

A1: 81389



INDUSTRIAL STORMWATER NOTICE OF INTENT (ISNOI)

FOR COVERAGE UNDER THE INDUSTRIAL STORMWATER
GENERAL NPDES PERMIT MSR00 2489
(NUMBER TO BE ASSIGNED BY STATE)

INSTRUCTIONS

Applicant must be the owner or operator (i.e., legal entity that controls the facility's operation, or the plant/site manager, not the environmental consultant). The owner or operator that receives coverage is responsible for permit compliance. File at least 60 days prior to the commencement of the regulated industrial activity.

Submittals with this ISNOI must include a Storm Water Pollution Prevention Plan (SWPPP) with the minimum components found in ACTs 5-8 of the Industrial Stormwater General Permit. In addition, a United States Geological Survey (USGS) quadrangle map (or a copy) showing site location and extending at least 1/2 mile beyond the site's property boundary is required. If a copy is submitted, provide the name of the quadrangle map that is found in the upper right hand corner. Maps can be obtained from the MDEQ, Office of Geology at 601-961-5523.

ALL FORM BLANKS MUST BE COMPLETED (enter "NA" if not applicable)

THE APPLICANT IS: ☐ OWNER ☒ OPERATOR (PLEASE CHECK ONE OR BOTH)

OWNER INFORMATION

Owner Contact Name: Dave Ketchum Position: President
Owner Company Name: Fabricators Supply, LLC
Owner Street (P.O. Box): 205 Airport Road
Owner City: West Point State: MS Zip: 39773
Owner Phone Number: (662) 492-0550 Owner Email: dave@fab-supply.com

OPERATOR INFORMATION (if different than owner)

Operator Contact Name: Jim Williams Position: Operations Manager
Operator Company Name: Fabricators Supply, LLC
Operator Street (P.O. Box): 205 Airport Road
Operator City: West Point State: MS Zip: 39773
Operator Phone Number: (662) 492-0550 Operator Email: jim@fab-supply.com

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FACILITY INFORMATION

Facility Name: Fabricators Supply, LLC

Nature of Business (Include 4-digit Standard Industrial Classification Code (SIC) and description):

SIC Code: 3441 Fabricated Structural Metal

Receiving Stream: Town Creek

Is receiving stream on MDEQ's 303(d) List?

☐ Yes ☐ No

Has a TMDL been established for the receiving stream segment?

☐ Yes ☐ No

Physical Site Address:

Street: 205 Airport Road City: West Point

County: Clay Zip: 39773

Latitude: 33 degrees 35 minutes 6 seconds Longitude: 88 degrees 39 minutes 48 seconds

Method Used to Determine Lat & Long (GPS of plant entrance) or Map Interpolation): GPS of front office

Attach a copy of any existing laboratory data for each storm water outfall. If multiple sampling has been performed, provide a summary for each parameter, including sampling dates and the minimum, average and maximum values.

Is this a SARA Title III, Section 313 facility utilizing water priority chemicals at threshold amounts? ☐ Yes ☒ No
If yes, please attach a list of water priority chemicals present at the facility.

DOCUMENTATION OF COMPLIANCE WITH OTHER REGULATIONS/REQUIREMENTS

Is this notice for a facility that will require other permits? ☐ Yes ☒ No

If yes, check which one(s): ☐ Air, ☐ Hazardous Waste, ☐ Pretreatment, ☐ Water State Operating,
☐ Individual NPDES, or list Other(s):

How will sanitary sewage be collected and treated? _____


Indicate any local storm water ordinance with which the facility must comply and submit any documentation of approval.

Is treatment of storm water provided at any outfall? ☐ Yes ☒ No

If yes, please describe: _____

CERTIFICATION

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.


Signature¹ (Must be signed by operator when different than owner)

7/22/2022

Date Signed

Jim Williams

Printed Name¹

Operations Manager

Title

¹This application shall be signed according to the General Permit, ACT 16, T-9, 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, the mayor, or ranking elected official.

After signing please mail to:

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



July 22, 2022

Matthew Lancaster
MDEQ Office of Pollution Control
P.O. Box 2261
Jackson, MS 39225

RE: Industrial Stormwater NOI
Fabricators Supply LLC
205 Airport Road
West Point, MS, Clay County

Dear Mr. Lancaster:

Please find enclosed an industrial stormwater notice of intent for the referenced facility. Also enclosed is a stormwater pollution prevention plan (SWPPP) and associated documents. This is in response to the joint inspection conducted on March 28, 2022, by EPA and MDEQ personnel.

Fabricators Supply has completed the below items that were mentioned in our previous response letter sent via email on June 30, 2022, which is also enclosed for your review.

- Apply for a NPDES Industrial Stormwater Permit for the site.
- Develop a Storm Water Pollution Prevention Plan.
- Provide and maintain a spill kit onsite in the fueling area.
- Provide secondary containment for all containers 55 gallons and above.
- Implement monthly stormwater inspections and jar test as part of the permit requirement.
- Implement a waste management plan for all onsite waste storage and disposal.

We also intend to incorporate the best management practices (BMPs) noted in the SWPPP once it is reviewed and approved. We trust taking these immediate actions to address these issues will result in no further enforcement action being taken.

Should you have any questions, comments, or need additional information, please feel free to reach out to me at 662.295.5183 or via email at jim@fab-supply.com

Sincerely,

A handwritten signature in blue ink, appearing to read 'Jim Williams', is written over a horizontal line.

Jim Williams
Operations Manager

Cc: Mr. Mark Robertson, EPA

