

INDUSTRIAL STORMWATER GENERAL PERMIT RE-COVERAGE FORM

FOR COVERAGE UNDER MISSISSIPPI'S REISSUED INDUSTRIAL STORMWATER GENERAL PERMIT MSR00 GENERAL NPDES COVERAGE NO. MSR00 001921

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 inviolation 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).

COVED A CE DECIDIENTO DISCORACA

COVE	CAGE RECIFIENT INFORM	ATION		
CONTACT NAME & POSITION: Dena Wa	alker - Terminal Director			
EMAIL ADDRESS: dena.walker@xpc	o.com			
COMPANY NAME: XPO Logistics				
STREET OR P.O. BOX: 7762 Highway	178			
CITY: Olive Branch	STATE: MS	_{ZIP:} 38651		
PHONE NUMBER (INCLUDE AREA CODE): 662-408-2391				
FACILITY INFORMATION				
FACILITY NAME: XPO Logistics				
CONTRACTANA				
CONTACT NAME & POSITION: Dena Walker-Te	erminal Directo			
CONTACT PHONE NUMBER (INCLUDE AREA CODE): 662-408-2391				
PRIMARY STANDARD INDUSTRIAL CLASSIFICATION (SIC) CODE & DESCRIPTION OF INDUSTRIAL ACTIVITY:				

PHYSICAL SITE ADDRESS STREET: 7762 Highway 178				
CITY: Olive Branch	Olive Branch COUNTY: Desoto		_{IP:} 38654	
PROVIDE THE COORDINATES				
LATITUDE: 34 degrees 58 minutes 47 seconds LONGITUDE: 89 degrees 50 minutes 59 seconds				
NEAREST NAMED RECEIVING STREAM FOR STORM WATER LEAVING THE SITE: MS4 to Camp Creek				
IS RECEIVING STREAM ON I	MDEQ's 303(d) LIST?	YES	NO	
IF YES, HAS A TMDL BEEN ES	TABLISHED FOR THE RECEIVING	G STREAM SEGMENT? 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 POLLUTANTS? IF NO, PLEASE ATTACH REQUIRED SWPPP AMENDMENTS (see Instructions on front page).			YES NO	
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.				
Dua Walk	(s)R)	05/04/2022		
Signature ¹		Date		
Dena Walker		Terminal Director		
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, MS Department of Environmental Quality, Office of Pollution Control P.O. Box 2261 Jackson, Mississippi 39225				