



MDEQ

INDUSTRIAL STORMWATER GENERAL PERMIT RE-COVERAGE FORM

FOR COVERAGE UNDER MISSISSIPPI'S REISSUED INDUSTRIAL STORMWATER GENERAL PERMIT MSR00 GENERAL NPDES COVERAGE NO. MSR00 / / 0 0 3 6

INSTRUCTIONS

The submittal of this form is required to receive coverage under the reissued Industrial Stormwater General Permit. This form must be completed and returned to the address printed at the bottom of page 2.

The signatory of this form must be the owner or operator who is the current coverage recipient (rather than the plant/site manager or environmental consultant). The coverage recipient is responsible for permit compliance.

Amendments to the Storm Water Pollution Prevention Plan (SWPPP) are required to be attached if the plan is not current or is ineffective in controlling storm water pollutants.

If the facility is out of business or no longer a regulated facility, please request termination of coverage by completing the Request for Termination (RFT) Form found in the Industrial Stormwater Forms Package. Facilities that continue to discharge wastewater without applicable permit coverage are in violation of state law.

Do not submit this form if submitting a "Request for Termination" (RFT).

Do not submit this form if submitting a "No Exposure Certification."

ALL INFORMATION MUST BE COMPLETED (Enter "NA" if not applicable).

COVERAGE RECIPIENT INFORMATION
CONTACT NAME & POSITION: Qack Quartaro , Jr - (Plant Manager Operator)
EMAIL ADDRESS: jacka @ renincorp.com
COMPANY NAME: Renin US LCC
STREET OR P.O. BOX: 141 Ryder St
CITY: Tupelo STATE: MS- ZIP: 38804
PHONE NUMBER (INCLUDE AREA CODE): 662 - 844-7191
FACILITY INFORMATION
FACILITY NAME: Renin US, LLC
CONTACT NAME & POSITION: Jack Quartoso JF - Plant Manager
CONTACT PHONE NUMBER (INCLUDE AREA CODE): 662-844-7191
PRIMARY STANDARD INDUSTRIAL CLASSIFICATION (SIC) CODE & DESCRIPTION OF INDUSTRIAL ACTIVITY:



PHYSICAL SITE ADDRESS				
STREET: 114	Ryder St			
CITY: Typelo	county: Lee	Z	IP: 38804	
PROVIDE THE COORDINA	TES OF THE PLANT ENTRANCE:			
LATITUDE: 34 degrees 2				
NEAREST NAMED RECEIVE	ING STREAM FOR STORM WATER LEAVING THE S	SITE: Town C	reet	
IS RECEIVING STREAM O	N MDEQ's 303(d) LIST?	YES	No	
IF YES, HAS A TMDL BEEN	ESTABLISHED FOR THE RECEIVING STREAM SEC	GMENT? YES	No	
STORM WATER POLLUTION PREVENTION PLAN (SWPPP)				
IS A COPY OF THE SWPPP AT	THE PERMITTED SITE?		IVYES □ NO	
IS THE SWPPP UP-TO-DATE A IF NO, PLEASE ATTACH REQ	AND EFFECTIVE IN CONTROLLING STORM WATER PULLED SWPPP AMENDMENTS (see Instructions on front	OLLUTANTS?	YES NO	
AUTO SALVAGE FACILITIES ONLY				
FOR AUTO SALVAGE FACILITY MDEQ NO LATER THAN JANU	FIES. A REVISED SWPPP TO COMPLY DUTTE THE NEW	V PERMIT MUST BE	SUBMITTED TO	
	CHANGES TO COMPLY WITH THE NEW PERMIT?		YES NO	
IS A REVISED COPY OF THE S	WPPP ATTACHED?		YES NO	
I certify under penalty of law that this document and all attachments				
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 fines and imprisonment for knowing violations.				
I further certify that I understand when coverage is terminated the facility is no longer authorized to discharge storm water associated with industrial activity under this general permit. I understand that discharging pollutants in storm water associated with industrial activity to waters of the state without NPDES coverage is in violation of state law.				
Signature Date Date				
Printed Name! Plant Manager				
Printed Came ¹ Title				
 For a corporation, by a re For a partnership, by a ge For a sole proprietorship, 	g to ACT16, T-9 of the General Permit, as follows: sponsible corporate officer. neral partner. by the proprietor. other public facility, by principal executive officer, mayor, or	ranking alasted officient	ı.	
After signing please mail to:	Chief, Environmental Permits Division, MS Department of Environmental Quality, Office of Pollu P.O. Box 2261 Jackson, Mississippi 39225		ii.	