



## INDUSTRIAL STORMWATER GENERAL PERMIT RE-COVERAGE FORM

FOR COVERAGE UNDER MISSISSIPPI'S REISSUED INDUSTRIAL STORMWATER GENERAL PERMIT MSR00 GENERAL NPDES COVERAGE NO. MSR00 1 1 6 1

## INSTRUCTIONS

The submittal of this form is required to receive coverage under the reissued Industrial Stormwater General Permit. This form must be completed and returned to the address printed at the bottom of page 2.

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.

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.

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 Industrial Stormwater Forms Package. 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).

Do not submit this form if submitting a "No Exposure Certification."

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

COVERAGE RECIPIENT INFORMATION		
CONTACT NAME & POSITION: Bill	Ashmore mar	The state of the s
EMAIL ADDRESS: Djashmore of CAblEDNE. NET		
COMPANY NAME: AShmore Wrecker Sorvice		to the same
STREET OR P.O. BOX: 1944 Hu	in 51 South	
CITY: GRENADA	STATE:	ZIP: 38901
PHONE NUMBER (INCLUDE AREA CODE	E): 662-226-7700	
FACILITY INFORMATION		and the state of t
FACILITY NAME: ASTYMORE WRELKER SERVICE		e ty two left
CONTACT NAME & POSITION: Bill		
	•	
CONTACT PHONE NUMBER (INCLUDE A	AREA CODE): <u>662 - 226 - 770</u> 6	<u> </u>
PRIMARY STANDARD INDUSTRIAL CO	LASSIFICATION (SIC) CODE & DESCRIPT	TION OF INDUSTRIAL ACTIVITY:
3		



The state of the s				
STREET: 1944 Hay 51 South				
1 .	CIP: <b>28</b> 890/			
PROVIDE THE COORDINATES OF THE PLANT ENTRANCE:				
LATITUDE: degrees minutes seconds LONGITUDE: degrees minu	tes seconds			
NEAREST NAMED RECEIVING STREAM FOR STORM WATER LEAVING THE SITE: $80348$	REEK			
IS RECEIVING STREAM ON MDEQ's 303(d) LIST?	<b>™</b> NO			
IF YES, HAS A TMDL BEEN ESTABLISHED FOR THE RECEIVING STREAM SEGMENT? YES	NO			
STORM WATER POLLUTION PREVENTION PLAN (SWPPP)				
IS A COPY OF THE SWPPP AT THE PERMITTED SITE?	YES NO			
IS THE SWPPP UP-TO-DATE AND EFFECTIVE IN CONTROLLING STORM WATER POLLUTANTS? IF NO, PLEASE ATTACH REQUIRED SWPPP AMENDMENTS (see Instructions on front page).	YES NO			
AUTO SALVAGE FACILITIES ONLY				
FOR AUTO SALVAGE FACILITIES, A REVISED SWPPP TO COMPLY WITH THE NEW PERMIT MUST B MDEQ NO LATER THAN JANUARY 31, 2022.	SE SUBMITTED TO			
DOES THE SWPPP REQUIRE CHANGES TO COMPLY WITH THE NEW PERMIT?	YES NO			
IS A REVISED COPY OF THE SWPPP ATTACHED?	YES NO			
I certify under penalty of law that this document and all attachments were prepared under my direction or superv system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Be person or persons who manage the system, or those persons directly responsible for gathering the information, the to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penaltic information, including the possibility of fines and imprisonment for knowing violations.	ased on my inquiry of the information submitted is,			
I further certify that I understand when coverage is terminated the facility is no longer authorized to discharge sto industrial activity under this general permit. I understand that discharging pollutants in storm water associated waters of the state without NPDES coverage is in violation of state law.	orm water associated with vith industrial activity to			
500/5h more 1-15-21				
Signature <sup>1</sup> Date				
Bill Ashmore mgr	<u></u>			
Printed Name <sup>1</sup> Title				
<sup>1</sup> This form shall be signed according to ACT16, T-9 of the General Permit, as follows:  - For a corporation, by a responsible corporate officer.				
- For a partnership, by a general partner.				
<ul> <li>For a sole proprietorship, by the proprietor.</li> <li>For a municipal, state or other public facility, by principal executive officer, mayor, or ranking elected or</li> </ul>	fficial.			
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

## STORM WATER POLLUTION PREVENTION PLAN

## PERMIT # MSR001161

Amendment to SWPPP Permit # MSR001161 on site description. We have built a 120 X 200 ft shop to
house our wreckers in. It is located in section DA-01, which formally was part of land that housed
salvaged vehicles. Salvage yard has been reduced to around 3 acres. Enclosed is redesigned map of site.

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U.S. Nwy 51

