions and 40 CFR 122.21(e)(3).

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TABLE B. TOXIC METALS, CYANIDE, TOTAL PHENOLS, AND ORGANIC TOXIC POLLUTANTS (40 CFR 122.21(g)(7)(v)) ¹									
Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent			Intake (optional)	
		Believed Present	Believed Absent		Maximum Daily Discharge (if available)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Long- Term Average Value	Number of Analyses

☐ Check here if you qualify as a small business per the instructions to Form 2C and, therefore, do not need to submit quantitative data for any of the organic toxic pollutants in Sections 2 through 5 of this table. Note, however, that you must still indicate in the appropriate column of this table if you believe any of the pollutants listed are present in your discharge.

Section 1. Toxic Metals, Cyanide, and Total Phenols									
.1	Antimony, total (7440-36-0)	☐	☒	Concentration Mass					
.2	Arsenic, total (7440-38-2)	☐	☒	Concentration Mass					
.3	Beryllium, total (7440-41-7)	☐	☒	Concentration Mass					
.4	Cadmium, total (7440-43-9)	☐	☒	Concentration Mass					
.5	Chromium, total (7440-47-3)	☐	☒	Concentration Mass					
.6	Copper, total (7440-50-8)	☐	☒	Concentration Mass					
.7	Lead, total (7439-92-1)	☐	☒	Concentration Mass					
.8	Mercury, total (7439-97-6)	☐	☒	Concentration Mass					
.9	Nickel, total (7440-02-0)	☐	☒	Concentration Mass					
.10	Selenium, total (7782-49-2)	☐	☒	Concentration Mass					
.11	Silver, total (7440-22-4)	☐	☒	Concentration Mass					

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TABLE B. TOXIC METALS, CYANIDE, TOTAL PHENOLS, AND ORGANIC TOXIC POLLUTANTS (40 CFR 122.21(g)(7)(v))¹

Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)	
		Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses
12. Thallium, total (7440-28-0)	☐	☐	☒	Concentration Mass						
13. Zinc, total (7440-66-6)	☐	☐	☒	Concentration Mass						
14. Cyanide, total (57-12-5)	☐	☐	☒	Concentration Mass						
15. Phenols, total	☐	☐	☒	Concentration Mass						

Section 2. Organic Toxic Pollutants (GC/MS Fraction—Volatile Compounds)

1.1. Acrolein (107-02-8)	☐	☐	☒	Concentration Mass						
1.2. Acrylonitrile (107-13-1)	☐	☐	☒	Concentration Mass						
1.3. Benzene (71-43-2)	☐	☐	☒	Concentration Mass						
1.4. Bromoform (75-25-2)	☐	☐	☒	Concentration Mass						
1.5. Carbon tetrachloride (56-23-5)	☐	☐	☒	Concentration Mass						
1.6. Chlorobenzene (108-90-7)	☐	☐	☒	Concentration Mass						
1.7. Chlorodibromomethane (124-48-1)	☐	☐	☒	Concentration Mass						
1.8. Chloroethane (75-00-3)	☐	☐	☒	Concentration Mass						

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TABLE B. TOXIC METALS, CYANIDE, TOTAL PHENOLS, AND ORGANIC TOXIC POLLUTANTS (40 CFR 122.21(g)(7)(v)) ¹										
Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)	
		Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses
9 2-chloroethylvinyl ether (110-75-8)	☐	☐	☒	Concentration Mass						
10 Chloroform (67-66-3)	☐	☐	☒	Concentration Mass						
11 Dichlorobromomethane (75-27-4)	☐	☐	☒	Concentration Mass						
12 1,1-dichloroethane (75-34-3)	☐	☐	☒	Concentration Mass						
13 1,2-dichloroethane (107-06-2)	☐	☐	☒	Concentration Mass						
14 1,1-dichloroethylene (75-35-4)	☐	☐	☒	Concentration Mass						
15 1,2-dichloropropane (78-87-5)	☐	☐	☒	Concentration Mass						
16 1,3-dichloropropylene (542-75-6)	☐	☐	☒	Concentration Mass						
17 Ethylbenzene (100-41-4)	☐	☐	☒	Concentration Mass						
18 Methyl bromide (74-83-9)	☐	☐	☒	Concentration Mass						
19 Methyl chloride (74-87-3)	☐	☐	☒	Concentration Mass						
20 Methylene chloride (75-09-2)	☐	☐	☒	Concentration Mass						
21 1,1,2,2-tetrachloroethane (79-34-5)	☐	☐	☒	Concentration Mass						

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TABLE B. TOXIC METALS, CYANIDE, TOTAL PHENOLS, AND ORGANIC TOXIC POLLUTANTS (40 CFR 122.21(g)(7)(v)) ¹										
Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)	
		Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses
22 Tetrachloroethylene (127-18-4)	☐	☐	☒	Concentration Mass						
23 Toluene (108-88-3)	☐	☐	☒	Concentration Mass						
24 1,2-trans-dichloroethylene (156-60-5)	☐	☐	☒	Concentration Mass						
25 1,1,1-trichloroethane (71-55-6)	☐	☐	☒	Concentration Mass						
26 1,1,2-trichloroethane (79-00-5)	☐	☐	☒	Concentration Mass						
27 Trichloroethylene (79-01-6)	☐	☐	☒	Concentration Mass						
28 Vinyl chloride (75-01-4)	☐	☐	☒	Concentration Mass						
Section 3. Organic Toxic Pollutants (GC/MS Fraction—Acid Compounds)										
.1 2-chlorophenol (95-57-8)	☐	☐	☒	Concentration Mass						
.2 2,4-dichlorophenol (120-83-2)	☐	☐	☒	Concentration Mass						
.3 2,4-dimethylphenol (105-67-9)	☐	☐	☒	Concentration Mass						
.4 4,6-dinitro-o-cresol (534-52-1)	☐	☐	☒	Concentration Mass						
.5 2,4-dinitrophenol (51-28-5)	☐	☐	☒	Concentration Mass						

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TABLE B. TOXIC METALS, CYANIDE, TOTAL PHENOLS, AND ORGANIC TOXIC POLLUTANTS (40 CFR 122.21(g)(7)(v))¹

Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)	
		Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses
1.6 2-nitrophenol (88-75-5)	☐	☐	☒	Concentration Mass						
1.7 4-nitrophenol (100-02-7)	☐	☐	☒	Concentration Mass						
1.8 p-chloro-m-cresol (59-50-7)	☐	☐	☒	Concentration Mass						
1.9 Pentachlorophenol (87-86-5)	☐	☐	☒	Concentration Mass						
1.10 Phenol (108-95-2)	☐	☐	☒	Concentration Mass						
1.11 2,4,6-trichlorophenol (88-05-2)	☐	☐	☒	Concentration Mass						
Section 4. Organic Toxic Pollutants (GC/MS Fraction—Base/Neutral Compounds)										
1 Acenaphthene (83-32-9)	☐	☐	☒	Concentration Mass						
2 Acenaphthylene (208-96-8)	☐	☐	☒	Concentration Mass						
3 Anthracene (120-12-7)	☐	☐	☒	Concentration Mass						
4 Benzidine (92-87-5)	☐	☐	☒	Concentration Mass						
5 Benzo (a) anthracene (56-55-3)	☐	☐	☒	Concentration Mass						
6 Benzo (a) pyrene (50-32-8)	☐	☐	☒	Concentration Mass						

TABLE B. TOXIC METALS, CYANIDE, TOTAL PHENOLS, AND ORGANIC TOXIC POLLUTANTS (40 CFR 122.21(g)(7)(v)) ¹										
Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)	
		Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses
7 3,4-benzofluoranthene (205-99-2)	☐	☐	☒	Concentration Mass						
8 Benzo (ghi) perylene (191-24-2)	☐	☐	☒	Concentration Mass						
9 Benzo (k) fluoranthene (207-08-9)	☐	☐	☒	Concentration Mass						
10 Bis (2-chloroethoxy) methane (111-91-1)	☐	☐	☒	Concentration Mass						
11 Bis (2-chloroethyl) ether (111-44-4)	☐	☐	☒	Concentration Mass						
12 Bis (2-chloroisopropyl) ether (102-80-1)	☐	☐	☒	Concentration Mass						
13 Bis (2-ethylhexyl) phthalate (117-81-7)	☐	☐	☒	Concentration Mass						
14 4-bromophenyl phenyl ether (101-55-3)	☐	☐	☒	Concentration Mass						
15 Butyl benzyl phthalate (85-68-7)	☐	☐	☒	Concentration Mass						
16 2-chloronaphthalene (91-58-7)	☐	☐	☒	Concentration Mass						
17 4-chlorophenyl phenyl ether (7005-72-3)	☐	☐	☒	Concentration Mass						
18 Chrysene (218-01-9)	☐	☐	☒	Concentration Mass						
19 Dibenzo (a,h) anthracene (53-70-3)	☐	☐	☒	Concentration Mass						

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TABLE B. TOXIC METALS, CYANIDE, TOTAL PHENOLS, AND ORGANIC TOXIC POLLUTANTS (40 CFR 122.21(g)(7)(v))¹

Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)	
		Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses
20 1,2-dichlorobenzene (95-50-1)	☐	☐	☒	Concentration Mass						
21 1,3-dichlorobenzene (541-73-1)	☐	☐	☒	Concentration Mass						
22 1,4-dichlorobenzene (106-46-7)	☐	☐	☒	Concentration Mass						
23 3,3-dichlorobenzidine (91-94-1)	☐	☐	☒	Concentration Mass						
24 Diethyl phthalate (84-66-2)	☐	☐	☒	Concentration Mass						
25 Dimethyl phthalate (131-11-3)	☐	☐	☒	Concentration Mass						
26 Di-n-butyl phthalate (84-74-2)	☐	☐	☒	Concentration Mass						
27 2,4-dinitrotoluene (121-14-2)	☐	☐	☒	Concentration Mass						
28 2,6-dinitrotoluene (606-20-2)	☐	☐	☒	Concentration Mass						
29 Di-n-octyl phthalate (117-84-0)	☐	☐	☒	Concentration Mass						
30 1,2-Diphenylhydrazine (as azobenzene) (122-66-7)	☐	☐	☒	Concentration Mass						
31 Fluoranthene (206-44-0)	☐	☐	☒	Concentration Mass						
32 Fluorene (86-73-7)	☐	☐	☒	Concentration Mass						

¹A Form 3510-2C (Revised 3-19)

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TABLE B. TOXIC METALS, CYANIDE, TOTAL PHENOLS, AND ORGANIC TOXIC POLLUTANTS (40 CFR 122.21(g)(7)(v)) ¹										
Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)	
		Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses
33 Hexachlorobenzene (118-74-1)	☐	☐	☒	Concentration Mass						
34 Hexachlorobutadiene (87-68-3)	☐	☐	☒	Concentration Mass						
35 Hexachlorocyclopentadiene (77-47-4)	☐	☐	☒	Concentration Mass						
36 Hexachloroethane (67-72-1)	☐	☐	☒	Concentration Mass						
37 Indeno (1,2,3-cd) pyrene (193-39-5)	☐	☐	☒	Concentration Mass						
38 Isophorone (78-59-1)	☐	☐	☒	Concentration Mass						
39 Naphthalene (91-20-3)	☐	☐	☒	Concentration Mass						
40 Nitrobenzene (98-95-3)	☐	☐	☒	Concentration Mass						
41 N-nitrosodimethylamine (62-75-9)	☐	☐	☒	Concentration Mass						
42 N-nitrosodi-n-propylamine (621-64-7)	☐	☐	☒	Concentration Mass						
43 N-nitrosodiphenylamine (86-30-6)	☐	☐	☒	Concentration Mass						
44 Phenanthrene (85-01-8)	☐	☐	☒	Concentration Mass						
45 Pyrene (129-00-0)	☐	☐	☒	Concentration Mass						

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Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)	
		Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses

46	1,2,4-trichlorobenzene (120-82-1)	☐	☒	Concentration Mass						
Section 5. Organic Toxic Pollutants (GC/MS Fraction — Pesticides)										
1	Aldrin (309-00-2)	☐	☒	Concentration Mass						
2	α-BHC (319-84-6)	☐	☒	Concentration Mass						
3	β-BHC (319-85-7)	☐	☒	Concentration Mass						
4	γ-BHC (58-89-9)	☐	☒	Concentration Mass						
5	δ-BHC (319-86-8)	☐	☒	Concentration Mass						
6	Chlordane (57-74-9)	☐	☒	Concentration Mass						
7	4,4'-DDT (50-29-3)	☐	☒	Concentration Mass						
8	4,4'-DDE (72-55-9)	☐	☒	Concentration Mass						
9	4,4'-DDD (72-54-8)	☐	☒	Concentration Mass						
10	Dieldrin (60-57-1)	☐	☒	Concentration Mass						
11	α-endosulfan (115-29-7)	☐	☒	Concentration Mass						

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TABLE B. TOXIC METALS, CYANIDE, TOTAL PHENOLS, AND ORGANIC TOXIC POLLUTANTS (40 CFR 122.21(g)(7)(v)) ¹										
Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)	
		Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses
.12 β-endosulfan (115-29-7)	☐	☐	☒	Concentration Mass						
.13 Endosulfan sulfate (1031-07-8)	☐	☐	☒	Concentration Mass						
.14 Endrin (72-20-8)	☐	☐	☒	Concentration Mass						
.15 Endrin aldehyde (7421-93-4)	☐	☐	☒	Concentration Mass						
.16 Heptachlor (76-44-8)	☐	☐	☒	Concentration Mass						
.17 Heptachlor epoxide (1024-57-3)	☐	☐	☒	Concentration Mass						
.18 PCB-1242 (53469-21-9)	☐	☐	☒	Concentration Mass						
.19 PCB-1254 (11097-69-1)	☐	☐	☒	Concentration Mass						
.20 PCB-1221 (11104-28-2)	☐	☐	☒	Concentration Mass						
.21 PCB-1232 (11141-16-5)	☐	☐	☒	Concentration Mass						
.22 PCB-1248 (12672-29-6)	☐	☐	☒	Concentration Mass						
.23 PCB-1260 (11096-82-5)	☐	☐	☒	Concentration Mass						
.24 PCB-1016 (12674-11-2)	☐	☐	☒	Concentration Mass						

TABLE B. TOXIC METALS, CYANIDE, TOTAL PHENOLS, AND ORGANIC TOXIC POLLUTANTS (40 CFR 122.21(g)(7)(v)) ¹										
Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)	
		Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses
25 Toxaphene (8001-35-2)	☐	☐	☒	Concentration Mass						

Sampling shall be conducted according to sufficiently sensitive test procedures (i.e., methods) approved under 40 CFR 136 for the analysis of pollutants or pollutant parameters or required under 40 CFR chapter I, subchapter N or O. See instructions and 40 CFR 122.21(e)(3).

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TABLE C. CERTAIN CONVENTIONAL AND NON CONVENTIONAL POLLUTANTS (40 CFR 122.21(g)(7)(vi))¹

Pollutant	Presence or Absence (check one)		Units (specify)	Effluent				Intake (Optional)	
	Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long-Term Average Value	Number of Analyses
1. Bromide (24959-67-9)	☐	☒	Concentration Mass						
2. Chlorine, total residual	☒	☐	Concentration Mass						
3. Color	☐	☒	Concentration Mass						
4. Fecal coliform	☒	☐	Concentration Mass						
5. Fluoride (16984-48-8)	☐	☒	Concentration Mass						
6. Nitrate-nitrite	☐	☒	Concentration Mass						
7. Nitrogen, total organic (as N)	☐	☐	Concentration Mass						
8. Oil and grease	☒	☐	Concentration Mass						
9. Phosphorus (as P), total (7723-14-0)	☐	☒	Concentration Mass						
10. Sulfate (as SO ₄) (14808-79-8)	☐	☒	Concentration Mass						
11. Sulfide (as S)	☐	☒	Concentration Mass						

Check here if you believe all pollutants on Table C to be **present** in your discharge from the noted outfall. You need *not* complete the "Presence or Absence" column of Table C for each pollutant.

Check here if you believe all pollutants on Table C to be **absent** in your discharge from the noted outfall. You need *not* complete the "Presence or Absence" column of Table C for each pollutant.

No testing required b/c there is no discharge.

EPA Identification Number	NPDES Permit Number	Facility Name	Outfall Number
US 00 38091	US 00 38091	Houston Processing Plant, LLC	001

Form Approved 03/05/19
OMB No. 2040-0004

TABLE C. CERTAIN CONVENTIONAL AND NON CONVENTIONAL POLLUTANTS (40 CFR 122.21(g)(7)(vi))¹

Pollutant	Presence or Absence (check one)		Units (specify)	Effluent				Intake (Optional)	
	Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long-Term Average Value	Number of Analyses
2. Sulfite (as SO ₃) (14265-45-3)	☐	☒	Concentration Mass						
3. Surfactants	☐	☒	Concentration Mass						
4. Aluminum, total (7429-90-5)	☐	☒	Concentration Mass						
5. Barium, total (7440-39-3)	☐	☒	Concentration Mass						
6. Boron, total (7440-42-8)	☐	☒	Concentration Mass						
7. Cobalt, total (7440-48-4)	☐	☒	Concentration Mass						
8. Iron, total (7439-89-6)	☐	☒	Concentration Mass						
9. Magnesium, total (7439-95-4)	☐	☒	Concentration Mass						
10. Molybdenum, total (7439-98-7)	☐	☒	Concentration Mass						
1. Manganese, total (7439-96-5)	☐	☒	Concentration Mass						
2. Tin, total (7440-31-5)	☐	☒	Concentration Mass						
3. Titanium, total (7440-32-6)	☐	☒	Concentration Mass						

TABLE C. CERTAIN CONVENTIONAL AND NON CONVENTIONAL POLLUTANTS (40 CFR 122.21(g)(7)(vi)) ¹									
Pollutant	Presence or Absence (check one)		Units (specify)	Effluent				Intake (Optional)	
	Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Long-Term Average Value	Number of Analyses	Number of Analyses
I. Radioactivity									
Alpha, total	☐	☒	Concentration Mass						
Beta, total	☐	☒	Concentration Mass						
Radium, total	☐	☒	Concentration Mass						
Radium 226, total	☐	☒	Concentration Mass						

Sampling shall be conducted according to sufficiently sensitive test procedures (i.e., methods) approved under 40 CFR 136 for the analysis of pollutants or pollutant parameters or required under 40 CFR chapter I, subchapter N or O. See instructions and 40 CFR 122.21(e)(3).

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EPA Identification Number	NPDES Permit Number	Facility Name	Outfall Number
U8 00 38091		Houston Processing Plant, LLC	

TABLE D. CERTAIN HAZARDOUS SUBSTANCES AND ASBESTOS (40 CFR 122.21(g)(7)(viii))¹

Pollutant	Presence or Absence (check one)		Reason Pollutant Believed Present in Discharge	Available Quantitative Data (specify units)
	Believed Present	Believed Absent		
Asbestos	☐	☒		
Acetaldehyde	☐	☒		
Allyl alcohol	☐	☒		
Allyl chloride	☐	☒		
Amyl acetate	☐	☒		
Aniline	☐	☒		
Benzonitrile	☐	☒		
Benzyl chloride	☐	☒		
Butyl acetate	☐	☒		
Butylamine	☐	☒		
Captan	☐	☒		
Carbaryl	☐	☒		
Carbofuran	☐	☒		
Carbon disulfide	☐	☒		
Chlorpyrifos	☐	☒		
Coumaphos	☐	☒		
Cresol	☐	☒		
Crotonaldehyde	☐	☒		
Cyclohexane	☐	☒		

BLE D. CERTAIN HAZARDOUS SUBSTANCES AND ASBESTOS (40 CFR 122.21(g)(7)(vii))¹

Pollutant	Presence or Absence (check one)		Reason Pollutant Believed Present in Discharge	Available Quantitative Data (specify units)
	Believed Present	Believed Absent		
2,4-D (2,4-dichlorophenoxyacetic acid)	☐	☒		
Diazinon	☐	☒		
Dicamba	☐	☒		
Dichlobenil	☐	☒		
Dichlone	☐	☒		
2,2-dichloropropionic acid	☐	☒		
Dichlorvos	☐	☒		
Diethyl amine	☐	☒		
Dimethyl amine	☐	☒		
Dinitrobenzene	☐	☒		
Diquat	☐	☒		
Disulfoton	☐	☒		
Diuron	☐	☒		
Epichlorohydrin	☐	☒		
Ethion	☐	☒		
Ethylene diamine	☐	☒		
Ethylene dibromide	☐	☒		
Formaldehyde	☐	☒		
Furfural	☐	☒		

TABLE D. CERTAIN HAZARDOUS SUBSTANCES AND ASBESTOS (40 CFR 122.21(g)(7)(viii)) ¹				
Pollutant	Presence or Absence (check one)		Reason Pollutant Believed Present in Discharge	Available Quantitative Data (specify units)
	Believed Present	Believed Absent		
1. Guthion	☐	☒		
1. Isoprene	☐	☒		
1. Isopropanolamine	☐	☒		
1. Kelthane	☐	☒		
1. Kepone	☐	☒		
1. Malathion	☐	☒		
1. Mercaptodimethur	☐	☒		
1. Methoxychlor	☐	☒		
1. Methyl mercaptan	☐	☒		
1. Methyl methacrylate	☐	☒		
1. Methyl parathion	☐	☒		
1. Mevinphos	☐	☒		
1. Mexacarbate	☐	☒		
1. Monoethyl amine	☐	☒		
1. Monomethyl amine	☐	☒		
1. Naled	☐	☒		
1. Naphthenic acid	☐	☒		
1. Nitrotoluene	☐	☒		
1. Parathion	☐	☒		

TABLE D. CERTAIN HAZARDOUS SUBSTANCES AND ASBESTOS (40 CFR 122.21(g)(7)(vii))¹

Pollutant	Presence or Absence (check one)		Reason Pollutant Believed Present in Discharge	Available Quantitative Data (specify units)
	Believed Present	Believed Absent		
1. Phenolsulfonate	☐	☒		
2. Phosgene	☐	☒		
3. Propargite	☐	☒		
4. Propylene oxide	☐	☒		
5. Pyrethrins	☐	☒		
6. Quinoline	☐	☒		
7. Resorcinol	☐	☒		
8. Strontium	☐	☒		
9. Strychnine	☐	☒		
10. Styrene	☐	☒		
11. 2,4,5-T (2,4,5-trichlorophenoxyacetic acid)	☐	☒		
12. TDE (tetrachlorodiphenyl ethane)	☐	☒		
13. 2,4,5-TP [2-(2,4,5-trichlorophenoxy) propanoic acid]	☐	☒		
14. Trichlorofon	☐	☒		
15. Triethanolamine	☐	☒		
16. Triethylamine	☐	☒		
17. Trimethylamine	☐	☒		
18. Uranium	☐	☒		
19. Vanadium	☐	☒		

EPA Identification Number	NPDES Permit Number	Facility Name	Outfall Number
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TABLE D. CERTAIN HAZARDOUS SUBSTANCES AND ASBESTOS (40 CFR 122.21(g)(7)(vii)) ¹				
Pollutant	Presence or Absence (check one)		Reason Pollutant Believed Present in Discharge	Available Quantitative Data (specify units)
	Believed Present	Believed Absent		
Vinyl acetate	☐	☒		
Xylene	☐	☒		
Xylenol	☐	☒		
Zirconium	☐	☒		

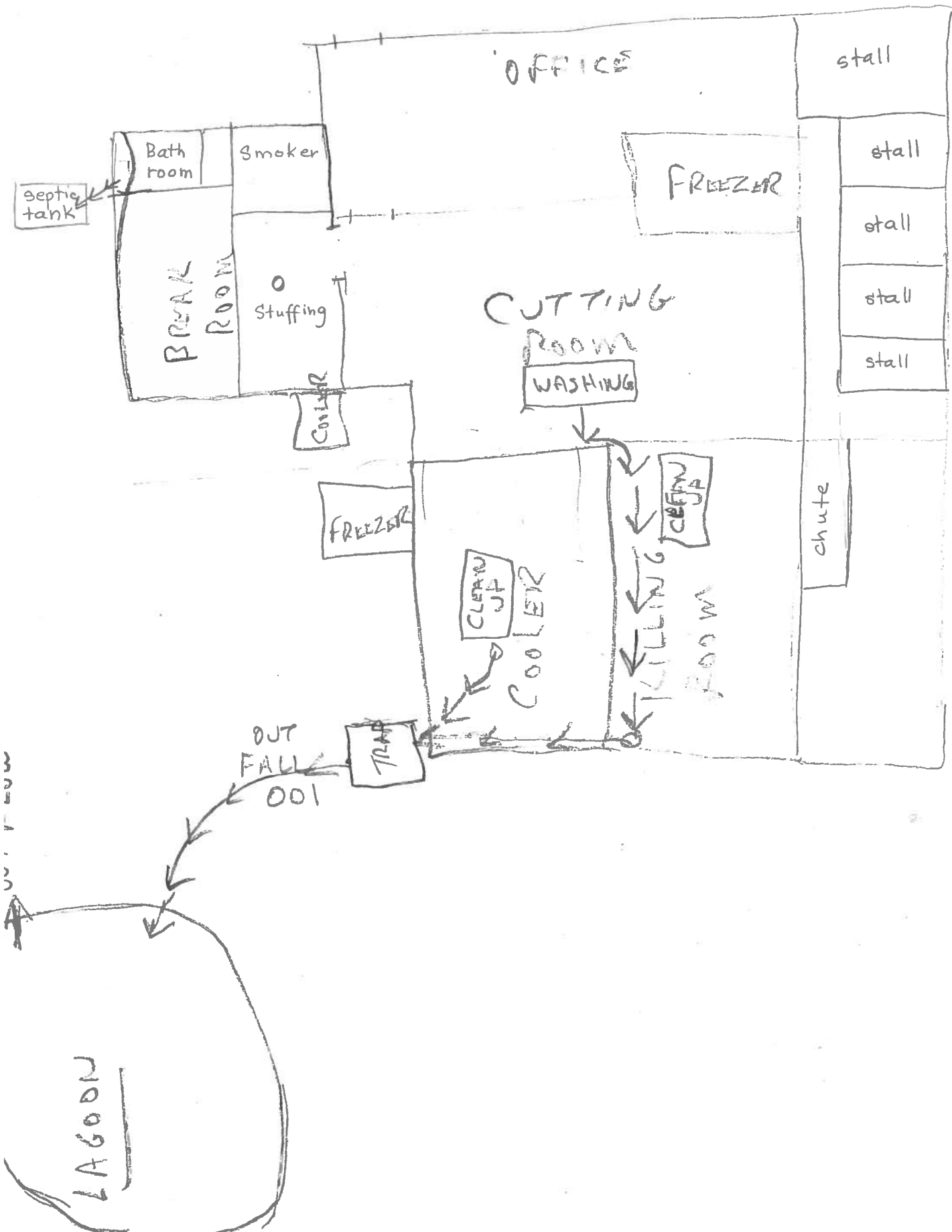
Sampling shall be conducted according to sufficiently sensitive test procedures (i.e., methods) approved under 40 CFR 136 for the analysis of pollutants or pollutant parameters or required under 40 CFR chapter I, subchapter N or O. See instructions and 40 CFR 122.21(e)(3).

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EPA Identification Number	NPDES Permit Number	Facility Name	Outfall Number
US 00 38091			

BLE E. 2,3,7,8 TETRACHLORODIBENZO P DIOXIN (2,3,7,8 TCDD) (40 CFR 122.21(g)(7)(viii))				
Pollutant	TCDD Congeners Used or Manufactured	Presence or Absence (check one)		Results of Screening Procedure
		Believed Present	Believed Absent	
2,3,7,8-TCDD	☐	☐	☒	

Houston Processing Plant





Michael Watson
SECRETARY OF STATE

Office of the Secretary of State
Jackson, Mississippi

March 19, 2020

Certificate of Reinstatement

HOUSTON PROCESSING PLANT, LLC
185 Houston Road, 185 Houston Road
Laurel, MS 39443

This Certificate is issued because the Secretary of State has determined the following:

1. The ground or grounds for dissolution/revocation did not exist or have been eliminated;
2. The corporate name is available for use; and
3. All taxes owed by the corporation have been paid

This Certificate of Reinstatement relates back to and takes effect as of the effective date of administrative dissolution/revocation and the corporation resumes carrying on its business as if the administrative dissolution/revocation has never occurred.

Given under my hand and seal of office
the 19th day of March, 2020

Michael Watson



Michael Watson
SECRETARY OF STATE

Invoice Number: 14709366

Invoice Date: 03/19/2020

Customer Information

Mr. James Houston
185 Houston Road
Laurel, Mississippi 39443

Description	Tracking Number Qty	Item Cost	Amount Paid
Reinstate Domestic - Online	2020114464	\$ 50.00	\$ 50.00
MSI Transaction Fee		\$ 3.14	\$ 3.14
Payment Details			
Invoice Total:			\$ 53.14
Payment Total:			\$ 53.14
Amount Due:			\$ 0.00
Payment Method			
Payment Type: Credit Card			

Include invoice number on all correspondence and send to:

Mississippi Secretary of State's Office
P.O. Box 136
Jackson, MS 39205

To discuss payment for Corporation items
call:
(601) 359-1633