

AI #17836



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Dept. of Environmental Quality

RE-COVERAGE FORM SMALL MUNICIPAL SEPARATE STORM SEWER SYSTEM (MS4) GENERAL PERMIT

GENERAL PERMIT: MSRMS4 40 27 . This coverage number must be completed for the referenced MS4 or this form will be considered incomplete and will be returned. The coverage number can be found at the bottom left corner of your previous Certificate of Coverage.

INSTRUCTIONS

The submittal of this form is required to receive coverage under the reissued Small Municipal Separate Storm System (MS4) General Permit. This form, with an original signature, must be completed and returned to MDEQ at the address printed at the bottom of this form within 60 days of the date of the Letter of Instruction for Re-Coverage.

Submittals with this Re-Coverage Form must include:

- A Storm Water Management Program (SWMP) as required by ACT 5 of the General Permit
- Copies of current municipal storm water ordinances, or if not a city or county, copies of current regulatory mechanisms that address storm water management
- A location map must be attached, if location boundaries have changed since initial coverage issuance
- Copy of current Storm Water Pollution Prevention Plan (SWPPP) or Plans

Additional submittals may include:

- Appendix A and associated Joint MS4 legal documents, if applicable

NOTE: 3-RING BINDERS WILL NOT BE ACCEPTED DUE TO LIMITED FILING SPACE AT MDEQ.

MS4 APPLICANT INFORMATION

MS4 NAME: City Of Clinton

MS4 MAILING ADDRESS: P.O. Box 156

MS4 CITY: Clinton STATE: Ms ZIP: 39056

MS4 COUNTY: Hinds

MS4 IS A: CITY/TOWN COUNTY OTHER: _____

IS THIS A JOINT RE-COVERAGE FORM BEING SUBMITTED? YES NO
(If yes, a completed Appendix A must accompany submittal)

MS4 POPULATION: 26000

PRIMARY LOCAL CONTACT NAME (responsible for storm water program implementation): Robert Touchstone

CONTACT'S TITLE: Building Official OFFICE PHONE: (601) 924-2256 ext 302

CELL PHONE: () 924-0837 FAX NUMBER: (601) 924-0837

E-MAIL ADDRESS (local contact): rtouchstone@clintonms.org

E-MAIL ADDRESS (legally responsible person): _____

SECONDARY LOCAL CONTACT NAME (knowledgeable about program, if primary contact is unavailable) Dexter Shelby

OFFICE PHONE: (601) 924-2239 ext 508 CELL PHONE: (601) 919-6554



MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY

SMALL MUNICIPAL SEPARATE STORM SEWER SYSTEM (MS4) GENERAL PERMIT MSRMS4

MS4 GENERAL PERMIT FORMS PACKAGE

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These standard forms are used to apply for permit coverage under the MS4 General Permit (MSRMS4). The forms are in Adobe format on our website at www.deq.state.ms.us. Required information can be completed on screen, printed and signed.

LOCATION DESCRIPTION OF MS4 (not required for cities and counties)

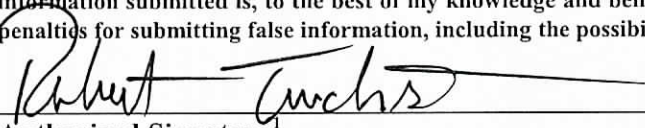
PROVIDE A NARRATIVE DESCRIPTION OF THE GEOGRAPHICAL LOCATION OF THE MS4 FOR FACILITIES SUCH AS MILITARY BASES, SPECIAL DISTRICTS AND ASSOCIATIONS, AND LARGE COMPLEXES (education, hospital, prison, etc.). _____

RECEIVING WATER INFORMATION

IDENTIFY THE MAJOR RECEIVING WATERS (named on a USGS Quad Map) WITHIN THE MS4 BOUNDARIES. IN ADDITION, NOTE THOSE THAT ARE 303(d) LISTED IMPAIRED WATERBODIES WITHIN THE PERMITTED AREA (a complete list of 303(d) listed impaired waters may be found on MDEQ's web site: <http://www.deq.state.ms.us>).

<u>RECEIVING STREAM</u>	<u>CHECK IF 303(d) LISTED</u>	<u>RECEIVING STREAM</u>	<u>CHECK IF 303(d) LISTED</u>
Bakers Creek _____	<input type="checkbox"/>	_____	<input type="checkbox"/>
Little Bakers Creek _____	<input type="checkbox"/>	_____	<input type="checkbox"/>
Bouge Chitto Creek _____	<input type="checkbox"/>	_____	<input type="checkbox"/>
Lindsey Creek _____	<input type="checkbox"/>	_____	<input type="checkbox"/>
Straight Fence _____	<input type="checkbox"/>	_____	<input type="checkbox"/>
_____	<input type="checkbox"/>	_____	<input type="checkbox"/>
_____	<input type="checkbox"/>	_____	<input type="checkbox"/>

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.

 _____ 4/6/2016
 Authorized Signature¹ Date

Robert Touchstone _____ 4/6/2016
 Printed Name Title

¹This application shall be signed according to the General Permit, ACT10: SIGNATORY REQUIREMENTS 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 either a principal executive officer, the mayor, or ranking elected official.

Please submit this form to: **Chief, Environmental Permits Division
 MDEQ, Office of Pollution Control
 P.O. Box 2261
 Jackson, Mississippi 39225**



NOTICE OF INTENT (NOI) FORM

SMALL MUNICIPAL SEPARATE STORM SEWER SYSTEM (MS4) GENERAL PERMIT

GENERAL PERMIT: MSRMS4 _____. (Number to be assigned by State)

GENERAL INSTRUCTIONS

This Notice of Intent (NOI) is for first time Small Municipal Separate Storm Sewer Systems (MS4s) applicants. The Mississippi Department of Environmental Quality (MDEQ), in accordance with federal regulations, will identify the regulated MS4s. **Do not apply for coverage under the Small Municipal Separate Storm Sewer System General Permit unless you have been notified by MDEQ.** MS4s that have previously held permit coverage must submit the Re-Coverage Form.

Submission of this application constitutes notice that the regulated entity, identified as applicant in this form, agrees to comply with all applicable terms and conditions of the Small MS4 General Permit (MSRMS4). Furthermore, the applicant understands that implementation of the Storm Water Management Program (SWMP) as described in the permit is required to begin as soon as permit coverage is issued by the Mississippi Environmental Quality Permit Board (Permit Board).

MS4s that have been determined to include "urbanized areas" by the Bureau of Census should complete and submit this form, with an original signature and associated submittals, to MDEQ at the address printed at the bottom of this form within 180 days of the date of such designation. For those MS4s designated by MDEQ pursuant to 40 CFR 122.32(a)(2), the MS4 shall submit a MS4 NOI package within 180 days of receiving notification from MDEQ.

All items of the MS4 NOI, including associated submittals, must be completed **accurately and in their entirety** or the MS4 NOI will be deemed incomplete. Processing of the MS4 NOI will not begin until all information is received. Answer "N/A" if the question or Appendix is not applicable. One original copy of the completed MS4 NOI (no faxes) should be submitted.

Submittals with this Notice of Intent Form must include:

- A Storm Water Management Program (SWMP) as required by ACT 5 of the General Permit. There are a number of guidance manuals and references that may be used for program development. The MDEQ guidance manual is available at <http://www.deq.state.ms.us> or by calling 601-961-5171. MS4s in the three coastal counties should use the "Mississippi Gulf Coast Storm Water Management Toolbox" as well. The U.S. Environmental Protection Agency (EPA) website, <http://cfpub.epa.gov/npdes/stormwater/menuofbmps/index.cfm>, and the Center for Watershed Protection website, <http://www.cwp.org>, also have numerous guidance and reference documents that can assist in developing these plans.
- Copies of current storm water ordinances, or if not a city or county, copies of other regulatory mechanisms that address storm water management.
- A location map for the MS4 indicating the boundaries of permit coverage. For enforcement purposes, the map must be of sufficient detail so that the exact boundaries, by street or other demarcation, can be determined. This information can be obtained from the US Census Bureau or from EPA. The map must show the city, town, county, district boundaries or service area, as applicable. Counties must also indicate the unincorporated area boundaries. **Incorporated areas within a regulated county are not regulated unless specifically designated by the Permit Board.** For non-traditional MS4s such as universities and military bases, the maps should be of an appropriate scale to clearly indicate the property boundaries. U.S. Geological Survey (USGS) quadrangle maps can provide some of the requested information. These maps are available for the entire state from the MDEQ Office of Geology (you may contact the Office of Geology at 601-961-5523).

Additional submittals may include:

- Appendix A and associated Joint MS4 legal documents, if applicable.

NOTE: 3-RING BINDERS WILL NOT BE ACCEPTED DUE TO LIMITED FILING SPACE AT MDEQ.