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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 1 7 9 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: Adrian Fayard, Purchasing Agent
EMAIL ADDRESS: afayard@wadeservices.com
COMPANY NAME: Wade Services Inc.
STREET OR P.O. BOX: P.O. Drawer 399
CITY: Ellisville STATE: MS ZIP: 39437
PHONE NUMBER (INCLUDE AREA CODE): O: 601-399-1900 C: 601-580-8399

FACILITY INFORMATION

FACILITY NAME: Wade Services Inc.

CONTACT NAME & POSITION: Adrian Fayard, Purchasing Agent

CONTACT PHONE NUMBER (INCLUDE AREA CODE): O: 601-399-1900 C: 601-580-8399

PRIMARY STANDARD INDUSTRIAL CLASSIFICATION (SIC) CODE & DESCRIPTION OF INDUSTRIAL ACTIVITY:
3 / 1 5 3715: Manufacture Flatbed Tractor Trailers

PHYSICAL SITE ADDRESS

STREET: 500 Eastview Drive

CITY: Laurel COUNTY: Jones ZIP: 39440**PROVIDE THE COORDINATES OF THE PLANT ENTRANCE:**LATITUDE: 31 degrees 43 minutes 52 seconds LONGITUDE: -89 degrees 04 minutes 56 secondsNEAREST NAMED RECEIVING STREAM FOR STORM WATER LEAVING THE SITE: Dry Swamp CreekIS RECEIVING STREAM ON MDEQ's 303(d) LIST? ☐ YES ☒ NOIF 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 ☐ NOIS 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 ☐ NOIS 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.

Signature¹3/22/2021

Date

Gaylor WadePrinted Name¹President

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

Mailing Address:
P.O. Drawer 399
Ellisville, MS 39437



Office: (601) 399-1900
FAX: (601) 426-3525

March 22, 2021



Certified Mail #: 7017 3380 0000 5004 7188

Chief, Environmental Permits Division
MDEQ, OPC
P.O. Box 2261
Jackson, MS 39225

RE: *Wade Services, Inc.*
500 Eastview Drive, Jones County, Laurel, MS 39443
Industrial Storm Water Permit Recoverage
AIID #34917 Permit #MSR001719
1791

Chief:

Wade Services, Inc. (Wade Services) submits this Industrial storm water general permit recoverage form for the above referenced facility.

If you have questions or need additional information, contact me or Jason Musgrove (601-319-6870) at your convenience. Thank you for your assistance in this matter.

Sincerely,

Wade Service, Inc.

Gaylor Wade
President

Attachment: Industrial Storm Water General Permit Recoverage