

AI:24214



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MAR 16 2021

INDUSTRIAL STORMWATER GENERAL PERMIT RE-COVERAGE FORM

FOR COVERAGE UNDER MISSISSIPPI'S REISSUED
INDUSTRIAL STORMWATER GENERAL PERMIT MSR00
GENERAL NPDES COVERAGE NO. MSR00 1 7 6 9

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: Craig W. Borgmeyer, Director of Environmental Engineering
EMAIL ADDRESS: cborgmeyer@kcsouthern.com
COMPANY NAME: The Kansas City Southern Railway Co.
STREET OR P.O. BOX: P.O. Box 219335
CITY: Kansas City STATE: MO ZIP: 64121-9335
PHONE NUMBER (INCLUDE AREA CODE): (816) 983-1603

FACILITY INFORMATION

FACILITY NAME: KCS - Gulfport Yard
CONTACT NAME & POSITION: Jason Finch, Mechanical Foreman
CONTACT PHONE NUMBER (INCLUDE AREA CODE): (228) 314-4811
PRIMARY STANDARD INDUSTRIAL CLASSIFICATION (SIC) CODE & DESCRIPTION OF INDUSTRIAL ACTIVITY:
4 0 1 1 Land Transportation & Warehousing

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INVESTIGATION REPORT

REPORT NO. 100-100000-1000

DATE OF REPORT: 03/18/2021
BY: [Name]

1. **Introduction**
This report provides a detailed account of the investigation conducted on [Date] at [Location]. The purpose of the investigation was to determine the cause of the incident and identify any responsible parties. The investigation was conducted in accordance with the procedures outlined in the [Manual/Policy].

2. **Background**
The incident occurred on [Date] at approximately [Time]. It involved [Description of Incident]. The initial report was received from [Source].

3. **Investigation Methodology**
The investigation was conducted using the following methods:
- Interviewing witnesses and personnel involved in the incident.
- Reviewing security camera footage and other relevant records.
- Conducting a physical inspection of the area where the incident occurred.
- Consulting with experts in the field of [Relevant Field].

4. **Findings**
The investigation has identified the following findings:
- [Finding 1]
- [Finding 2]
- [Finding 3]

5. **Conclusion**
Based on the findings of the investigation, it is concluded that the incident was caused by [Cause]. The responsible parties are [Names].

6. **Recommendations**
The following recommendations are made to prevent a recurrence of the incident:
- [Recommendation 1]
- [Recommendation 2]
- [Recommendation 3]

PHYSICAL SITE ADDRESS

STREET: 2106 27th Avenue

CITY: Gulfport COUNTY: Harrison ZIP: 39502

PROVIDE THE COORDINATES OF THE PLANT ENTRANCE:

LATITUDE: 30 degrees 22 minutes 36 seconds LONGITUDE: 89 degrees 05 minutes 35.8 seconds

NEAREST NAMED RECEIVING STREAM FOR STORM WATER LEAVING THE SITE: Brickyard Bayou

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? YES NO
IF NO, PLEASE ATTACH REQUIRED SWPPP AMENDMENTS (see Instructions on front page).

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? NOT APPLICABLE YES NO

IS A REVISED COPY OF THE SWPPP ATTACHED? NOT APPLICABLE 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.

Craig W. Borgmeyer

Signature¹

3/11/2021

Date

Craig W. Borgmeyer

Printed Name¹

Director, Env. Engineering

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



8234 Marshall Drive
Lenexa, Kansas 66214
913.340.3160
www.tishazmat.com

March 15, 2021

TRANSMITTAL LETTER

Chief, Environmental Permits Division
MS Department of Environmental Quality
Office of Pollution Control
515 East Amite St.
Jackson, MS 39201

**RE: ISGP RE-COVERAGE FORMS
Kansas City Southern (KCS) Railroad Facilities**

Quantity	Description
1	KCS - Corinth Yard; MSR001537
1	KCS - Gulfport Yard; MSR001769
1	KCS - High Oak Yard; MSR001763
1	KCS - Meridian Yard; MSR002092

For Your:	Use	Sent Via:	Regular Mail
<input checked="" type="checkbox"/>	Approval	<input type="checkbox"/>	UPS
<input type="checkbox"/>	Review/Comment	<input checked="" type="checkbox"/>	Federal Express
<input type="checkbox"/>	Information	<input type="checkbox"/>	Courier
<input type="checkbox"/>	Other	<input type="checkbox"/>	Other

Comments: Please find enclosed, one re-coverage form for each of the above-referenced KCS facilities. If you have any questions, please contact me by email at ceaton@tishazmat.com or by phone at (913) 634-3893. Thank you.

Transmitted By:

Chris Eaton
Sr. Environmental Scientist

cc: Craig Borgmeyer, KCS Director of Environmental Engineering

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MAR 16 REC'D
Dept. of Environmental Quality