T.W. ELLIOTT, PE/PS (1963-2011) L.L. BRITT, PE/PS KEVIN W. MCLEOD, PE

ELLIOTT & BRITT ENGINEERING, P.A.

ENGINEERS - CONSULTANTS - SURVEYORS 823 N. LAMAR BLVD. - P. O. BOX 308 OXFORD, MISSISSIPPI 38655 eb@elliottbritt.com TEL (662) 234-1763 FAX (662) 234-3835

February 11, 2021

State of Mississippi Department of Environmental Quality Office of Pollution Control P.O. Box 2261 Jackson, MS 39225-2261

RE: Country Club Road Improvements Tate County, Mississippi RECEIVED
FEB 2 2 2021
Dept. of Environmental Quality

Dear Sirs:

Enclosed please find one (1) Large Construction Notice of Intent, one (1) Storm Water Pollution Prevention Plan with an attached copy of the Senatobia Quadrangle map for the referenced project.

The site in its current state is a paved road that will be widened and overlayed as well as a new portion of the same road will be constructed in this project. The project consists of about 15 acres that will be disturbed.

Upon review of this package, please let us know if you need any additional information to expedite the approval of this permit.

Sincerely,

ELLIOTT & BRITT ENGINEERING, P.A.

Kevin W. McLeod, P.E.

Kei W. mill

Project Engineer

Enclosures

MSR10
(NUMBER TO BE ASSIGNED BY STATE)

(NUMBER TO BE ASSIGNED BY STA				
APPLICANT IS THE:				
OWNER CONTACT INFORMATION				
OWNER CONTACT PERSON: Tony Sandridge				
OWNER COMPANY LEGAL NAME: Tate County Board of Supervisors				
OWNER STREET OR P.O. BOX: 201 Ward Street. P.O. Box 309				
OWNER CITY: Senatobia STATE: MS ZIP: 38668 OWNER PHONE #: (662) 562-5661 OWNER EMAIL:				
PRIME CONTRACTOR CONTACT INFORMATION				
PRIME CONTRACTOR CONTACT PERSON:				
PRIME CONTRACTOR CONTACT PERSON: PRIME CONTRACTOR COMPANY LEGAL NAME:				
PRIME CONTRACTOR STREET OR P.O. BOX: PRIME CONTRACTOR CITY: STATE: ZIP:				
PRIME CONTRACTOR PHONE #: (PRIME CONTRACTOR EMAIL:				
FACILITY SITE INFORMATION				
FACILITY SITE NAME: Improvements to Country Club Road				
FACILITY SITE ADDRESS (If the physical address is not available, please indicate the nearest named road. For linear project indicate the beginning of the project and identify all counties the project traverses.)				
STREET: Country Club Road CITY: Senatobia STATE: MS COUNTY: Tate ZIP: 38668				
CITY: Senatobia STATE: MS COUNTY: Tate ZIP: 38668				
FACILITY SITE TRIBAL LAND ID (N/A If not applicable):				
LATITUDE: 34 degrees 34 minutes 29 seconds LONGITUDE: -89 degrees 56 minutes 32 seconds				
LAT & LONG DATA SOURCE (GPS (Please GPS Project Entrance/Start Point) or Map Interpolation):				
TOTAL ACREAGE THAT WILL BE DISTURBED 1: 15 Acres				
IS THIS PART OF A LARGER COMMON PLAN OF DEVELOPMENT? YES□ NO				
IF YES, NAME OF LARGER COMMON PLAN OF DEVELOPMENT: AND PERMIT COVERAGE NUMBER: MSR10				
ESTIMATED CONSTRUCTION PROJECT START DATE: 2021-04-01 YYYY-MM-DD				
ESTIMATED CONSTRUCTION PROJECT END DATE: YYYY-MM-DD				
DESCRIPTION OF CONSTRUCTION ACTIVITY: Widening & Overlay and Grade, Drain, Base, & Pave				
PROPOSED DESCRIPTION OF PROPERTY USE AFTER CONSTRUCTION HAS BEEN COMPLETED: Roadway				
SIC Code NAICS Code				

NEAREST NAMED RECEIVING STREAM: Senatobia Cree	k					
IS RECEIVING STREAM ON MISSISSIPPI'S 303(d) LIST OF IM BODIES? (The 303(d) list of impaired waters and TMDL stream se http://www.deq.state.ms.us/MDEQ.nsf/page/TWB_Total_Maximum_D	gments may be found on MDF	YES□ Q's web site:	NO⊡			
HAS A TMDL BEEN ESTABLISHED FOR THE RECEIVING ST	REAM SEGMENT?	YES□	NO⊡			
ARE THERE RECREATIONAL STREAMS, PRIVATE/PUBLIC WITHIN ½ MILE DOWNSTREAM OF PROJECT BOUNDRY THACTIVITY?	PONDS OR LAKES IAT MAY BE IMPACTED B	YES⊡ Y THE CONST	NO□ RUCTION			
EXISTING DATA DESCRIBING THE SOIL (for linear projects please describe in SWPPP): See SWPPP						
WILL FLOCCULANTS BE USED TO TREAT TURBIDITY IN ST	TORM WATER?	YES□	NO₪			
IF YES, INDICATE THE TYPE OF FLOCCULANT. \Box	ANIONIC POLYACRYLIM OTHER	IDE (PAM)				
IF YES, DOES THE SWPPP DESCRIBE THE METHOD OF INT AND THE LOCATION OF WHERE FLOCCULATED MATERIA	RODUCTION, THE LOCATE L WILL SETTLE?	ON OF INTRO YES □	DUCTION 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

ISLO	NOI FOR A FACILITY THAT WILL REQUIRE OTHER PERMITS?					
IS LC	MOTOKATACIBITI THAT WILL REQUIRE OTHER TERMITS.	YES \square	NO 🗹			
IF YE	ES, CHECK ALL THAT APPLY: AIR HAZARDOUS WASTE	□ PRETREATMEN	ΙΤ			
	\square water state operating \square individual npdes	□ OTHER:				
IS THE PROJECT REROUTING, FILLING OR CROSSING A WATER CONVEYANCE YES NO OF ANY KIND? (If yes, contact the U.S. Army Corps of Engineers' Regulatory Branch for permitting requirements.)						
	IE PROJECT REQUIRES A CORPS OF ENGINEER SECTION 404 PERMIT, I UMENTATION THAT:	PROVIDE APPROPRIAT	E.			
•	The project has been approved by individual permit, or					
•	The work will be covered by a nationwide permit and NO NOTIFICATION to the	e Corps is required, or				
•	The work will be covered by a nationwide or general permit and NOTIFICATIO	N to the Corps is required	I			
IS A I	LAKE REQUIRING THE CONSTRUCTION OF A DAM BEING PROPOSED? s, provide appropriate approval documentation from MDEQ Office of Land and \	YES Water, Dam Safety.)	NO 🗹			
IF THE PROJECT IS A SUBDIVISION OR A COMMERCIAL DEVELOPMENT, HOW WILL SANITARY SEWAGE BE DISPOSED? Check one of the following and attach the pertinent documents.						
	Existing Municipal or Commercial System. Please attach plans and specification associated "Information Regarding Proposed Wastewater Projects" form or application, Jackson, Pearl River and Stone Counties. If the plans and specification LCNOI submittal, MDEQ will accept written acknowledgement from official(scollection and treatment that the flows generated from the proposed project can approperly. The letter must include the estimated flow.	roval from County Utility A ations can not be provided) responsible for wastewa	uthority in at the time ter			
	Collection and Treatment System will be Constructed. Please attach a copy of the permit from MDEQ or indicate the date the application was submitted to MDEQ	cover of the NPDES discl (Date:	harge)			
	Individual Onsite Wastewater Disposal Systems for Subdivisions Less than 35 Lo of General Acceptance from the Mississippi State Department of Health or certific engineer that the platted lots should support individual onsite wastewater disposa	cation from a registered p	the Letter professional			
	Individual Onsite Wastewater Disposal Systems for Subdivisions Greater than 35 feasibility of installing a central sewage collection and treatment system must be response from MDEQ concerning the feasibility study must be attached. If a cent is not feasible, then please attach a copy of the Letter of General Acceptance from certification from a registered professional engineer that the platted lots should study disposal systems.	nade by MDEQ. A copy of tral collection and wastew the State Department of	of the ater system Health or			
INDI	CATE ANY LOCAL STORM WATER ORDINANCE WITH WHICH THE PRO	JECT 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.

Signature of Applicant (owner or prime contractor)

2//2(Date Signed

Tony Sandridge

Printed Name

Board President

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