A1: 85047



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



COVERAGE NUMBER: MSG20 2 5 4. 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 Recoverage.

I. GENERAL INFORMATION	DECEIVED			
A. CONTACT AND FACILITY INFORMATION				
Name of Owner: Matthew Straud	иц SEP 2 1 2023			
Facility Name: HTM POUHTY	MDEO			
Mailing Address:	House the transfer of the transfer of the			
Street or P.O. Box: 243 Rogers Rd	or sire tea water 2			
City: COMMISSIAN State: MS	Zip: 39429			
Physical Site Address:				
Street (can not be a P.O. Box) 243 ROSTS Rd	erenen u viningal – av Velgja – 28 juli			
City: Columbic State: MS	zip: 39429			
County: Marim				
(For new facilities) Latitude (degrees/min/sec): 31° 21' 15.2" Longitude: -89° 54' 11.3"				
(For new facilities) Nearest named receiving stream: Dry Creck, Pierce Creck				
Facility Telephone No. (Include Area Code):				
Facility Fax No. (Include Area Code):				
Contact Cell Phone No. (Include Area Code): (U0) 433 - 7894				
Other Contact Phone Numbers (Include Area Code):				
Contact Email: Mattstroud 18@ yanoo. Com				
B. ACTIVITY TYPE (Check all that apply)				
Existing operation NOT proposing expansion. Number of existing houses:				
Existing operation of an incinerator(s). Number of existing incinerator(s):				
New or expanding operation. Number of proposed houses: 3 Number of	f proposed incinerators: _U_			

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? \(\Boxed{\squares}\) No \(\Boxed{\squares}\) Yes- Integrator Name: \(\boxed{\squares}\) \(\alpha\) \(\alpha\)			
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): IN NOUSE 11+ter Storage 400 tons per house			
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: CONTCICTED NYCCS			
Development Date: Expiration Date:			
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.			

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 <u>violation</u> 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:				
	r New Facilities: nufacturer Name:	_ Model Number:			
Ca	pacity (tons/hour):	Fuel Type:			
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. Tor 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.				
	Mother Thank				
	Signature of Responsible Official		Date		
	Matthew Straud Printed Name		OWN CY Title		

Contiguous Landowner Notification of a Dry Litter Poultry Animal Feeding **Operation Facility** RECEIVED

(See ACT 2, Condition S-2)

CERTIFIED MAIL NO.:	Date mailed: SEP 2 1 2023
	Dept. of Environmental Quality
Company Name as Identified by MDEQ (please print)	Coverage No. (if currently permitted)
located at	MS
Physical Street Address, City is proposing to construct and operate a Dry Litter Poultry Animal	State County Feeding Operation (to construct and operate
poultry/chicken house(s)). This poultry facility has existing	
house(s). If permitted, the operation of the poultry house(s) will in	avolve the management of dry animal waste and may
involve the operation of an incinerator. The operation shall NOT	have a discharge of process wastewater or
contaminated stormwater. The Natural Resource Conservation Ser	rvice (NRCS) will develop a Comprehensive Nutrient
Management Plan (CNMP) to address the management of the anim	nal waste. The CNMP will become an enforceable part
of the permit along with other conditions which will allow the fac	ility to operate within all state and federal environmental
aws and regulations. The permit can be found at the following lin	k: https://www.mdea.ms.gov/dlngn/

This letter is to provide you notification of the proposed project and to provide you an opportunity to comment regarding environmental concerns about the project. MDEQ only has legal authority to consider environmental issues specified in the applicable laws and regulations. MDEQ does not have legal authority to consider matters outside of its jurisdiction; thus, comments regarding zoning or other non-environmental related comments should be directed to the local zoning and planning authorities.

If you do not have environmental comments regarding the proposed project, then no response is necessary and the permitting process will continue. If you have environmental comments regarding the proposed project, please notify MDEQ in writing within thirty (30) days from the postmarked date of this notification or by the end of the MDEQ 10day online notification period, whichever is later. The online notification of the project can be found at the following link: https://www.mdeq.ms.gov/ensearch/general-permit-notice-of-intents. When making written comment, please reference the proposed project using the information above and provide your contact phone number and address. If you would like to request records or discuss concerns that you have regarding this project, please feel free to contact MDEQ at (601) 961-5171. Comments are to be mailed to the following address:

> Chief, Environmental Permits Division Mississippi Department of Environmental Quality P. O. Box 2261 Jackson, Mississippi 39225-2261



Farm: 4497 Tract: 6078

USDA Farm Service Agency MARION County, Mississippi Wetland Determination Identifiers

Restricted use
 Limited Restrictions

Exempt from Conservation Compliance Provisions

Printed Date: July 10, 2023 Photography Date: 2021

Feet

2,040

Disclaimer: Wetland identifiers do not represent size, shape, or specific determination of area. Refer to your original determination (CPA-026 and attached maps) for exact wetland boundaries and determinations, or contact NRCS.

1,530

1,020

