

LARGE CONSTRUCTION GENERAL PERMIT FOR LAND DISTURBING ACTIVIES OF FIVE (5) OR MORE ACRES

RE-COVERAGE FORM

INSTRUCTIONS

The submittal of this form is required to receive coverage under the reissued Large Construction General Permit. This form must be completed and returned to the address printed at the bottom of the back page of this form by April 30, 2022.

The signatory of this form must be the owner or operator (prime contractor) who is the current coverage recipient (rather than the project manager or environmental consultant).

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. Permits will be issued in the company name as it is registered with the Mississippi Secretary of State.

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. <u>SWPPP amendments with the sole intent of incorporating new permit conditions do not need to be submitted to MDEQ for review and/or approval.</u>

If the project is complete and final stabilization has been achieved, please request termination of coverage by completing the Request for Termination (RFT) Form found in the Large Construction Forms Package. Projects that continue to discharge storm water associated with construction activity without applicable permit coverage are in violation of state law.

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

ALL INFORMATION REQUESTS MUST BE ANSWERED (Answer "NA" if not applicable

COVERAGE RECIPIENT INFORMATION

CONTACT NAME & POSITION: David K	OUT .	
COMPANY LEGAL NAME: City of	Batesville	
STREET OR P.O. BOX: 103 College	e St.	
CITY: Batesville	STATE: MS	_{ZIP:} 38606
PHONE NUMBER: (662) 563-45	76 E-MAIL:	

FACILITY SITE INFORMATION

		710,2111011				
FACILITY SITE NAME: Batesv	ille Sewer and Force Main Impro	ovements Phase 1				
CONTACT NAME & POSITION:	David Karr, Owner					
CONTACT PHONE NUMBER: (6						
FACILITY PHYSICAL SITE ADD	RESS (IF NOT AVAILABLE INDICATE	NEAREST NAMED ROAD):		<u></u>		
STREET:						
CITY: Batesville	COUNTY: MS		zip: _38	3606		
PROVIDE THE COORDINATES O	OF THE PROJECT ENTRANCE OR STA	RT POINT:				
LATITUDE: 89 degrees 56 minutes 28 seconds LONGITUDE: 34 degrees 19 minutes 48 seconds						
LAT & LONG DATA SOURCE (GPS (Please GPS Project Entrance/Start Point) or Map Interpolation): Google Earth						
TOTAL ACREAGE DISTURBED:	5.67 ESTIMATED CONS	TRUCTION PROJECT END	DATE: 2022-1	2-09 -MM-DD		
STO	RM WATER POLLUTION PREV	VENTION PLAN (SWPF	P)			
THE GENERAL PERMIT REQUIRES THE SWPPP TO BE ONSITE, UP-TO-DATE AND EFFECTIVE IN CONTROLLING STORM WATER POLLUTANTS. ACCORDINGLY, THE FOLLOWING QUESTIONS MUST BE ANSWERED YES or N.A. TO RECEIVE RECOVERAGE.						
1. IS A COPY OF THE SWPPP A	AT THE PERMITTED SITE OR LOCAL	LY AVAILABLE?	✓ YES	☐ NO		
	UP-TO-DATE ASSESSMENT OF POTEN IDENTIFY BMPS TO EFFECTIVELY (✓ YES	□ NO		
	PROJECT BMP, IS IT EQUIPPED WITI RGES <u>ONLY</u> FROM THE SURFACE OF		YES or N.	A. NO		
4. DOES SWPPP PROHIBIT TH	E DISCHARGES LISTED IN ACT2, T-3	(3) OF THE PERMIT?	✓ YES	□ NO		
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 the project continues as described in the original notice of intent. Also, I certify that I understand when coverage is terminated I am no longer authorized to discharge storm water associated with construction activity under this general permit. I understand that discharging pollutants associated with construction activity to waters of the State without proper permit coverage is in violation of state						
law.		w. a	ee e extende			
I am aware of the significant changes in the renewed Large Construction Storm Water General Permit and certify the SWPPP for this project has been medified to incorporate these changes. 3-23-22 Date Signed Public Worlds Director						
Signature		Date Signed				
David Karr Printed Name ¹		Public L	JorlLs Dir	ector		
 For a corporation, by a responsible c For a partnership, by a general part For a sole proprietorship, by the pro 	ner.					
After signing please mail to:	cr signing please mail to: Chief, Environmental Permits Division, MS Department of Environmental Quality, Office of Pollution Control P.O. Box 2261 Jackson, Mississippi 39225					
Electronically:	https://www.mdeq.ms.gov/constructio	n-stormwater/				