

AI: 70274

MSR10 8787

(NUMBER TO BE ASSIGNED BY STATE)

APPLICANT IS THE: ☒ OWNER ☐ PRIME CONTRACTOR

### OWNER CONTACT INFORMATION

OWNER CONTACT PERSON: Josh Fleming  
 OWNER COMPANY LEGAL NAME: Elliott Homes, LLC  
 OWNER STREET OR P.O. BOX: 1402 Pass Road  
 OWNER CITY: Gulfport STATE: MS ZIP: 39501  
 OWNER PHONE #: (228) 257-9914 OWNER EMAIL: brandon@myelliottthome.com

### PRIME CONTRACTOR CONTACT INFORMATION

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: Diamondhead Lakes - Phase Two  
 FACILITY SITE ADDRESS (If the physical address is not available, please indicate the nearest named road. For linear projects indicate the beginning of the project and identify all counties the project traverses.)  
 STREET: North of Cherryhill Dr, South of Diamondhead Dr W, East of Diamondhead Dr W and Op La Way, West of Diamondhead Dr W and Pokai St  
 CITY: Diamondhead STATE: MS COUNTY: Hancock ZIP: 39525  
 FACILITY SITE TRIBAL LAND ID (N/A If not applicable): \_\_\_\_\_  
 LATITUDE: N30 degrees 23 minutes 53.3 seconds LONGITUDE: W89 degrees 21 minutes 55.6 seconds  
 LAT & LONG DATA SOURCE (GPS (Please GPS Project Entrance/Start Point) or Map Interpolation): Google Maps  
 TOTAL ACREAGE THAT WILL BE DISTURBED <sup>1</sup>: 13.28  
 IS THIS PART OF A LARGER COMMON PLAN OF DEVELOPMENT? YES ☒ NO ☐  
 IF YES, NAME OF LARGER COMMON PLAN OF DEVELOPMENT: Diamondhead Lakes  
 AND PERMIT COVERAGE NUMBER: MSR10 \_\_\_\_\_  
 ESTIMATED CONSTRUCTION PROJECT START DATE: 2022-10-01  
 YYYY-MM-DD  
 ESTIMATED CONSTRUCTION PROJECT END DATE: 2023-10-01  
 YYYY-MM-DD  
 DESCRIPTION OF CONSTRUCTION ACTIVITY: Site work for single-family residential, 44 lots total  
 PROPOSED DESCRIPTION OF PROPERTY USE AFTER CONSTRUCTION HAS BEEN COMPLETED:  
Single-family residential subdivision  
 SIC Code \_\_\_\_\_ NAICS Code \_\_\_\_\_

m-received via email 8.10.22





MISSISSIPPI DEPARTMENT OF  
ENVIRONMENTAL QUALITY

## LARGE CONSTRUCTION NOTICE OF INTENT (LCNOI) FOR COVERAGE UNDER THE LARGE CONSTRUCTION STORM WATER GENERAL NPDES PERMIT

### INSTRUCTIONS

The Large Construction Notice of Intent (LCNOI) is for coverage under the Large Construction General Permit for land disturbing activities of five (5) acres or greater; or for land disturbing activities, which are part of a larger common plan of development or sale that are initially less than five (5) acres but will ultimately disturb five (5) or more acres. Applicant must be the owner or operator. For construction activities, the operator is typically the prime contractor. 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 Large Construction Storm Water General Permit MSR10.

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

Completed LCNOIs should be filed at least thirty (30) days prior to the commencement of construction. Discharge of storm water from large construction activities without written notification of coverage is a violation of state law.

Submittals with this LCNOI must include:

- A site-specific Storm Water Pollution Prevention Plan (SWPPP) developed in accordance with ACT5 of the General Permit
- A detailed site-specific scaled drawing showing the property layout and the features outlined in ACT5 of the General Permit
- A United States Geological Survey (USGS) quadrangle map or photocopy, extending at least one-half mile beyond the facility property boundaries with the site location and outfalls outlined or highlighted. The name of the quadrangle map must be shown on all copies. Quadrangle maps can be obtained from the MDEQ, Office of Geology at 601-961-5523.

Additional submittals may include the following, if applicable:

- Appropriate Section 404 documentation from U.S. Army Corps of Engineers
- Appropriate documentation concerning future disposal of sanitary sewage and sewage collection system construction
- Appropriate documentation from the MDEQ Office of Land & Water concerning dam construction and low flow requirements
- Approval from County Utility Authority in Hancock, Harrison, Jackson, Pearl River and Stone Counties

ALL QUESTIONS MUST BE ANSWERED (Answer "NA" if the question is not applicable)

NEAREST NAMED RECEIVING STREAM: Rotten Bayou - Waterbody ID MS113JE

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 MDEQ's web site: [http://www.deq.state.ms.us/MDEQ.nsf/page/TWB\\_Total\\_Maximum\\_Daily\\_Load\\_Section](http://www.deq.state.ms.us/MDEQ.nsf/page/TWB_Total_Maximum_Daily_Load_Section)) YES ☒ NO ☐

HAS A TMDL BEEN ESTABLISHED FOR THE RECEIVING STREAM SEGMENT? YES ☒ NO ☐

ARE THERE RECREATIONAL STREAMS, PRIVATE/PUBLIC PONDS OR LAKES WITHIN ½ MILE DOWNSTREAM OF PROJECT BOUNDARY THAT MAY BE IMPACTED BY THE CONSTRUCTION ACTIVITY? YES ☒ NO ☐

EXISTING DATA DESCRIBING THE SOIL (for linear projects please describe in SWPPP):

Poarch fine sandy loam

WILL FLOCCULANTS BE USED TO TREAT TURBIDITY IN STORM WATER? YES ☐ NO ☒

IF YES, INDICATE THE TYPE OF FLOCCULANT.

☐ ANIONIC POLYACRYLAMIDE (PAM)

☐ OTHER \_\_\_\_\_

IF YES, DOES THE SWPPP DESCRIBE THE METHOD OF INTRODUCTION, THE LOCATION OF INTRODUCTION AND THE LOCATION OF WHERE FLOCCULATED MATERIAL WILL SETTLE? YES ☐ NO ☐

<sup>1</sup>Acreage for subdivision development includes areas disturbed by construction of roads, utilities and drainage. Additionally, a housesite of at least 10,000 ft<sup>2</sup> 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 LCNOI FOR A FACILITY THAT WILL REQUIRE OTHER PERMITS?

YES ☐

NO ☒

IF YES, CHECK ALL THAT APPLY: ☐ AIR ☐ HAZARDOUS WASTE ☐ PRETREATMENT

☐ WATER STATE OPERATING

☐ INDIVIDUAL NPDES

☐ OTHER: \_\_\_\_\_

IS THE PROJECT REROUTING, FILLING OR CROSSING A WATER CONVEYANCE OF ANY KIND? (If yes, contact the U.S. Army Corps of Engineers' Regulatory Branch for permitting requirements.) YES ☐ NO ☒

IF THE PROJECT REQUIRES A CORPS OF ENGINEER SECTION 404 PERMIT, PROVIDE APPROPRIATE DOCUMENTATION THAT:

- The project has been approved by individual permit, or **PERMITTING THROUGH USACE UNDERWAY BY SEPARATE CONSULTANT**
- The work will be covered by a nationwide permit and NO NOTIFICATION to the Corps is required, or
- The work will be covered by a nationwide or general permit and NOTIFICATION to the Corps is required

IS A LAKE REQUIRING THE CONSTRUCTION OF A DAM BEING PROPOSED? YES ☐ NO ☒  
(If yes, provide appropriate approval documentation from MDEQ Office of Land and Water, Dam Safety.)

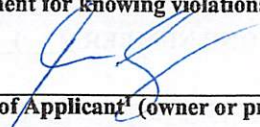
IF THE PROJECT IS A SUBDIVISION OR A COMMERCIAL DEVELOPMENT, HOW WILL SANITARY SEWAGE BE DISPOSED? Check one of the following and attach the pertinent documents.

- ☐ Existing Municipal or Commercial System. Please attach plans and specifications for the collection system and the associated "Information Regarding Proposed Wastewater Projects" form or approval from County Utility Authority in Hancock, Harrison, Jackson, Pearl River and Stone Counties. If the plans and specifications can not be provided at the time of LCNOI submittal, MDEQ will accept written acknowledgement from official(s) responsible for wastewater collection and treatment that the flows generated from the proposed project can and will be transported and treated properly. The letter must include the estimated flow.
- ☒ Collection and Treatment System will be Constructed. Please attach a copy of the cover of the NPDES discharge permit from MDEQ or indicate the date the application was submitted to MDEQ (Date: To be applied for.)
- ☐ Individual Onsite Wastewater Disposal Systems for Subdivisions Less than 35 Lots. Please attach a copy of the Letter of General Acceptance from the Mississippi State Department of Health or certification from a registered professional engineer that the platted lots should support individual onsite wastewater disposal systems.
- ☐ Individual Onsite Wastewater Disposal Systems for Subdivisions Greater than 35 Lots. A determination of the feasibility of installing a central sewage collection and treatment system must be made by MDEQ. A copy of the response from MDEQ concerning the feasibility study must be attached. If a central collection and wastewater system is not feasible, then please attach a copy of the Letter of General Acceptance from the State Department of Health or certification from a registered professional engineer that the platted lots should support individual onsite wastewater disposal systems.

INDICATE ANY LOCAL STORM WATER ORDINANCE WITH WHICH THE PROJECT MUST COMPLY:

City of Diamondhead Stormwater Ordinances

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<sup>1</sup> (owner or prime contractor)

8-16-2022  
Date Signed

Josh Fleming  
Printed Name<sup>1</sup>

Land Manager  
Title

<sup>1</sup>This 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

Electronically:

<https://www.mdeg.ms.gov/construction-stormwater/>

Revised 3/23/22



# PRIME CONTRACTOR CERTIFICATION

## LARGE CONSTRUCTION GENERAL PERMIT

Coverage No. MSR10 \_\_\_\_\_ County \_\_\_\_\_

(Fill in your Certificate of Coverage Number and County)



MISSISSIPPI DEPARTMENT OF  
ENVIRONMENTAL QUALITY

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: \_\_\_\_\_ PHONE NUMBER: ( ) \_\_\_\_\_

PRIME CONTRACTOR COMPANY: \_\_\_\_\_

PRIME CONTRACTOR STREET (P.O. BOX): \_\_\_\_\_

PRIME CONTRACTOR CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

### OWNER INFORMATION

OWNER CONTACT PERSON: \_\_\_\_\_ PHONE NUMBER: ( ) \_\_\_\_\_

OWNER COMPANY NAME: \_\_\_\_\_

### PROJECT INFORMATION

PROJECT NAME: \_\_\_\_\_

DESCRIPTION OF CONSTRUCTION ACTIVITY: \_\_\_\_\_

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: \_\_\_\_\_

CITY: \_\_\_\_\_ COUNTY: \_\_\_\_\_

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.

Prime Contractor Signature<sup>1</sup> \_\_\_\_\_

Date Signed \_\_\_\_\_

Printed Name<sup>1</sup> \_\_\_\_\_

Title \_\_\_\_\_

<sup>1</sup>This 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.

This Prime Contractors Certification form shall be submitted to:

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

Keep a Copy Available at the Permitted Facility or Locally Available  
Submit the Inspection Reports Only if Requested by the Mississippi Department of Environmental Quality (MDEQ)

**LARGE CONSTRUCTION GENERAL PERMIT  
SITE INSPECTION AND CERTIFICATION FORM  
COVERAGE NUMBER (MSR10 \_ \_ \_ \_)**



**INSTRUCTIONS**

Results of construction storm water inspections required by ACT6 of this permit shall be recorded on this report form and kept with the Storm Water Pollution Prevention Plan (SWPPP) in accordance with the inspection documentation provisions of ACT9 of the this permit. Inspections shall be performed at least weekly for a minimum of four inspections per month. The coverage number must be listed at the top of all Inspection and Certification Forms.

**COVERAGE RECIPIENT INFORMATION**

OWNER/PRIME CONTRATOR NAME: \_\_\_\_\_  
PROJECT NAME: \_\_\_\_\_  
PROJECT STREET ADDRESS: \_\_\_\_\_  
PROJECT CITY: \_\_\_\_\_ PROJECT COUNTY: \_\_\_\_\_  
OWNER/PRIME CONTRACTOR MAILING ADDRESS: \_\_\_\_\_  
MAILING CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
CONTACT PERSON: \_\_\_\_\_ CONTACT PHONE NUMBER: (\_\_\_\_\_) \_\_\_\_\_  
EMAIL ADDRESS: \_\_\_\_\_

**INSPECTION DOCUMENTATION**

DATE (mo/day/yr)	TIME (hr:min AM/PM)	ANY DEFICIENCIES? (CHECK IF YES)	INSPECTOR(S)
		<input type="checkbox"/>	
		<input type="checkbox"/>	
		<input type="checkbox"/>	
		<input type="checkbox"/>	
		<input type="checkbox"/>	
		<input type="checkbox"/>	

Deficiencies Noted During any Inspection (give date(s); attach additional sheets if necessary): \_\_\_\_\_

Corrective Action Taken or Planned (give date(s); attach additional sheets if necessary): \_\_\_\_\_

Based upon this inspection, which I or personnel under my direct supervision conducted, I certify that all erosion and sediment controls have been implemented and maintained, except for those deficiencies noted above, in accordance with the Storm Water Pollution Prevention Plan (SWPPP) and sound engineering practices as required by the above referenced permit. I further certify that the LCN01 and SWPPP information is up to date.

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 gather and evaluate the information submitted. Based on my inquiry of the person or persons 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.

Authorized Signature \_\_\_\_\_

Date \_\_\_\_\_

Printed Name \_\_\_\_\_

Title \_\_\_\_\_



# Request for Termination (RFT) of Coverage



**LARGE CONSTRUCTION GENERAL PERMIT**  
Coverage No. MSR10 \_\_\_\_\_ County \_\_\_\_\_  
(Fill in your Certificate of Coverage Number and County)

This form must be submitted within thirty (30) days of achieving final stabilization (see ACT10, S-1 of general permit). Failure to submit this form is a violation of permit conditions.

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).

(Please Print or Type)

Project Name: \_\_\_\_\_

Physical Site Street Address (if not available, indicate nearest named road): \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ Zip: \_\_\_\_\_

Coverage Recipient Company Name: \_\_\_\_\_

Street Address / P.O. Box: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Coverage Recipient Contact Name and Position: \_\_\_\_\_ Tel. #: (\_\_\_\_) \_\_\_\_\_

Has another owner(s) or operator(s) assumed control over all areas of the site that have not reached final stabilization?

## RESIDENTIAL SUBDIVISIONS:

- ☐ YES. A copy of the Registration Form for Residential Lot Coverage for each lot or out parcel that has been sold and a site map, indicating which lots have been sold, are attached.
- ☐ NO. Coverage may not be terminated until all areas have reached final stabilization.

## COMMERCIAL DEVELOPMENT:

- ☐ YES. A copy of the site map, indicating which out-parcels have been sold, is attached.
- ☐ NO. Coverage may not be terminated until all areas have reached final stabilization.

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 understand that by submitting this Request for Termination and receiving written confirmation, I will no longer be authorized to discharge storm water associated with construction activity under this general permit. Discharging pollutants associated with construction activity to waters of the State without proper permit coverage is a violation of state law. I also understand that the submittal of this Request for Termination does not release an owner or operator from liability for any violations of this permit or the Clean Water Act.

Authorized Name (Print) \_\_\_\_\_

Telephone \_\_\_\_\_

Signature \_\_\_\_\_

Date Signed \_\_\_\_\_

<sup>1</sup>This application shall be signed according to the General Permit, ACT11, T-7 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.

After signing please mail to:

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



**RUN OFF CALCULATIONS FOR FIRST 1/2 INCH OF RUNOFF FROM IMPERVIOUS SURFACES  
HANCOCK COUNTY, DIAMONDHEAD, MISSISSIPPI - 50 YEAR STORM EVENT**

	ACRE	SF
Total site Area	13.03	567586.80
Total Impervious Area	3.84	167184.31

At a minimum, the first 1/2 inch of runoff from impervious surfaces (e.g.; roads, sidewalks, etc.) must be treated by infiltration, evaporation, or other approved method prior to discharge into state waters

Volume of 1/2 in runoff on impervious areas:	CF	
	6,966.01	(total impervious area X 0.5 inches)

	WEST POND STORAGE (CF)	EAST POND STORAGE (CF)	TOTAL STORAGE (CF)
Detention Pond Parameters	55,418	60,375	115,793.00

Detention Ponds (115,739.00) are sufficient to treat the volume of the first 1/2 inch of runoff from impervious surfaces (6,966.017 CF) prior to discharge into state waters.



REPLY TO  
ATTENTION OF

**DEPARTMENT OF THE ARMY**  
CORPS OF ENGINEERS, MOBILE DISTRICT  
P.O. BOX 2288  
MOBILE, AL 36628-0001

September 16, 2019

Mississippi Branch  
Regulatory Division

SUBJECT: Department of the Army Nationwide Permit Number SAM-2018-00110-JRO,  
Elliot Land Developments, LLC

Elliot Land Developments, LLC  
Attention: Brandon Elliott  
1402 Pass Road  
Gulfport, MS 39501

Dear Mr. Elliott:

This letter is in response to your request for a Department of the Army (DA) Nationwide Permit (NWP) 29, Residential Developments, to fill 0.42 acres of waters of the U.S. associated with the construction of a residential subdivision. The project is located southeast of Diamondhead Drive West on the Glen Eagle Golf Course in Section 35, Township 7S, Range 14W, Hancock County, Mississippi. Latitude: 30.395902° North, Longitude: 89.366132° West; The project has been assigned file number **SAM-2018-00110-JRO**, which should be referred to in all future correspondence with this office concerning this project.

DA permit authorization pursuant to Section 404 of the Clean Water Act of 1977 (33 U.S.C. 1344) is necessary because your project involves the placement of fill and work in water of the United States. Specifically, your project involves the placement of approximately 2000 cubic yards of fill within 0.42 acres of wetlands for the construction a residential subdivision. The proposed impacts of 0.42 acres are associated with previously authorized impacts of 0.44 acres. The previous work was authorized by a NWP 29 permit (SAM-2018-00110-JRO) on 20 June 2019. The work included in the current authorization will supersede the activities authorized under the previous verification.

Based upon the information and plans you provided, we hereby verify that the work described above, which would be performed in accordance with the enclosed drawings, is authorized by NWP 29, Residential Developments, in accordance with 33 CFR Part 330 of our regulations. Also, NWP 29 and their associated regional and general conditions are available at: [www.sam.usace.army.mil/Missions/Regulatory/NWP.aspx](http://www.sam.usace.army.mil/Missions/Regulatory/NWP.aspx).

The following project specific conditions are included with this verification:



a. The activity shall be conducted in accordance with the information submitted and meet the conditions applicable to the NWP, as described at Parts B and C of the NWP Program and any applicable State Regional Conditions.

b. Within 60 days of completion of the work authorized, the enclosed Compliance Certification must be completed and submitted to the U.S. Army Corps of Engineers (USACE). Also, the enclosed yellow Notice of Authorization must be posted at the site during construction of the authorized activity.

c. Prior to initiation of any construction activities on-site, the permittee shall provide compensatory mitigation for impacts to 0.42 acres of medium quality bottomland hardwood wetlands through a USACE-approved mitigation bank servicing the project area. Proof of the purchase of mitigation credits shall be provided to the USACE prior to initiation of any construction activities on-site.

d. The permittee shall map and note as avoided, the 3.42 acres of avoided wetlands and 0.22 acres of other waters of the United States. The mapped wetlands and avoidance notation shall be included on the plat(s)/deed(s) that run with the land and shall include a reference to Corps permit, SAM-2018-00110-JRO. Further, the boundary of the avoided wetlands shall be conspicuously marked with signs indicating the area is protected wetlands.

This verification is valid until the NWP is modified, reissued, or revoked. All of the existing Nationwide Permits (NWPs) are scheduled to be modified, reissued, or revoked prior to March 19, 2022. It is incumbent upon you to remain informed of changes to the NWPs. We will issue a public notice when the Nationwide Permit are reissued.

This letter contains an Approved Jurisdictional Determination (AJD) form for the waters of the U.S. identified within the project area signed by a representative of this office. If you object to a determination, you may request an administrative appeal under the U.S. Army Corps of Engineers (USACE) regulations at 33 CFR Part 331. Enclosed you will find a Notification of Appeal Process (NAP) fact sheet and Request for Appeal (RFA) form for each site. If you request to appeal a determination you must submit a completed RFA form to the South Atlantic Division Office at the following address: Regulatory Appeals Review Officer, South Atlantic Division, 60 Forsyth Street Southwest, Room 10M15, Atlanta, Georgia 30303-8801, (404) 562-5137, Fax (404) 562-5138.

In order for an RFA form to be accepted by the USACE, the USACE must determine that it is complete, that it meets the criteria for appeal under 33 CFR Part 331.5, and that it has been received by the District Office within 60 days of the date of the NAP. Should you decide to submit an RFA form, it must be received at the above address by October 21, 2019. It is not necessary to submit an RFA form to the Division Office if you do not object to the determination in this letter.

This Approved JD is based on current policy and regulation and is valid for a period of 5 years from the date of this letter. If after the 5-year period this JD has not been specifically revalidated by the USACE, it shall automatically expire.

Nothing in this letter shall be construed as excusing you from compliance with other federal, state, or local statutes, ordinances, or regulations which may affect this work. Revisions to your proposal may invalidate this authorization. In the event changes to this project are contemplated, it is recommended that you coordinate with us prior to proceeding with the work.

A copy of this permit is being provided to the Mississippi Department of Marine Resources, Attention: Mr. Greg Christodoulou, 1141 Bayview Avenue, Suite 101, Biloxi, Mississippi 39530; Mississippi Department of Environmental Quality, Attention: Ms. Florance Bass, Post Office Box 2261, Jackson, Mississippi 39225 and Ecological Asset Management, LLC, Attention: Mr. Randy Ellis, 803 Highway 90, Bay St. Louis, Mississippi 39520.

Please contact me at (251) 690-3188 or at [jeremy.r.overstreet@usace.army.mil](mailto:jeremy.r.overstreet@usace.army.mil), if you have any questions. For additional information about our Regulatory Program, please visit our web site at [www.sam.usace.army.mil/Missions/Regulatory.aspx](http://www.sam.usace.army.mil/Missions/Regulatory.aspx). Also, please take a moment to complete our customer satisfaction survey located near the bottom of the webpage. Your responses are appreciated and will help us improve our services.

Sincerely,

Jeremy Overstreet  
South Mississippi Branch  
Regulatory Division

Enclosures