



INDUSTRIAL STORMWATER GENERAL PERMIT RE-COVERAGE FORM

FOR COVERAGE UNDER MISSISSIPPI'S REISSUED
INDUSTRIAL STORMWATER GENERAL PERMIT MSR00
GENERAL NPDES COVERAGE NO. MSR00 1910

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: Dan Lyon - General Manager
EMAIL ADDRESS: daniel.r.lyon@rolls-royce.com
COMPANY NAME: Rolls-Royce
STREET OR P.O. BOX: H-1 Test Site, Building 5002
CITY: Stennis Space Center STATE: MS ZIP: 39529
PHONE NUMBER (INCLUDE AREA CODE): (317) 828-5994

FACILITY INFORMATION

FACILITY NAME: Rolls-Royce Outdoor Test Facility
Stennis Space Center, MS 39529
CONTACT NAME & POSITION: Maggie Tabor, HSE Business Partner
CONTACT PHONE NUMBER (INCLUDE AREA CODE): (228) 342-8136
PRIMARY STANDARD INDUSTRIAL CLASSIFICATION (SIC) CODE & DESCRIPTION OF INDUSTRIAL ACTIVITY: 37.24 Aircraft Engines and Parts

RECEIVED

JAN 28 2010

PHYSICAL SITE ADDRESS

STREET: HI Test Site - East of Mainline Road

CITY: Stennis Space Center COUNTY: Hancock ZIP: 39529

PROVIDE THE COORDINATES OF THE PLANT ENTRANCE:

LATITUDE: 30 degrees 22 minutes 13.04 seconds LONGITUDE: -89 degrees 34 minutes 00.30 seconds

NEAREST NAMED RECEIVING STREAM FOR STORM WATER LEAVING THE SITE: Pearl River

IS RECEIVING STREAM ON MDEQ's 303(d) LIST? YES 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 BE SUBMITTED TO MDEQ NO LATER THAN JANUARY 31, 2022.

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 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.

Daniel R. Lton
Signature¹

13/January/2021
Date

DANIEL R. LTON
Printed Name¹

General Manager
Title

¹This 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.
- 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 Pollution Control
P.O. Box 2261
Jackson, Mississippi 39225

Environmental Permits for Industrial Facilities

Request for Transfer of Permit, General Permit Coverage and/or Name Change

Instructions: For Ownership Change-Complete all Items on Page 1 (except Item VIII) and Page 2 (reverse side).
For Name Change Only-Complete Items I, II, V, VI, VII, VIII, and Page 2 (reverse side).
Note-This form should be submitted to MDEQ when a transferal date is finalized but prior to the actual transfer.

<p>Item I.</p> <p>Facility Name: <u>Rolls-Royce Outdoor Test Facility</u></p> <p>Location: (Do Not Use P.O. Box)</p> <p style="margin-left: 40px;">Street: <u>HI Test Site, Bldg 5002</u></p> <p style="margin-left: 40px;">City: <u>Stennis Space Center</u> State: <u>MS</u> Zip: <u>39529</u></p> <p>County: <u>Hancock</u></p> <p>Telephone: () _____</p>	<p>Item II.</p> <p>Responsible official after transfer or name change:</p> <p>Name: <u>Daniel Lyon</u></p> <p>Title: <u>General Manager</u></p> <p>Mailing Address:</p> <p style="margin-left: 40px;">Street/P.O. Box: <u>HI Test Site, Building 5002</u></p> <p style="margin-left: 40px;">City: <u>Stennis Space Center</u> State: <u>MS</u> Zip: <u>39529</u></p> <p>Telephone () _____</p>
<p>Item III.</p> <p>Previous Permittee¹: <u>Hamish Guthrie</u></p> <p>Mailing Address:</p> <p style="margin-left: 40px;">Street/P.O. Box: _____</p> <p style="margin-left: 40px;">City: _____ State: _____ Zip: _____</p> <p>Telephone: () _____</p>	<p>Item IV.</p> <p>New Permittee¹: _____</p> <p>Mailing Address:</p> <p style="margin-left: 40px;">Street/P.O. Box: _____</p> <p style="margin-left: 40px;">City: _____ State: _____ Zip: _____</p> <p>Telephone: () _____</p>
<p>Item V.</p> <p>Industrial Activity SIC Code: <u>3724</u></p> <p>Brief Description: <u>Aircraft Engines and Parts</u></p>	<p>Item VI.</p> <p>Will Facility Operations Change? Yes _____ No <input checked="" type="checkbox"/></p> <p>If yes, the appropriate applications and permits may required modification prior to change.</p>
<p>Item VII.</p> <p>Will Facility Name Change? Yes _____ No <input checked="" type="checkbox"/></p> <p>If Yes, Provide New Name for Permit Coverage.</p> <p>New Name: _____</p>	<p>Item VIII.</p> <p>Signature for Name Change</p> <p>Print Name: <u>DANIEL R. LYON</u></p> <p>Authorized Signature²: <u>Daniel R. Lyon</u></p> <p>Title: <u>GM</u> Date: <u>1/21/21</u></p>
<p>Item IX.</p> <p>We the undersigned requests transfer of permit(s) and/or permit coverage(s) listed on the backside of this form.</p> <p>From: _____</p> <p>To: _____ Acquisition Date: _____</p>	
<p>By signature below, the recipient certifies that they are aware of the requirements of the permit(s) and agrees to accept responsibility and liability for the permit(s) listed on the back of this document. By signature below, the previous permittee is requesting that the permit(s) and/or permit coverage(s) be transferred to the recipient. The transfer of the permit(s) or permit coverage(s) will be by written notification from the Office of Pollution Control (OPC). The OPC may require submittal of information regarding financial capability and past compliance history of the recipient.</p>	
<p>Print New Permittee¹ Name _____</p> <p>New Authorized Signature² _____</p> <p>Title _____ Date _____</p>	<p>Print Previous Permittee¹ Name _____</p> <p>Previous Authorized Signature² _____</p> <p>Title _____ Date _____</p>
<p>¹A Permittee is a company or individual that has been issued an individual permit or coverage under a general permit. ²Authorized Signature must be owner or in the case of a corporation, a corporate officer as defined in Regulations APC-S-2 and WPC-1.</p>	

Item X. Storm Water

(Check One)

- A Storm Water Pollution Prevention Plan (SWPPP) is not required for the site.
- The recipient certifies that they have received a copy of the Office of Pollution Control approved SWPPP from the original owner.
- The recipient is submitting a new SWPPP, which is attached to this form.
- A copy of the SWPPP cannot be obtained from the original owner.

Item XI. Hazardous Waste ID Number

EPA ID No. _____

(Check One)

- An EPA Hazardous Waste ID Number is not required for the site.
- The site's EPA ID Number is listed above. There is no change in the type or amount of hazardous waste generated on site.
- There is a change in the type or amount of hazardous waste generated and a Notification of Regulated Waste Activity Form is attached.

Item XII. Permit(s) and/or Coverage(s) to be Transferred

Permit Type: _____

Permit/Coverage No.: _____

Permit Issuance Date: _____

Date of General Permit Coverage: _____

Permit Expiration Date: _____

Permit Type: _____

Permit/Coverage No.: _____

Permit Issuance Date: _____

Date of General Permit Coverage: _____

Permit Expiration Date: _____

Permit Type: _____

Permit/Coverage No.: _____

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Permit/Coverage No.: _____

Permit Issuance Date: _____

Date of General Permit Coverage: _____

Permit Expiration Date: _____

OTHER INFORMATION: