

INSTRUCTIONS

Coverage recipients sha	ll notify the Mississippi Department of E	nvironmental Quality at least 30 d	lays in advance of the following activities
			revention Plan (SWPPP), updated USGS
topographic map, Corps	s of Engineers Section 404 documentation	and wastewater collection and tre	atment information, as appropriate.

SWPPP details have been developed and are ready for MDEQ review for subsequent phases of an existing, covered project.

"Footprint" identified in the original LCNOI is proposed to be enlarged.

This form must be signed by the current coverage recipient under Mississippi's Large Construction General Permit. A different developer of new phases of existing subdivisions must apply for separate permit coverage through the submittal of a new complete LCNOI package. Coverage recipients are authorized to discharge storm water associated with proposed expansions of existing subdivisions or subsequent phases, under the conditions of the General Permit, only upon receipt of written notification of approval by MDEQ. All other modifications, such as changes of erosion and sediment controls used, must be in accordance with ACT6, S-1 (4) and (5) of the General Permit.

ALL INFORMATION MUST BE COMPLETED (indicate "N/A" where not applicable)				
COVERAGE RECI	PIENT INFORMATION			
COVERAGE RECIPIENT CONTACT NAME: R. Todd Jurek COMPANY NAME: Koch Foods of Mississippi LLC		TEL#(847) 384-5940		
STREET OR P.O. BOX: 1300 West Higgins Road - Corporate Office				
CITY: Park Ridge	STATE: Illinois	ZIP: 60068		
PROJECT	INFORMATION			
PROJECT NAME: Koch Foods Parking Lot and Freeze	r Additions			
CITY: Morton				
ADDITIONAL ACREAGE TO BE DISTURBED: 32.2	E TO BE DISTURBED: 32.2 TOTAL PROJECT ACREAGE: 50.8			

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 (must be signed by coverage recipient)

R. Todd Jurek

AU6.6,2015

VA SUPOL

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Please submit this form to:

Printed Name

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