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INDUSTRIAL STORMWATER GENERAL PERMIT RE-COVERAGE FORM

FOR COVERAGE UNDER MISSISSIPPI'S REISSUED
INDUSTRIAL STORMWATER GENERAL PERMIT MSR00
GENERAL NPDES COVERAGE NO. MSR00 0780

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: Kate Sams Peavy, Vice President of Operations

EMAIL ADDRESS: kate.sams@cherokeebbrick.com

COMPANY NAME: Tri-State Brick, LLC

STREET OR P.O. BOX: P.O. Box 4567

CITY: Macon STATE: GA ZIP: 31213

PHONE NUMBER (INCLUDE AREA CODE): (478) 781-6801

FACILITY INFORMATION

FACILITY NAME: Tri-State Brick Plant

CONTACT NAME & POSITION: Kate Sams Peavy, Vice President of Operations

CONTACT PHONE NUMBER (INCLUDE AREA CODE): (478) 781-6801

PRIMARY STANDARD INDUSTRIAL CLASSIFICATION (SIC) CODE & DESCRIPTION OF INDUSTRIAL ACTIVITY:
3 2 5 1 Manufacturing Brick & Structural Clay Tile

m

PHYSICAL SITE ADDRESS

STREET: 2050 Forest Avenue

CITY: Jackson COUNTY: Hinds ZIP: 39213

PROVIDE THE COORDINATES OF THE PLANT ENTRANCE:

LATITUDE: 32 degrees 22 minutes 15.7 seconds LONGITUDE: -90 degrees 13 minutes 16.7 seconds

NEAREST NAMED RECEIVING STREAM FOR STORM WATER LEAVING THE SITE: Unnamed Tributary to Town Creek & Unnamed Tributary to Hanging Moss Creek

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 N/A

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

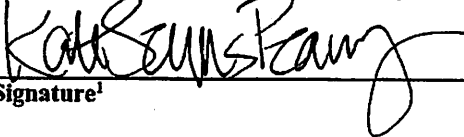
FOR AUTO SALVAGE FACILITIES, A REVISED SWPPP TO COMPLY WITH THE NEW PERMIT MUST BE SUBMITTED TO MDEQ NO LATER THAN JANUARY 31, 2022.

DOES THE SWPPP REQUIRE CHANGES TO COMPLY WITH THE NEW PERMIT? 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.


Signature¹

3/19/2021
Date

Kate Sams Peavy
Printed Name¹

Vice President of Operation
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

HHNT

**HODGES, HARBIN,
NEWBERRY & TRIBBLE, INC.**

Consulting Engineers

March 24, 2021

Ms. Florance Bass, P.E., BCEE
Office of Pollution Control
Environmental Permits Division
Mississippi Department of Environmental Quality
515 East Amite Street
Jackson, MS 39201

**Re: Tri-State Brick, LLC
Baseline Storm Water General Permit Re-Coverage Form
General NPDES No. MSR00078
HHNT Project No. 1715-024-13**

Dear Ms. Bass:

Enclosed is the Re-Coverage Form to maintain coverage under the Baseline Storm Water General Permit for the Tri-State Brick, LLC – Tri-State Brick Plant.

Should you have any questions, please call.

Sincerely,

HODGES, HARBIN, NEWBERRY & TRIBBLE, INC.



Clint L. Courson, CHMM
Environmental Scientist

CLC/mp

Enclosure

cc: Kate Sams Peavy (w/ enclosure)
Whitley Maddox (w/ enclosure)
Ron Porter (w/ enclosure)

Mike Peavy (w/ enclosure)
Don Crowell (w/ enclosure)
Sam Abney (w/ enclosure)

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