AI: 54065

DRY LITTER POULTRY ANIMAL FEEDING OPERATION GENERAL PERMIT NOTICE OF INTENT (DLPNOI)

COVERAGE NUMBER: MSG20 1634. For re-coverage, the coverage number must be completed for your specific project or this form will be considered incomplete and returned. The coverage number can be found at the bottom left corner of your previous Certificate of Coverage or in the subject heading of the Letter of Instruction for Re-coverage.

I. GENERAL INFORMATION

A. CONTACT AND FACILITY INFORMATION

Name of Owner: Ronald Ensz

Facility Name: Ronald Ensz

Mailing Address:

Street or P.O. Box: 1614 Whispering Pines Rd

City: Crawford State: Ms Zip: 39743

Physical Site Address:

Street (can not be a P.O. Box) 1614 Whispering Pines Rd.

City: Crawford State: Ms Zip: 39743

County: Lowndes

(For new facilities) Latitude (degrees/min/sec): _____ Longitude: _____

(For new facilities) Nearest named receiving stream: _____

Facility Telephone No. (Include Area Code): 662-435-9830

Facility Fax No. (Include Area Code): _____

Contact Cell Phone No. (Include Area Code): 662-435-9830

Other Contact Phone Numbers (Include Area Code): _____

Contact Email : _____

B. ACTIVITY TYPE (Check all that apply)

☒ Existing operation NOT proposing expansion. Number of existing houses: 6

☐ Existing operation of an incinerator(s). Number of existing incinerator(s): _____

☐ New or expanding operation. Number of proposed houses: ____ Number of proposed incinerators: ____

ML

III. CONSTRUCTION AND/OR OPERATION OF A POULTRY MORTALITY INCINERATOR

☒ No, there is no poultry mortality incineration equipment located at the facility. If at a future date you wish to construct and/or operate poultry mortality incineration equipment, you must submit an updated DLPNOI by completing Sections IA, III and IV. Constructing and operating poultry mortality incineration equipment without a modified coverage or issuance of individual permits is a violation of state law.

☐ Yes, there is mortality incineration equipment located at the facility. Complete section below:

MORTALITY INCINERATION EQUIPMENT

For Existing Facilities:
Has the facility changed the number or type of incinerators, or the fuel type burned?

☐ No ☐ Yes – Identify Changes: _____

For New Facilities:
Manufacturer Name: _____ Model Number: _____

Capacity (tons/hour): _____ Fuel Type: _____

IV. CERTIFICATION

Note: This NOI shall be signed according to Conditions T-17 and T-18 found in ACT 6 of the Dry Litter Poultry Animal Feeding Operations Multimedia General Pollution Control Permit No. MSG20.

- For a corporation, by a responsible corporate officer.
- For a partnership, by a general partner.
- For a sole proprietorship, by the proprietor.

I understand that my nutrient management plan identified Section II. D. expires five years from the date it was developed and that an updated nutrient management plan must be submitted to MDEQ prior to its expiration date.

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.

I further certify that the project continues as described in the original notice of intent. Also, I certify that I understand when coverage is terminated I am no longer authorized to operate activities identified under this general permit and to do so without proper permit coverage is in violation of state law.

Ronald Ensz — 6/16/21

Signature of Responsible Official — *Date*

Ronald Ensz — Owner

Printed Name — *Title*

II. DRY LITTER POULTRY FEEDING OPERATION CHARACTERISTICS

A. TYPE AND AMOUNT OF CHICKENS

For Existing Facilities:
Has the facility changed the number of houses or animal type (ie. broilers or layers)?

☑ No ☐ Yes – Identify Changes: _____

For New Facilities:
Check type and indicate amount

☐ Broiler (SIC 0251): _____ ☐ Pullet/Breeder (0252): _____

B. CONTRACT INFORMATION

Is this facility a contract operation? ☐ No ☑ Yes- Integrator Name: Pco

C. TYPE OF DRY LITTER STORAGE AND CAPACITY

For Existing Facilities:
Has the facility changed the litter storage type or the capacity?

☑ No ☐ Yes – Identify Changes: _____

For New Facilities:
List type of dry litter storage and capacity (tons): _____

D. NUTRIENT MANAGEMENT PLAN

If you do not have a current Comprehensive Nutrient Management Plan then one must be submitted, if your CNMP is current then complete the dates below:

Development Date: 6-16-2021 Expiration Date: 5-16-2026

The comprehensive nutrient management plan (CNMP) identified above expires five years from the date it was developed and an updated nutrient management plan must be submitted to MDEQ prior to its expiration date.

COLUMBUS SERVICE CENTER
2282 MARTIN LUTHER KING JR DR STE 1
COLUMBUS, MS 39705
(662) 328-5921

Conservation Plan

RONALD ENSZ
1614 WHISPERING PINES RD
CRAWFORD, MS 39743

Install the conservation practices, enhancements, and activities according to the implementation requirements, designs, construction plans, or other documents that facilitate meeting the applicable NRCS technical criteria. If you do not have such information, contact your local office before starting to install your conservation practices, enhancements, and activities.

Associated Ag Land

Tract: 6545

Comprehensive Nutrient Management Plan - Applied (103)

All planned practices contained in the written Comprehensive Nutrient Management Plan are applied according to NRCS standards and specifications.

Field	Planned Amount	Month	Year	Applied Amount	Date
104	1.00 No	06	2021	1.00 No	06/2021

Comprehensive Nutrient Management Plan - Written (102)

The written site specific Comprehensive Nutrient Management Plan will meet the planning criteria described in the Field Office Technical Guide.

Field	Planned Amount	Month	Year	Applied Amount	Date
104	1.00 No	06	2021	1.00 No	06/2021

CERTIFICATION OF PARTICIPANTS

RONALD ENSZ — DATE: 6-16-21

CERTIFICATION OF:

CERTIFIED PLANNER — DATE: 6-16-2021

CONSERVATION DISTRICT

LOWNDES COUNTY SOIL & WATER CONSERVATION DISTRICT — DATE: 6/16/21

PUBLIC BURDEN STATEMENT

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collections is 0578-0013. The time required to complete this information collection is estimated to average 45/0.75 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection information.

PRIVACY ACT

The above statements are made in accordance with the Privacy Act of 1974 (5 U.S.C 522a). Furnishing this information is voluntary; however failure to furnish correct, complete information will result in the withholding or withdrawal of such technical or financial assistance. The information may be furnished to other USDA agencies, the Internal Revenue Service, the Department of Justice, or other state or federal law enforcement agencies, or in response to orders of a court, magistrate, or administrative tribunal.

USDA NON-DISCRIMINATION STATEMENT

The U.S. Department of Agriculture (USDA) prohibits discrimination against its customers. If you believe you experienced discrimination when obtaining services from USDA, participating in a USDA program, or participating in a program that receives financial assistance from USDA, you may file a complaint with USDA. Information about how to file a discrimination complaint is available from the Office of the Assistant Secretary for Civil Rights. USDA prohibits discrimination in all its programs and activities on the basis of race, color, national origin, age, disability, and where applicable, sex (including gender identity and expression), marital status, familial status, parental status, religion, sexual orientation, political beliefs, genetic information, reprisal, or because all or part of an individual's income is derived from any public assistance program. (Not all prohibited bases apply to all programs.) To file a complaint of discrimination, complete, sign, and mail a program discrimination complaint form, available at any USDA office location or online at www.ascr.usda.gov, or write to:

USDA Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW.
Washington, DC 20250-9410

Or call toll free at (866) 632-9992 (voice) to obtain additional information, the appropriate office or to request documents. Individuals who are deaf, hard of hearing, or have speech disabilities may contact USDA through the Federal Relay service at (800) 877-8339 or (800) 845-6136 (in Spanish). USDA is an equal opportunity provider, employer, and lender. Persons with disabilities who require alternative means for communication of program information (e.g., Braille, large print, audiotape, etc.) should contact USDA's TARGET Center at (202) 720-2600 (voice and TDD).

Mississippi Department of Environmental Quality
Office of Pollution Control – Environmental Permits Division
POST OFFICE BOX 2261 • JACKSON, MS 39225-2261
TEL: (601) 961-5171 • FAX: (601) 354-6612
www.deq.state.ms.us

DRY LITTER POULTRY ANIMAL FEEDING OPERATIONS GENERAL PERMIT MSG20

NOTICE OF INTENT

RECEIVED
JUL 8 2021
MDEQ

INSTRUCTIONS

All questions must be answered for this notice of intent to be considered complete. If an item does not apply, enter "N/A" for not applicable to show that you considered the question. Applicant must be the owner and/or operator of the property.

RE-COVERAGE FOR FACILITIES CURRENTLY COVERED UNDER THE DLPAFO GP MSG20:

To obtain re-coverage under this general permit (GP), existing facilities shall submit a complete Dry Litter Poultry Notice of Intent (DLPNOI) to the MDEQ within 30 days of the date of the Letter of Instruction for Re-Coverage. If a current Comprehensive Nutrient Management Plan (CNMP) is not on file at MDEQ then a current plan must be submitted with the DLPNOI. The CNMP must include a map with a compass direction header, and shows property boundaries and the approximate location of each existing structure (chicken house, incinerator, dead box, land application field(s), composting area, litter storage structure, etc.).

If the previous coverage included regulated construction activities greater than 5 acres which need to be continued then a Large Construction Notice of Intent (LCNOI) must be completed and submitted to MDEQ with the DLPNOI. For construction activities disturbing 1 – 5 acres, the requirements for Small Construction Storm Water must be implemented.

If the facility is out of business or no longer active, please request termination of coverage by completing the Request for Termination (RFT) Form found in the Dry Litter Poultry Forms Package. Facilities that continue to operate without applicable permit coverage are in violation of state law. The DLPNOI is not required to be submitted if the facility is submitting a request for termination of coverage.

COVERAGE FOR NEW OR EXPANDING FACILITIES:

For new or expanding facilities, in addition to the DLPNOI, the following additional submittals may be required:

- A Storm Water Pollution Prevention Plan (SWPPP), and LCNOI for construction activities totaling five (5) acres or more
- Contiguous Land Owner Notification(s) as identified in Condition S-2, ACT 2 of the DLPAFO GP No. MSG20. The notification should include a map with a compass direction header, and shows property boundaries and the approximate location of each existing structure (chicken house, incinerator, dead box, composting area, litter storage structure, etc.).
- Buffer Zone Waiver(s)
- Appropriate Section 404 Documentation (Wetlands)

All forms must be submitted to: Chief, Environmental Permits Division, Mississippi Department of Environmental Quality, PO Box 2261, Jackson, Mississippi 39225-2261.

*For construction activities disturbing 1 -5 acres, the Small Construction Notice of Intent (SCNOI) and SWPPP must be completed, but not submitted

The Construction Storm Water General Permits, NOI and other required forms can be found at the following links:

http://www.deq.state.ms.us/mdeq.nsf/page/epd_epdgeneral?OpenDocument