

MSR10 8 3 8 9

MAR 8 2021	(NO	WIBER TO BE ASSIGNED BY STATE)	
APPLICANT IS THE:	OWNER PRIME CONTRACT	OR	
MDEQ	OWNER CONTACT INFORMATION	N	
OWNER CONTACT PERSON:	Pavid Lorance		
OWNER COMPANY LEGAL NA	ME: National Aeronautics Sapce Admin	istration	
OWNER STREET OR P.O. BOX:	B-100 Room 302 1H		
OWNER CITY: Stennis Spac	e Center STATE. Mississipp	Mississippi ZIP: 39529	
OWNER PHONE #: (228) 688	3-1516 OWNER EMAIL: david.k	lorance@nasa.gov	
PRIM	IE CONTRACTOR CONTACT INFOR	MATION	
PRIME CONTRACTOR CONTA	CT PERSON: Sam Bhate		
PRIME CONTRACTOR COMPA	NY LEGAL NAME: Bhate		
PRIME CONTRACTOR STREET OR P.O. BOX: 1608 13th Avenue South, Suite 300			
PRIME CONTRACTOR CITY:	Birmingham STATE: Alaba	ama _{ZIP:} 35205	
PRIME CONTRACTOR PHONE	Birmingham STATE: Alaba #: (205) 918-4000 PRIME CONTRACTOR F	EMAIL: shbhate@bhate.com	
	FACILITY SITE INFORMATION		
FACILITY SITE NAME: Stennis	Space Center		
FACILITY SITE ADDRESS (If th	e physical address is not available, please indicate th and identify all counties the project traverses.)	e nearest named road. For linear projects	
STREET: Hwy 607			
CITY: Stennis Space Center	STATE: Mississippi COUNTY: Har	ncock ZIP: 39520	
FACILITY SITE TRIBAL LAND		0.1	
LATITUDE: 30 degrees 22 m	inutes 22.29 seconds LONGITUDE: 89 degr	ees 34 minutes 42.65 seconds	
	GPS (Please GPS Project Entrance/Start Point) or Map Interpo	lation):	
TOTAL ACREAGE THAT WILL	BE DISTURBED 1: 7.76		
IS THIS PART OF A LARGER C	OMMON PLAN OF DEVELOPMENT?	YES□ NO ☑	
IF YES, NAME OF LARGER CO AND PERMIT COVERAGE	MMON PLAN OF DEVELOPMENT: E NUMBER: MSR10		
ESTIMATED CONSTRUCTION	PROJECT START DATE:	2021-03-30 <u>YYYY-MM-DD</u>	
ESTIMATED CONSTRUCTION	PROJECT END DATE:	2021-10-31 <u>YYYY-MM-DD</u>	
DESCRIPTION OF CONSTRUCT	ΠΟΝ ACTIVITY: Demolition of Buildings 220	1, 2205, 2206,3416, asphalt removal	
PROPOSED DESCRIPTION OF Grass	PROPERTY USE AFTER CONSTRUCTION HA	AS BEEN COMPLETED:	
SIC Code 1 7 9 5 NA	AICS Code 2 3 8 9 1 0		

NEAREST NAMED RECEIVING STREAM: UT of East Pearl River		
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 http://www.deq.state.ms.us/MDEQ.nsf/page/TWB_Total_Maximum_Daily_Load_Section)	YES□ 1DEQ's web site:	NO☑
HAS A TMDL BEEN ESTABLISHED FOR THE RECEIVING STREAM SEGMENT?	YES□	NO
ARE THERE RECREATIONAL STREAMS, PRIVATE/PUBLIC PONDS OR LAKES WITHIN $^{\prime}\!$	YES□ D 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□	NOM
IF YES, INDICATE THE TYPE OF FLOCCULANT. ANIONIC POLYACRY OTHER		· · · · · · · · · · · · · · · · · · ·
IF YES, DOES THE SWPPP DESCRIBE THE METHOD OF INTRODUCTION, THE LOCAND THE LOCATION OF WHERE FLOCCULATED MATERIAL WILL SETTLE?	ATION OF INTR 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 LC	NOI FOR A FACILITY THAT WILL REQUIRE OTHER PERMITS?	YES 🗆	№ 🛛
112 3/12	S, CHECK ALL THAT APPLY: AIR HAZARDOUS WASTE	□ PRETREAT	•••
IF YE	_		INIENI
	□ WATER STATE OPERATING □ INDIVIDUAL NPDES	OTHER: _	
IS TH OF A	IE PROJECT REROUTING, FILLING OR CROSSING A WATER CONVEYAR NY KIND? (If yes, contact the U.S. Army Corps of Engineers' Regulatory Brancl	NCE YES D h for permitting req	
	IE PROJECT REQUIRES A CORPS OF ENGINEER SECTION 404 PERMIT, I UMENTATION THAT:	PROVIDE APPROF	PRIATE
•	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 re	quired
IS A I (If yes	AKE REQUIRING THE CONSTRUCTION OF A DAM BEING PROPOSED? , provide appropriate approval documentation from MDEQ Office of Land and V	YES 🗖 Water, Dam Safety.)	
	E PROJECT IS A SUBDIVISION OR A COMMERCIAL DEVELOPMENT, HOSPOSED? Check one of the following and attach the pertinent documents.	OW WILL SANITA	RY SEWAGE
	Existing Municipal or Commercial System. Please attach plans and specification associated "Information Regarding Proposed Wastewater Projects" form or appulancock, Harrison, Jackson, Pearl River and Stone Counties. If the plans and specifics of LCNOI submittal, MDEQ will accept written acknowledgement from official(s collection and treatment that the flows generated from the proposed project can a properly. The letter must include the estimated flow.	roval from County U ations can not be pro c) responsible for wa	tility Authority in ovided at the time stewater
	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 NPDE:	S discharge)
	Individual Onsite Wastewater Disposal Systems for Subdivisions Less than 35 Lo of General Acceptance from the Mississippi State Department of Health or certificangineer that the platted lots should support individual onsite wastewater disposa	cation from a regist	opy of the Letter ered 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 st disposal systems.	made by MDEQ. A tral collection and w the State Departme	copy of the astewater system ent of Health or
INDIC	CATE ANY LOCAL STORM WATER ORDINANCE WITH WHICH THE PRO	JECT MUST COM	PLY:
			····

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 Applicant1 (owner or prime contractor)

SAM BHATE

President

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

Coverage No. MSR10 2 3 2 County Hancock
(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: Same Bahte Bhate PHONE NUMBER: 205 9184000						
PRIME CONTRACTOR COMPANY: Bhate						
PRIME CONTRACTOR STREET (P.O. BOX): 1608 13th Ave South, Suite 300						
PRIME CONTRACTOR CITY: Birmingham STATE: AL ZIP: 35205						
PRIME CONTRACTOR STREET (P.O. BOX): 1000 15th Ave 300th, 5the 300 PRIME CONTRACTOR CITY: Birmingham STATE: AL ZIP: 35205 E-MAIL ADDRESS: sbhate@bhate.com						
OWNER INFORMATION						
OWNER CONTACT PERSON: David Lorance PHONE NUMBER: (228) 6881516						
OWNER CONTACT PERSON: David Lorance PHONE NUMBER: (228) 6881516 OWNER COMPANY NAME: National Aeronautics Sapce Administration						
PROJECT INFORMATION						
PROJECT NAME: FY20 Stennis Sapce Center Demoltion						
DESCRIPTION OF CONSTRUCTION ACTIVITY: Demolition of Buildings 2201, 2205, 2206,3416, asphalt removal						
PHYSICAL SITE ADDRESS (If the physical address is not available indicate the nearest named road. For linear projects, indicate the beginning of the project and identify all counties the project traverses.) STREET: Hwy 607, Building 2201, 2205, 2206 CITY: Stennis Space Center COUNTY: Hancock						
CITY: Stennis Space Center COUNTY: Hancock						
I certify that I am the prime contractor for this project and will comply with all the requirements in the above referenced general NPDES permit. I further 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. Printed Name						
This application shall be signed as follows: This Prime Contractors Certification form shall be submitted to:						

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.

Chief, Environmental Permits Division MS Department of Environmental Quality, Office of Pollution Control P.O. Box 2261 Jackson, Mississippi 39225

Revised: 10/25/16





3-3-21

Re: Large Construction Storm Water General Permit NPDES Permit Application

To Whom it May Concern:

Enclosed are documents, maps and the SWPPP required by the Mississippi Dept. of Environmental Quality for issuance of a NPDES permit for demolition activities to be conducted at Stennis Space Center. Please review these documents for acceptance and issuance of the General Permit necessary to begin demolition activities scheduled to start in Late March of this year following the completion of pre-demolition activities.

Although Mr. Sam Bhate is listed on the application, ALL inquiries, questions, comments or requests for additional information should be addressed to:

Jonathon Geroux, Project Manager

1608 13th South, Suite 300

Birmingham, AL 35205

Office: 205-918-4000

Mobile: 601-408-0444

Email: jgeroux@bhate.com

Enclosures