

LARGE CONSTRUCTION NOTICE OF INTENT (LCNOI) FOR COVERAGE UNDER THE LARGE CONSTRUCTION STORM WATER GENERAL NPDES PERMIT

INSTRUCTIONS

The Large Construction Notice of Intent (LCNOI) is for coverage under the Large Construction General Permit for land disturbing activities of five (5) acres or greater; or for land disturbing activities, which are part of a larger common plan of development or sale that are initially less than five (5) acres but will ultimately disturb five (5) or more acres. Applicant must be the owner or operator. For construction activities, the operator is typically the prime contractor. 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 Large Construction Storm Water General Permit MSR10.

If the company seeking coverage is a corporation, a limited liability company, a partnership, or a business trust, attach proof of its registration with the Mississippi Secretary of State and/or its Certificate of Good Standing. This registration or Certificate of Good Standing must be dated within twelve (12) months of the date of the submittal of this coverage form. Eoverage will be issued in the company name as it is registered with the Mississippi Secretary of State.

Completed LCNOIs should be filed at least thirty (30) days prior to the commencement of construction. Discharge of storm water from large construction activities without written notification of coverage is a violation of state law.

Submittals with this LCNOI must include:

- A site-specific Storm Water Pollution Prevention Plan (SWPPP) developed in accordance with ACT5 of the General Permit
- A detailed site-specific scaled drawing showing the property layout and the features outlined in ACT5 of the General Permit
- A United States Geological Survey (USGS) quadrangle map or photocopy, extending at least one-half mile beyond the facility property boundaries with the site location and outfalls outlined or highlighted. The name of the quadrangle map must be shown on all copies. Quadrangle maps can be obtained from the MDEQ, Office of Geology at 601-961-5523.

Additional submittals may include the following, if applicable:

- Appropriate Section 404 documentation from U.S. Army Corps of Engineers
- Appropriate documentation concerning future disposal of sanitary sewage and sewage collection system construction
- Appropriate documentation from the MDEQ Office of Land & Water concerning dam construction and low flow requirements
- Approval from County Utility Authority in Hancock, Harrison, Jackson, Pearl River and Stone Counties

ALL QUESTIONS MUST BE ANSWERED (Answer "NA" if the question is not applicable)

MSR10	
(NUMBER TO BE ASSIGNED BY STATE	1

APPLICANT IS THE:		
OWNER CONTACT INFORMATION		
OWNER CONTACT PERSON:		
OWNER COMPANY LEGAL NAME:		
OWNER STREET OR P.O. BOX:		
OWNER CITY:STATE:		
OWNER PHONE #: (OWNER EMAIL:		
PRIME CONTRACTOR CONTACT INFORMATION		
PRIME CONTRACTOR CONTACT PERSON:		
PRIME CONTRACTOR COMPANY LEGAL NAME:		
PRIME CONTRACTOR STREET OR P.O. BOX:		
PRIME CONTRACTOR CITY: STATE:		
PRIME CONTRACTOR PHONE #: () PRIME CONTRACTOR EMAIL:_		
FACILITY SITE INFORMATION		
FACILITY SITE NAME:		
FACILITY SITE ADDRESS (If the physical address is not available, please indicate the nearest reindicate the beginning of the project and identify all counties the project traverses.)		
STREET: STATE: COUNTY:		
FACILITY SITE TRIBAL LAND ID (N/A If not applicable):		
LATITUDE: degrees minutes seconds LONGITUDE: degrees n	· · · · · · · · · · · · · · · · · · ·	
LAT & LONG DATA SOURCE (GPS (Please GPS Project Entrance/Start Point) or Map Interpolation):		
TOTAL ACREAGE THAT WILL BE DISTURBED 1:		
IS THIS PART OF A LARGER COMMON PLAN OF DEVELOPMENT?	$YES \square$	NO 🗆
IF YES, NAME OF LARGER COMMON PLAN OF DEVELOPMENT:AND PERMIT COVERAGE NUMBER: MSR10		
ESTIMATED CONSTRUCTION PROJECT START DATE:	YYYY-MM-DD	
ESTIMATED CONSTRUCTION PROJECT END DATE:	YYYY-MM-DD	
DESCRIPTION OF CONSTRUCTION ACTIVITY:		
PROPOSED DESCRIPTION OF PROPERTY USE AFTER CONSTRUCTION HAS BEEN		
SIC Code NAICS Code		

NEAREST NAMED RECEIVING STREAM:		
IS RECEIVING STREAM ON MISSISSIPPI'S 303(d) LIST OF IMPAIRED WATER BODIES? (The 303(d) list of impaired waters and TMDL stream segments may be found on M http://www.deq.state.ms.us/MDEQ.nsf/page/TWB_Total_Maximum_Daily_Load_Section)	YES□ DEQ's web site:	NO□
HAS A TMDL BEEN ESTABLISHED FOR THE RECEIVING STREAM SEGMENT?	YES□	$_{ m NO}\square$
ARE THERE RECREATIONAL STREAMS, PRIVATE/PUBLIC PONDS OR LAKES WITHIN ½ MILE DOWNSTREAM OF PROJECT BOUNDRY THAT MAY BE IMPACTED ACTIVITY?	YES□ BY THE CONS	NO□ TRUCTION
EXISTING DATA DESCRIBING THE SOIL (for linear projects please describe in SWPPP):		
WILL FLOCCULANTS BE USED TO TREAT TURBIDITY IN STORM WATER?	YES□	NO□
IF YES, INDICATE THE TYPE OF FLOCCULANT. □ ANIONIC POLYACRYL □ OTHER	IMIDE (PAM)	
IF YES, DOES THE SWPPP DESCRIBE THE METHOD OF INTRODUCTION, THE LOCATION OF WHERE FLOCCULATED MATERIAL WILL SETTLE?	ATION OF INTRO YES □	ODUCTION NO □

¹Acreage for subdivision development includes areas disturbed by construction of roads, utilities and drainage. Additionally, a housesite of at least 10,000 ft² per lot (entire lot, if smaller) shall be included in calculating acreage disturbed.

DOCUMENTATION OF COMPLIANCE WITH OTHER REGULATIONS/REQUIREMENTS COVERAGE UNDER THIS PERMIT WILL NOT BE GRANTED UNTIL ALL OTHER REQUIRED MDEQ PERMITS AND APPROVALS ARE SATISFACTORILY ADDRESSED

IS LCNOI FOR A FACILITY THAT WILL REQUIRE OTHER PERMITS?	YES □	NO □
IF YES, CHECK ALL THAT APPLY: \Box AIR \Box HAZARDOUS WASTE	□ PRETREATMEN	NT
\square WATER STATE OPERATING \square INDIVIDUAL NPDES	□ OTHER:	
IS THE PROJECT REROUTING, FILLING OR CROSSING A WATER CONVEYANC OF ANY KIND? (If yes, contact the U.S. Army Corps of Engineers' Regulatory Branch for		NO □ nents.)
IF THE PROJECT REQUIRES A CORPS OF ENGINEER SECTION 404 PERMIT, PR DOCUMENTATION THAT:	OVIDE APPROPRIAT	ГЕ
• The project has been approved by individual permit, or		
The work will be covered by a nationwide permit and NO NOTIFICATION to the Company of the C	Corps is required, or	
• The work will be covered by a nationwide or general permit and NOTIFICATION	to the Corps is require	d
IS A LAKE REQUIRING THE CONSTRUCTION OF A DAM BEING PROPOSED? (If yes, provide appropriate approval documentation from MDEQ Office of Land and Wa	YES □ ater, Dam Safety.)	NO □
IF THE PROJECT IS A SUBDIVISION OR A COMMERCIAL DEVELOPMENT, HOW BE DISPOSED? Check one of the following and attach the pertinent documents.	V WILL SANITARY S	EWAGE
Existing Municipal or Commercial System. Please attach plans and specifications f associated "Information Regarding Proposed Wastewater Projects" form or approve Hancock, Harrison, Jackson, Pearl River and Stone Counties. If the plans and specification of LCNOI submittal, MDEQ will accept written acknowledgement from official(s) r collection and treatment that the flows generated from the proposed project can and properly. The letter must include the estimated flow.	val from County Utility A ons can not be provided responsible for wastewa	Authority in d at the time iter
☐ Collection and Treatment System will be Constructed. Please attach a copy of the copermit from MDEQ or indicate the date the application was submitted to MDEQ (I	over of the NPDES disc Date:	charge)
☐ Individual Onsite Wastewater Disposal Systems for Subdivisions Less than 35 Lots. of General Acceptance from the Mississippi State Department of Health or certifica engineer that the platted lots should support individual onsite wastewater disposal states.	tion from a registered	f the Letter professional
☐ Individual Onsite Wastewater Disposal Systems for Subdivisions Greater than 35 L feasibility of installing a central sewage collection and treatment system must be ma response from MDEQ concerning the feasibility study must be attached. If a centra is not feasible, then please attach a copy of the Letter of General Acceptance from the certification from a registered professional engineer that the platted lots should sup disposal systems.	nde by MDEQ. A copy al collection and wastev he State Department of	of the vater system f Health or
INDICATE ANY LOCAL STORM WATER ORDINANCE WITH WHICH THE PROJE	ECT MUST COMPLY:	:

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.

3RC. Or		
Signature of Applicant ¹ (owner or prime contractor)	Date Signed	
Printed Name ¹	Title	

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

PRIME CONTRACTOR CERTIFICATION

LARGE CONSTRUCTION GENERAL PERMIT

Coverage No. MSR10 ___ _ _ County _

(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:	PHONE NUMBER: ()
PRIME CONTRACTOR COMPANY:	
PRIME CONTRACTOR STREET (P.O. BOX):	
PRIME CONTRACTOR CITY:	STATE: ZIP:
E-MAIL ADDRESS:	
OWNER I	NFORMATION
OWNER CONTACT PERSON:	PHONE NUMBER: ()
OWNER COMPANY NAME:	
PROJECT 1	INFORMATION
PROJECT NAME:	
DESCRIPTION OF CONSTRUCTION ACTIVITY:	
PHYSICAL SITE ADDRESS (If the physical address is not a indicate the beginning of the project and identify all counties	available indicate the nearest named road. For linear projects, s the project traverses.)
STREET:	
CITY:COU	UNTY:
permit. I further certify under penalty of law that this document as accordance with a system designed to assure that qualified personn my inquiry of the person or persons who manage the system, or the information submitted is, to the best of my knowledge and belief, tr penalties for submitting false information, including the possibility	rue, accurate and complete. I am aware that there are significant of fine and imprisonment for knowing violations.
Prime Contractor Signature ¹	Date Signed
Printed Name ¹	Title

¹This application shall be signed as follows:

- 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.

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

Revised: 10/25/16



Appendix B:

MDEQ and Comprehensive Inspection Checklist

Small Construction Storm Water Pollution Plan Inspection Report								
1.0 Project Information								
N	ame/Location							
	Contractor			Co	ontractor Co	ontact		
SWP	PP Team Leader				m Leader (
		1	.1 Inspecto	r Informat	tion			
Inspector I	Name		Phone			Email		
Inspection			Start Time			End Time		
Inspection			Otart Time			Liid Tiille		
mspection	Weekly	Pre-Storm	_	During Sto		Post-Storm Eve	nt \	/iolation
			1.2 Weathe	r Informati	ion			
	ite Rain Gauge Amοι	ınt (in.)						
Last Rain			Duratio	on (hr)		Amoun	ıt (in)	
	rrent Weather Descrip							
Weather	Forecast at Time of	Inspection						
	2	2.0 Erosion	and Sedim	entation B	BMP Inspec	tion		
	D	42		Insta	alled &	0	4 4 . 4 .	
Item	Desc	cription		Operating	g Correctly	Corr	ective Acti	on
0.4	Are Limits of Distur	r bance clear	rly marked					
2.1	at the site?		-	☐ YES	☐ NO			
	Are natural resourc	e areas (e d	streams					
2.2	wetlands, trees, etc.)	, -		☐ YES	□ NO			
2.2	sediment barriers or			□None	on-site			
2.3	Is construction seq			YES	Пио			
2.0	Are structural BMP							
2.4	divert stormwater flo			☐ YES	☐ NO			
2.4	construction site?	w Hom enter	ing the	☐ NONE	NEEDED			
					Пио			
2.5	areas that have activ		-	☐ YES				
	Do unstabilized are							
2.6	erosion & pollution c		•	YES	☐ NO ABILIZED			
2.7	Are all slopes protect	<u>stea</u> from co	ncentrated	YES	☐ NO			
-	stormwater flow?			☐ NO SL	.OPES			
	Are ALL storm drain			☐ YES	□ NO			
2.8	basins properly prot		ilt sacks or	☐ NO IN				
	other appropriate BM				ILLIS			
2.9	Are ALL storm drain		perly	☐ YES	☐ NO			
2.0	protected from scour							
	Are perimeter and s							
2.10	adequately installed			☐ YES	☐ NO			
	prevent sediment fro	m leaving th	ne site?					
	If dewatering, are dis	scharge poin	<u>its</u>	☐ YES	☐ NO			
2.11	protected & receiving	i <mark>g waters</mark> fre	ee of		EWATERING			
	sediment deposits?				EWATERING			
0.40	Is weather forecast	being <u>check</u> e	ed_	YES	□ NO			
2.12	regularly?			L 1E3				
Notes:								
					· · · · · · · · · · · · · · · · · · ·			

3.0 Good House Keeping BMP Inspection						
Item		Description	Instal Operating	led & Correctly	Corrective Action	
3.1		trash/litter from work areas collected & aced in covered containers regularly?		□NO		
3.2	Are equipment , vehicles, containers, & storage areas <u>free from leaks</u> ?		YES	□ NO		
3.3		ials that are potential stormwater nts covered or stored inside?	YES	□ NO		
3.4	located at	piles <u>ringed</u> with barrier BMPs & <u>least 50 feet away</u> from natural & storm drains?	☐ YES ☐ NO ST	OCKPILES		
3.5	Are vehic l & mainten	le & equipment fueling, cleaning, ance areas free from leaks & least 50-feet away from natural	YES	□ NO		
		& storm drains?	☐ NO FU	ELING AREAS		
		4.0 Procedural	BMP Inspe	ection		
4.1		ctions taking place at least every ofter storm events?	YES	□ NO		
4.2	any previ	ontractor been made aware of ous Corrective Actions (CA) and or corrected them?	☐ YES ☐ NO PR	□ NO EV. CA		
4.3	· · · ·	PP Amendments being <u>logged</u> ?	☐ YES	□NO	□ N/A	
4.4	Are SWPF	PP & ALL inspection reports ed and kept at the project site?	YES	_ NO		
	3 33	5.0 Outstanding	Corrective	Actions		
	V	Vere corrective actions reported			ection report?	
	NO	No corrective acti	ons were i	ssued in tl	he previous report.	
					n addressed	
	YES	Date corrective work began			ctive work completed	
] 153	Why were the corrective actions re			this inspection report	
		Willy were the corrective actions i	ioi auresse	u williii 7 u	lays!	
Notes:						
		Small Construction SWF	PPP Correc	tive Action	l l oa	