

Fill out to obtain permit coverage again

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AI #35273



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



0630

COVERAGE NUMBER: MSG20 0630. 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.

MDEC

I. GENERAL INFORMATION

A. CONTACT AND FACILITY INFORMATION

Name of Owner: JEFF TOLLESON

Facility Name: TOLLESON FARMS

Mailing Address:
Street or P.O. Box: 713 KEELI RD.

City: CARTHAGE State: MS Zip: 39051

Physical Site Address:
Street (can not be a P.O. Box) 713 KEELI Rd.

City: CARTHAGE State: MS Zip: 39051

County: LEAKE

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

(For new facilities) Nearest named receiving stream: _____

Facility Telephone No. (Include Area Code): 601-692-6363

Facility Fax No. (Include Area Code): 601-267-0032

Contact Cell Phone No. (Include Area Code): 601-692-6363

Other Contact Phone Numbers (Include Area Code): 601-692-3399

Contact Email : JKTOLLESON@BELLSOUTH.NET.

B. ACTIVITY TYPE (Check all that apply)

Existing operation NOT proposing expansion. Number of existing houses: 3

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

New or expanding operation. Number of proposed houses: _____ Number of proposed incinerators: _____

Appendix A (ACT 2, S-1)

3H 12K pd
PL-318-1

0-348

9/30/22

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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: TYSON

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: 2010 Expiration Date: 2014

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 violation of state law.
- Yes, there is mortality incineration equipment located at the facility. Complete section below:

<u>MORTALITY INCINERATION EQUIPMENT</u>	
For Existing Facilities:	
Has the facility changed the number or type of incinerators, or the fuel type burned?	
<input type="checkbox"/> No	<input type="checkbox"/> Yes – Identify Changes: _____
For New Facilities:	
Manufacturer Name: _____	Model Number: _____
Capacity (tons/hour): _____	Fuel Type: _____

IV. CERTIFICATION

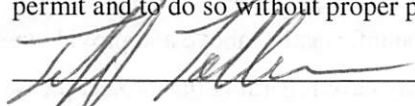
Note: This NOI shall be signed according to Conditions T-17 and T-18 found in ACT 6 of the Dry Litter Poultry Animal Feeding Operations Multimedia General Pollution Control Permit No. MSG20.

- 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.

 _____ <i>Signature of Responsible Official</i>	9-20-17 _____ <i>Date</i>
JEFF TOLLESON _____ <i>Printed Name</i>	Owner _____ <i>Title</i>

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

(See ACT 2, Condition S-2)

CERTIFIED MAIL NO.: _____

Date mailed: _____

Company Name as Identified by MDEQ (please print)

Coverage No. (if currently permitted)

located at _____
Physical Street Address, City

MS _____
State County

is proposing to construct and operate a Dry Litter Poultry Animal Feeding Operation (to construct and operate poultry/chicken house(s)). This poultry facility has _____ existing house(s); the applicant proposes to build _____ new house(s). If permitted, the operation of the poultry house(s) will involve 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 Service (NRCS) will develop a Comprehensive Nutrient Management Plan (CNMP) to address the management of the animal waste. The CNMP will become an enforceable part of the permit along with other conditions which will allow the facility to operate within all state and federal environmental laws and regulations.

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. **Please be aware that MDEQ only has legal authority to consider environmental issues specified in the applicable laws and regulations. MDEQ does not have jurisdiction to consider any comments regarding zoning, economic, or social impacts (e.g., effect of facility on property values). Comments should be addressed to the local zoning and planning authorities.**

If you do not have **environmental** comments regarding the proposed project, then you need do nothing more. If you have **environmental** comments regarding the proposed project, please notify MDEQ in writing within 17 days after the postmark date of this notification. Please reference the proposed project using the information above and provide your contact phone number and address. If you would like to discuss concerns you may have regarding this project please feel free to contact our office 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

Zach Savell

MDEQ Compliance & Enforcement Division

W: 601-961-5192

E: zsavell@mdeq.ms.gov



RECEIVED
 SEP 25 2017
 Dept. of Environmental Quality

**MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY (MDEQ)
 DRY LITTER POULTRY ANIMAL FEEDING OPERATION
 MULTIMEDIA GENERAL POLLUTION CONTROL PERMIT NO.
 MSG20**

DRY LITTER POULTRY FORMS PACKAGE

- DRY LITTER POULTRY NOTICE OF INTENT (DLPNOI)..... Appendix A
- CONTIGUOUS LANDOWNER NOTIFICATION LETTER..... Appendix B
- DRY LITTER POULTRY BUFFER ZONE WAIVER..... Appendix C
- DRY LITTER POULTRY LAND APPLICATION LOG..... Appendix D
- LITTER TRANSFER FORM..... Appendix E
- MORTALITY RECORDKEEPING LOG SHEET..... Appendix F
- INCINERATION RECORDKEEPING LOG SHEET..... Appendix G
- REQUEST FOR TRANSFER AND/OR NAME CHANGE..... Appendix H

These standard forms are used to apply for permit coverage under the Dry Litter Poultry Multimedia General Pollution Control Permit and for submittals and record keeping required by permit conditions after coverage has been granted. 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.

Attn: Zach Savell or
Buster McMillian



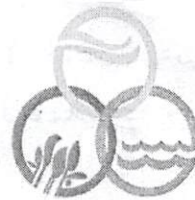
Mississippi Department of Environmental Quality

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

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