

AI #75825
Gnp20190001



BASELINE NOTICE OF INTENT (BNOI)
FOR COVERAGE UNDER THE BASELINE STORM WATER
GENERAL NPDES PERMIT MSR00 2388
(NUMBER TO BE ASSIGNED BY STATE)

INSTRUCTIONS

Applicant must be the owner or operator (i.e., legal entity that controls the facility's operation, or the plant/site manager, not the environmental consultant). The owner or operator that receives coverage is responsible for permit compliance. File at least 60 days prior to the commencement of the regulated industrial activity.

Submittals with this BNOI must include a Storm Water Pollution Prevention Plan (SWPPP) with the minimum components found in ACTs 5 and 6 of the Baseline Storm Water General Permit. In addition, a United States Geological Survey (USGS) quadrangle map (or a copy) showing site location and extending at least 1/2 mile beyond the site's property boundary is required. If a copy is submitted, provide the name of the quadrangle map that is found in the upper right hand corner. Maps can be obtained from the MDEQ, Office of Geology at 601-961-5523.

ALL FORM BLANKS MUST BE COMPLETED (enter "NA" if not applicable)

THE APPLICANT IS: ☐ OWNER ☒ OPERATOR (PLEASE CHECK ONE OR BOTH)

OWNER INFORMATION

Owner Contact Name: Rebecca Orig Position: _____
Owner Company Name: Panattoni Development Company, Inc.
Owner Street (P.O. Box): 7887 East Belleview Avenue, Suite 475
Owner City: Denver State: CO Zip: 80111
Owner Phone Number: (303) 790 - 4737 Owner Email: _____

OPERATOR INFORMATION (if different than owner)

Operator Contact Name: Kevin Winston Position: Global Env Fld Ldr
Operator Company Name: Amazon.com Services, Inc.
Operator Street (P.O. Box): P.O. Box 80842
Operator City: Seattle State: WA Zip: 98108
Operator Phone Number: (925) 577-5326 Operator Email: winskevi@amazon.com

RECEIVED
JUL 22 2019
Dept. of Environmental Quality

FACILITY INFORMATION

Facility Name: Amazon.com Services, Inc. - MEM2

Nature of Business (Include 4-digit Standard Industrial Classification Code (SIC) and description):

SIC Code: 4 2 2 5 General Warehousing and Storage

Receiving Stream: unnamed stream south/southwest of the facility

Is receiving stream on MDEQ's 303(d) List?

☐ Yes ☒ No

Has a TMDL been established for the receiving stream segment?

☐ Yes ☒ No

Physical Site Address:

Street: 191 Norfolk Southern Way

City: Byhalia

County: Marshall

Zip: 38611

Latitude: 34 degrees 59 minutes 25 seconds

Longitude: 89 degrees 35 minutes 46 seconds

Method Used to Determine Lat & Long (GPS of plant entrance) or Map Interpolation): GPS of plant entrance

Attach a copy of any existing laboratory data for each storm water outfall. If multiple sampling has been performed, provide a summary for each parameter, including sampling dates and the minimum, average and maximum values.

Is this a SARA Title III, Section 313 facility utilizing water priority chemicals at threshold amounts? ☐ Yes ☒ No
If yes, please attach a list of water priority chemicals present at the facility.

DOCUMENTATION OF COMPLIANCE WITH OTHER REGULATIONS/REQUIREMENTS

Is this notice for a facility that will require other permits? ☒ Yes ☐ No

If yes, check which one(s): ☐ Air, ☒ Hazardous Waste, ☐ Pretreatment, ☐ Water State Operating,
☐ Individual NPDES, or list Other(s):

How will sanitary sewage be collected and treated? Marshall County Water Services

Indicate any local storm water ordinance with which the facility must comply and submit any documentation of approval.

Is treatment of storm water provided at any outfall? ☒ Yes ☐ No

If yes, please describe: Storm water settles in detention ponds before exiting through the outfalls.

CERTIFICATION

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.



7/19/2019

Signature¹ (Must be signed by operator when different than owner)

Date Signed

Kevin Winston
Printed Name¹

Global Environmental Field Leader
Title

¹This application shall be signed according to the General Permit, ACT 14, T-9, 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, the 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, MS 39225