## MSR10 <u>84</u> <u>@</u> <u>@</u>

(NUMBER TO BE ASSIGNED BY STATE)

APPLICANT IS THE:   OWNER PRIME CONTRACTOR						
OWNER CONTACT INFORMATION						
OWNER CONTACT PERSON: Andy Fornea						
OWNER COMPANY LEGAL NAME: A.S. Fornea Construction						
OWNER STREET OR P.O. BOX: 1015 North Lamar Boulevard						
OWNER CITY: Oxford STATE: Mississippi	ZIP: 3865	55				
OWNER CITY: Oxford  OWNER PHONE #: (601 )310-1225  OWNER EMAIL: andy@asfornea.co	om					
PRIME CONTRACTOR CONTACT INFORMATION						
PRIME CONTRACTOR CONTACT PERSON: Andy Fornea						
PRIME CONTRACTOR COMPANY LEGAL NAME: A.S. Fornea Constructio						
PRIME CONTRACTOR STREET OR B O POY. 1015 North Lamar Boulevard						
PRIME CONTRACTOR CITY: Oxford STATE: Mississippi	zip: 386	555				
PRIME CONTRACTOR STREET OR F.O. BOX:  PRIME CONTRACTOR CITY: Oxford  STATE: Mississippi  PRIME CONTRACTOR PHONE #: (601)310-122! PRIME CONTRACTOR EMAIL: andy	@asfornea.	com				
FACILITY SITE INFORMATION						
	FACILITY SITE NAME: Ricmond Property Development					
FACILITY SITE ADDRESS (If the physical address is not available, please indicate the nearest named indicate the beginning of the project and identify all counties the project traverses.)	road. For linear	r projects				
STREET: Lynn Lane CITY: Starkville STATE: Mississippi COUNTY: Oktibbeha		750				
	ZIP: <u>39</u>	9759				
FACILITY SITE TRIBAL LAND ID (N/A If not applicable):	49.05					
	LATITUDE: 33 degrees 26 minutes 46.04 seconds LONGITUDE: 88 degrees 48 minutes 49.05 seconds					
LAT & LONG DATA SOURCE (GPS (Please GPS Project Entrance/Start Point) or Map Interpolation): GPS						
TOTAL ACREAGE THAT WILL BE DISTURBED 1: 4.99						
IS THIS PART OF A LARGER COMMON PLAN OF DEVELOPMENT?	YES□	NO □				
IF YES, NAME OF LARGER COMMON PLAN OF DEVELOPMENT:  AND PERMIT COVERAGE NUMBER: MSR10						
ESTIMATED CONSTRUCTION PROJECT START DATE:	2021-06					
ESTIMATED CONSTRUCTION PROJECT END DATE.	2022-06					
ESTIMATED CONSTRUCTION PROJECT END DATE:	YYYY-MM-DD					
DESCRIPTION OF CONSTRUCTION ACTIVITY: Clearing and Earthwork to build Proposed Condo Complex						
PROPOSED DESCRIPTION OF PROPERTY USE AFTER CONSTRUCTION HAS BEEN COMPLETED: Residential Condos						
SIC Code NAICS Code						

NEAREST NAMED RECEIVING STREAM: Hollis Creek				
IS RECEIVING STREAM ON MISSISSIPPI'S 303(d) LIST OF IMPAIRED WATER BODIES? (The 303(d) list of impaired waters and TMDL stream segments may be found on M http://www.deq.state.ms.us/MDEQ.nsf/page/TWB_Total_Maximum_Daily_Load_Section)	YES□ DEQ's web site:	NO☑		
HAS A TMDL BEEN ESTABLISHED FOR THE RECEIVING STREAM SEGMENT?	YES□	NO☑		
ARE THERE RECREATIONAL STREAMS, PRIVATE/PUBLIC PONDS OR LAKES WITHIN ½ MILE DOWNSTREAM OF PROJECT BOUNDRY THAT MAY BE IMPACTED ACTIVITY?	YES□ BY THE CONS	NO ☑ TRUCTION		
EXISTING DATA DESCRIBING THE SOIL (for linear projects please describe in SWPPP):				
WILL FLOCCULANTS BE USED TO TREAT TURBIDITY IN STORM WATER?	YES□	NO□		
IF YES, INDICATE THE TYPE OF FLOCCULANT.  □ ANIONIC POLYACRYL  □ OTHER	IMIDE (PAM)			
IF YES, DOES THE SWPPP DESCRIBE THE METHOD OF INTRODUCTION, THE LOCATION OF INTRODUCTION AND THE LOCATION OF WHERE FLOCCULATED MATERIAL WILL SETTLE? YES $\Box$ NO $\Box$				

<sup>&</sup>lt;sup>1</sup>Acreage for subdivision development includes areas disturbed by construction of roads, utilities and drainage. Additionally, a housesite of at least 10,000 ft<sup>2</sup> per lot (entire lot, if smaller) shall be included in calculating acreage disturbed.

# DOCUMENTATION OF COMPLIANCE WITH OTHER REGULATIONS/REQUIREMENTS COVERAGE UNDER THIS PERMIT WILL NOT BE GRANTED UNTIL ALL OTHER REQUIRED MDEQ PERMITS AND APPROVALS ARE SATISFACTORILY ADDRESSED

IS LC	NOI FOR A FACILITY THAT WILL REQUIRE OTHER PERMITS?		YES □	NO □	
		_			
IF YE	CS, CHECK ALL THAT APPLY: ☐ AIR ☐ HAZARDOUS WASTE	Ш	PRETREATMI	ENT	
	$\square$ water state operating $\square$ individual npdes		OTHER:		
IS THE PROJECT REROUTING, FILLING OR CROSSING A WATER CONVEYANCE  YES  NO  OF ANY KIND? (If yes, contact the U.S. Army Corps of Engineers' Regulatory Branch for permitting requirements.)					
IF THE PROJECT REQUIRES A CORPS OF ENGINEER SECTION 404 PERMIT, PROVIDE APPROPRIATE DOCUMENTATION THAT:					
•	The project has been approved by individual permit, or				
•	The work will be covered by a nationwide permit and NO NOTIFICATION to the	Corp	s is required, or		
•	The work will be covered by a nationwide or general permit and NOTIFICATION	to th	e Corps is requir	ed	
IS A I	LAKE REQUIRING THE CONSTRUCTION OF A DAM BEING PROPOSED? s, provide appropriate approval documentation from MDEQ Office of Land and Wa	iter, l	YES □ Dam Safety.)	NO 🗹	
IF THE PROJECT IS A SUBDIVISION OR A COMMERCIAL DEVELOPMENT, HOW WILL SANITARY SEWAGE BE DISPOSED? Check one of the following and attach the pertinent documents.					
Existing Municipal or Commercial System. Please attach plans and specifications for the collection system and the associated "Information Regarding Proposed Wastewater Projects" form or approval from County Utility Authority in Hancock, Harrison, Jackson, Pearl River and Stone Counties. If the plans and specifications can not be provided at the time of LCNOI submittal, MDEQ will accept written acknowledgement from official(s) responsible for wastewater collection and treatment that the flows generated from the proposed project can and will be transported and treated properly. The letter must include the estimated flow.					
	Collection and Treatment System will be Constructed. Please attach a copy of the copermit from MDEQ or indicate the date the application was submitted to MDEQ (I	over Date:	of the NPDES di	scharge )	
	Individual Onsite Wastewater Disposal Systems for Subdivisions Less than 35 Lots. Please attach a copy of the Letter of General Acceptance from the Mississippi State Department of Health or certification from a registered professional engineer that the platted lots should support individual onsite wastewater disposal systems.				
	Individual Onsite Wastewater Disposal Systems for Subdivisions Greater than 35 Lots. A determination of the feasibility of installing a central sewage collection and treatment system must be made by MDEQ. A copy of the response from MDEQ concerning the feasibility study must be attached. If a central collection and wastewater system is not feasible, then please attach a copy of the Letter of General Acceptance from the State Department of Health or certification from a registered professional engineer that the platted lots should support individual onsite wastewater disposal systems.				
INDI	CATE ANY LOCAL STORM WATER ORDINANCE WITH WHICH THE PROJE	ECT	MUST COMPL	Y:	
City of Starkville Unified Development Code: Stormwater Management Ordinance Section 16.9					

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 fine and imprisonment for knowing violations.

Signature of Applicant<sup>1</sup> (owner or prime contractor)

7/10/19 Date Signed

Andly torned Printed Name Meneger Title

<sup>1</sup>This application shall be signed 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

Please submit the LCNOI form to:

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

### PRIME CONTRACTOR CERTIFICATION

#### LARGE CONSTRUCTION GENERAL PERMIT

Coverage No. MSR10

County

(Fill in your Certificate of Coverage Number and County)



By completing and submitting this form to MDEQ, the prime contractor is certifying that (1) they have operational control over the erosion and sediment control specifications (including the ability to make modifications to such specifications) or (2) they have day-to-day operational control of those activities at the site necessary to ensure compliance with the SWPPP and applicable permit conditions.

The owner(s) of the property and the prime contractor associated with regulated construction activity on the property have joint and severable responsibility for compliance with the permit. Notwithstanding any permit condition to the contrary, the coverage recipient and any person who causes pollution of waters of the state or places waste in a location where they are likely to cause pollution of any waters of the state shall remain responsible under applicable federal and state laws and regulations and applicable permits.

PRIME CONTRACTOR INFORMATION						
PRIME CONTRACTOR CONTACT PERSON: Andy Forne	PHONE NUMBER: 601310-1225					
PRIME CONTRACTOR COMPANY: A.S. Fornea Cons	truction					
PRIME CONTRACTOR STREET (P.O. BOX): 1015 North Lamar Boulevaurd						
PRIME CONTRACTOR CITY: Oxford	STATE: MS ZIP: 39759					
E-MAIL ADDRESS: andy@asfornea.com						
OWNER INFORMATION						
OWNER CONTACT PERSON: Andy Fornea	PHONE NUMBER: (601,310-1225					
OWNER COMPANY NAME: A.S. Fornea Construction	n					
PROJECT INFORMATION						
PROJECT NAME: Ritchmond Property Development						
DESCRIPTION OF CONSTRUCTION ACTIVITY: Clearing and Earthwork to build Condos						
PHYSICAL SITE ADDRESS (If the physical address is not available indicate the nearest named road. For linear projects, indicate the beginning of the project and identify all counties the project traverses.)  STREET: Lynn Lane						
	CY: Oktibbeha					
I certify that I am the prime contractor for this project and will comply with all the requirements in the above referenced general NPDES permit. I further 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 fine and imprisonment for knowing violations.						
Prime Contractor Signature	Date Signed					
Printed Name <sup>1</sup>	Title					
<ul> <li>This application shall be signed as follows:</li> <li>For a corporation, by a responsible corporate officer.</li> <li>For a partnership, by a general partner.</li> <li>For a sole proprietorship, by the proprietor.</li> <li>For a municipal, state or other public facility, by principal executive officer, mayor, or ranking elected official.</li> </ul>	This Prime Contractors Certification form shall be submitted to:  Chief, Environmental Permits Division MS Department of Environmental Quality, Office of Pollution Control P.O. Box 2261 Jackson, Mississippi 39225					

Revised: 10/25/16