A1: 79870

## MAJOR MODIFICATION FORM FOR LARGE CONSTRUCTION GENERAL PERMIT Coverage No. MSR10 8 4 8 6 County Rankin



## INSTRUCTIONS

INSTRUCTIONS			
(check all that apply). This form si topographic map, Corps of Engineer	hould be submitted with a mod s Section 404 documentation an	lifted Storm Water P d wastewater collecti	t least 30 days in advance of the following activities ollution Prevention Plan (SWPPP), updated USGS on and treatment information, as appropriate.
SWPPP details have been developed and are ready for MDEQ review for subsequent phases of an existing, covered project.			
"Footprint" identified in the original LCNOI is proposed to be enlarged.			
This form must be signed by the cur of new phases of existing subdivision Coverage recipients are authorized phases, under the conditions of the G such as changes of erosion and sedim	rent coverage recipient under is must apply for separate pers to discharge storm water asso eneral Permit, <u>only upon recei</u> s ent controls used, must be in ac	Mississippl's Large C nit coverage through ciated with proposed at of written notificat cordance with ACT6	onstruction General Permit. A different developer the submittal of a new complete LCNO1 package. expansions of existing subdivisions or subsequent ion of approval by MDEO. All other modifications, , S-1 (6) and S-2 (7) of the General Permit.
ALL INFORMATION MUST BE COMPLETED (indicate "N/A" where not applicable)			
COVERAGE RECIPIENT INFORMATION			
COVERAGE RECIPIENT CONTACT NAME: Scooter Myers			TF1.#(601) 966-5742
COMPANY NAME: M&D Developers, LLC			
STREFT OR P.O. BOX: PO Box	6331		
		ZIP: 39208	E-MAIL: mandddevelopers@yahoo.com
PROJECT INFORMATION			
PROJECT NAME: Tower Ridge	9		
CTTY: Pearl			
ADDITIONAL ACREAGE TO BE DISTURBED:			AL PROJECT ACREAGE: 10.74
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 (must be signed by coverage recipient)			Date Co-Owned
Scooter myers Printed Name			Title Co-Owned
Please submit this form to	Chief, Environmental Permits Divi MS Department of Environmental P.O. Box 2261 Jackson, Mississippi 39225		on Control

Revised 12:12:16