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MAR 29 2021

INDUSTRIAL STORMWATER GENERAL PERMIT RE-COVERAGE FORM MDEQ

FOR COVERAGE UNDER MISSISSIPPI'S REISSUED INDUSTRIAL STORMWATER GENERAL PERMIT MSR00 GENERAL NPDES COVERAGE NO. MSR00 2181

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: Jack L. Moran, President			
EMAIL ADDRESS:	wendycmorgan@bellsouth.net		
COMPANY NAME:	Southern Metals Company of Mississippi		
STREET OR P.O. BOX: P. O. Box 782			
CITY: Laurel	STATE: Mississippi	ZIP: 39441	
PHONE NUMBER (INCLUDE AREA CODE): 601-649-7475			
FACILITY INF			
FACILITY NAME:	Southern Metals Company of Mississippi		
CONTACT NAME	E & POSITION:Jack L. Moran, President		
CONTACT PHONE	NUMBER (INCLUDE AREA CODE): 601-649-7475		
PRIMARY STANDARD INDUSTRIAL CLASSIFICATION (SIC) CODE & DESCRIPTION OF INDUSTRIAL ACTIVITY: 5 5 9 9 Industrial and Commercial Machining & Equipment			



PHYSICAL SITE ADDRESS STREET: 144 Don Curt Road			
CITY: Laurel COUNTY: Jones	ZIP: 39440		
PROVIDE THE COORDINATES OF THE PLANT ENTRANCE:			
LATITUDE: 31 degrees 39 minutes 37 seconds LONGITUDE: 089 degrees 08 minutes 55 seconds			
NEAREST NAMED RECEIVING STREAM FOR STORM WATER LEAVING THE SITE: Tallahalla Creek			
IS RECEIVING STREAM ON MDEQ's 303(d) LIST?	YES NO		
IF YES, HAS A TMDL BEEN ESTABLISHED FOR THE RECEIVING STREAM SE	GMENT? 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 IF NO, PLEASE ATTACH REQUIRED SWPPP AMENDMENTS (see Instructions on from			
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.			
Signature Musar	$\frac{3-29-21}{\text{Date}}$		
Jack L. Moran Presi			
Printed Name ¹ Title			
¹ 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. 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.			

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

SOUTHERN METALS CO OF AISS

MAILING ADDRESS P.O. BOX 782 LAUREL, MS 39441 TELEPHONE:(601-649-7475) FAX: (601-425-1617)

SHIPPING ADDRESS 144 DONCURT ROAD LAUREL.MS 39440

March 25, 2021

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

RE: Ti

Transmittal of Industrial Stormwater General Permit Re-Coverage Form for

Southern Metals Company of Mississippi, Laurel, Mississippi

Dear Ms. Rudolph:

In reference to the captioned subject matter, I am pleased to provide you with the enclosed Industrial Stormwater General Permit Re-Coverage Form for our facility to continue to be covered under the Industrial General Permit.

Sincerely.

J. Ľ. Moran President

JM/IIm

Enclosures

cc: Brian E. Smith, P.E., SEMS

Jack E. Daugherty, PE, CIH, SEMS

C. Maran

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MAR 29 RECT

Dept. of Environmental Quality