

PRIME CONTRACTOR CERTIFICATION

LARGE CONSTRUCTION GENERAL PERMIT

Coverage No. MSR10 9 County Washington

(Fill in your Certificate of Coverage Number and County)



By completing and submitting this form to MDEQ, the prime contractor is certifying that (1) they have operational control over the erosion and sediment control specifications (including the ability to make modifications to such specifications) or (2) they have day-to-day operational control of those activities at the site necessary to ensure compliance with the SWPPP and applicable permit conditions.

The owner(s) of the property and the prime contractor associated with regulated construction activity on the property have joint and severable responsibility for compliance with the permit. Notwithstanding any permit condition to the contrary, the coverage recipient and any person who causes pollution of waters of the state or places waste in a location where they are likely to cause pollution of any waters of the state shall remain responsible under applicable federal and state laws and regulations and applicable permits.

PRIME CONTRACTOR INFORMATION	
PRIME CONTRACTOR CONTACT PERSON: Mark Cotter	PHONE NUMBER: (716) 517-5507
PRIME CONTRACTOR COMPANY: GSD Companies	
7135 South Lake Houston	Parkway
PRIME CONTRACTOR STREET (P.O. BOX):	ATE: TX ZIP: 77049
E-MAIL ADDRESS: mark.cotter@gsdcompanies.com	
OWNER WEODER AND A	
OWNER CONTACT PERSON: Greg Chandler PHO	NE NUMBER: (601) 988-4847
OWNER INFORMATION OWNER CONTACT PERSON: Greg Chandler OWNER COMPANY NAME: Entergy Mississippi, LLC	
PROJECT INFORMATION	
PROJECT NAME: Gerald Andrus Tank Farm	
DESCRIPTION OF CONSTRUCTION ACTIVITY: Demolition and disposa	al of 5 fuel storage tanks
PHYSICAL SITE ADDRESS (If the physical address is not available indicate the rindicate the beginning of the project and identify all counties the project traverses.	nearest named road. For linear projects,
STREET: Highway 82 West	
CITY: Greenville COUNTY: Washington	1
I certify that I am the prime contractor for this project and will comply with all the requirer permit. I further certify under penalty of law that this document and all attachments were accordance with a system designed to assure that qualified personnel properly gathered and my inquiry of the person or persons who manage the system, or those persons directly responsiformation submitted is, to the best of my knowledge and belief, true, accurate and complete penalties for submitting false information, including the possibility of fine and imprisonment of the personnel properly gathered and my inquiry of the person of persons who manage the system, or those persons directly responsible for submitting false information, including the possibility of fine and imprisonment of the personnel properly gathered and my inquiry of the person of persons directly responsible for the person of persons directly responsible for the person of the person of persons directly responsible for the person of perso	l evaluated the information submitted. Based on onsible for gathering the information, the te. I am aware that there are significant
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pplication shall be signed 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, mayor, or ranking elected official.

This Prime Contractors Certification form shall be submitted to:

Chief, Environmental Permits Division

MS Department of Environmental Quality, Office of Pollution Control P.O. Box 2261

Jackson, Mississippi 39225 RECEIVED

JAN 22 2020

Revised: 10/25/16



JAN 2 2 2020

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 of Applicant (owner or prime contractor)

Printed Name

1/13/202 Date Signed

GSD INC. ENLIBAREITA/ MANAGER

¹This application shall be signed 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, mayor, or ranking elected official

Please submit the LCNOI form to:

Chief, Environmental Permits Division

MS Department of Environmental Quality, Office of Pollution Control

P.O. Box 2261

Jackson, Mississippi 39225