A1: 84726



MINING NOTICE OF INTENT (MNOI) MINING STORM WATER, DEWATERING AND NO DISCHARGE FOR COVERAGE UNDER GENERAL PERMIT MSR32 3025 (Number to be assigned by State)

File at least 30 days prior to the commencement of mining; 15 days if a Storm Water Pollution Prevention Plan (SWPPP) is already on file and mine dewatering is <u>not</u> proposed. Lateral expansion of an existing mine that has general permit coverage requires the submittal of the Major Modification Form, not a new MNOI. However, water associated with mining or the operation of a wastewater recirculation system with no discharge without

modification of the existing SWPPP to include the expansion is required. Discharge of storm water or impounded 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 Please indicate the activities to be covered by this MNOI (check all that apply). Storm Water Discharges Associated with Mining Mine Dewatering Wastewater Recirculation System with No Discharge The appropriate section of the MNOI must be completed if the applicant proposes to discharge storm water, discharge impounded mine water (dewatering) and/or operate a wastewater recirculation system with no A site-specific Storm Water Pollution Prevention Plan (SWPPP) developed in accordance with ACT5 of the General Permit and a United States Geological Survey (USGS) quadrangle map or photocopy, indicating the site location and outfalls must be included with the MNOI submittal. 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 (check all that apply). **Section 404 Documentation** Notice of Exempt Operations Form Dam/Reservoir Safety Permit or Written Authorization ALL INFORMATION MUST BE COMPLETED (indicate "N/A" where not applicable)

MSR32 <u>B D 2 5</u>

(NUMBER TO BE ASSIGNED BY STATE)

APPLICANT IS THE:	✓ OWNER		ERATOR	
	OWNER CO	NTACT INFO	RMATION	
OWNER CONTACT PERSON:				
OWNER COMPANY LEGAL N			LLC	
OWNER STREET OR P. O. BOX				
				ZIP: 39577
OWNER CITY: Wiggins OWNER PHONE #: (601) 92	28-8840	OWNER EMAIL:	office@prlai	ndt.com
	OPERATOR (CONTACT INF	ORMATION	
OPERATOR CONTACT PERSO	N: Brent Hickm	an		
OPERATOR COMPANY LEGA	_{L NAME:} Wren	s Construction	on LLC	
OPERATOR STREET OR P. O.	BOX: 47 Stillm	ore Road		
OPERATOR CITY: Wiggins	.	STAT	E: MS	ZIP: 39577
OPERATOR PHONE #: (601)	928-8840	OPERATOR EMA	_{IL} .office@pr	landt.com
	MI	NE INFORMAT	CION	
MINE NAME: Wrens 26				
MINE SITE ADDRESS (If the ph	ysical address is not	available, please ir	ndicate nearest nam	ned road.)
Street: Old Hwy 26				
Street: Old Hwy 26 City: Wiggins	State: MS	Co	unty: Stone	Zip: 39577
	_/4 OF SECTION <u>1</u>	, TO	WNSHIP 3 South	, RANGE 13 West
MINE SITE TRIBAL LAND ID	N/A If not applicable	_{le):} n/a		
ATTACH A USGS QUAD MAP, (Maps can be obtained from the				
LATITUDE: 30 degrees 48 n	ninutes 43 seconds	i LONG	GITUDE: 89 degr	ees 14 minutes 55 seconds
LAT & LONG DATA SOURCE	GPS (<i>Please GPS E</i> .	ntrance Gate) or M:	ap Interpolation): _	Map Interpolation
TOTAL ACREAGE: 48.0		MATERIAL TO	BE MINED: Sar	ndy Clay Gravel
WILL HYDRAULIC DREDGIN	G BE USED?	□ YES ☑ NO		
WASHING OF SAND/GRAVEL	?	☐ YES ☑ NO		

ESTIMATED START DATE:	2023-09-01	ESTIMATED END DATE:	
SIC CODE n/a	YYYY-MM-DD	NAIGS CONT	YYYY-MM-DD
SIC CODE		NAICS CODE	n/a
	RECEIVING ST	REAM INFORMATION	
NEAREST NAMED RECEIVIN	G STREAM: Kirby Creek		
IS DECEIVING STREAM ON A	Alectecippine 202(b) i i	ST OF IMPLANCE WASHING	
IS RECEIVING STREAM ON M BODIES? (The 303(d) list of imp	aired waters and TMDL	STOF IMPAIRED WATER stream segments may be found of MDEQ's	YES NO
http://www.deq.state.ms.u	s/MDEQ.nsf/page/TW	B Total Maximum Daily Load Sec	ction)
			,
HAS A TMDL BEEN ESTABLI	SED FOR THE RECEIVE	ING STREAM SEGMENT?	YES NO
COMP	LETE IF STORM W	ATER DISCHARGE IS PROPOSE	Z D
ATTACH A STORM WATER F	OLLUTION PREVENTI	ON PLAN (SEE PERMIT FOR REQUIR	EMENTS)
IDENTIFY THE ASSOCIATION	N OR GENERIC SWPPP	ON FILE AT MDEO: n/a	
C	OMPLETE IF WAST	TEWATER RECIRCULATION	
		DISCHARGE IS PROPOSED	
DISTANCE BETWEEN RECIR (MUST BE AT LEAST 150 FEE	CULATION POND(S) ANT)	ND PROPERTY LINE: n/a (FT)
NUMBER OF RECIRCULATION	ON POND(S): n/a		
STORAGE CAPACITY OF EAC	CH RECIRCULATION P	POND(S): n/a	(FT ³)
CC	OMPLETE IF MINE	DEWATERING IS PROPOSED	
ESTIMATED DEWATERING	OLUME: n/a	(GAL/DAY)	
ESTAMILED DE VATERANO	OHEME.	(GAL/DAT)	
NAME AND ADDRESS OF THE DIFFERENT FROM SIGNATO		DISCHARGE MONITORING REPORTS	(DMRs), IF

DOCUMENTATION OF COMPLIANCE WITH OTHER REGULATIONS/REQUIREMENTS Coverage under this general permit will not be granted until all other required MDEQ permits and approvals are addressed.

	Name and the second sec	VE THE RE-ROUTING, FILLING OR CROSSING OF A WATER
CONVEYANCE OF ANY KIND		
 Section 404 permit, provide appr The mine has been approve The work will be covered by 	opriate documentation with this MNOI that	FION to the Corps is required, or
LIST ANY NPDES PERMIT NO	_{O(s).} _n/a GEO	LOGY APPLICATION/PERMIT NO. n/a
LIST OTHER GEOLOGY PERI	MIT NUMBERS THAT APPLY TO COVE	erage area n/a
IS THE MINE LESS THAN 4 AG	CRES AND GREATER THAN 1320 FEET	FROM ANOTHER MINE?
	mpt Operations" Form must be included w mitted to the Office of Geology.	ith the MNOI or proof of prior submission,
	ent to Mine Class I or Class II Materials" F For information on Office of Geology requi	orm must be filed before coverage will be granted under the Mining rements, call 601-961-5515.
LIST ANY LOCAL STORM WA	ATER ORDINANCES WITH WHICH TH	E OPERATIONS MUST COMPLY AND SUBMIT ANY
ASSOCIATED APPROVAL DO	CUMENTATION. n/a	
IF IMPOUNDMENTS WILL BE FOLLOWING APPLY.	E CONSTRUCTED ABOVE NATURAL SU	JRFACE ELEVATIONS, INDICATE WHICH, IF ANY, OF THE
The impoundment will be	constructed with a peripheral dam or leve	e 8 feet or greater in height, measured from the lowest elevation of its toe.
The impoundment will ha	ve a maximum storage volume greater than	1 25 acre-feet.
The impoundment will im	pound a watercourse with a continuous flo	w.
The impoundment has the	e potential to threaten downstream lives or	man-made structures.
1778 B	t any of the above criteria, the applicant wil granted under the Mining General Permit.	ll be required to obtain written authorization from MDEQ, Dam Safety
with a system designed to ass inquiry of the person or per information submitted is, to	sure that qualified personnel properly sons who manage the system, or those the best of my knowledge and belief, to	is were prepared under my direction or supervision in accordance gathered and evaluated the information submitted. Based on my e persons directly responsible for gathering the information, the rue, accurate and complete. I am aware that there are significant of fine and imprisonment for knowing violations.
Whity Kick	max	@/8/2023
Authorized Signature		Date
Whitney Hickman		awner
Printed Name		Title
 For a corporation, by a r For a partnership, by a g For a sole proprietorship 	o, by the proprietor. other public facility, by either a principal	-4 as follows: executive officer, the mayor, or ranking elected official.
Please submit this form to:	Chief, Environmental Permits Division MDEQ, Office of Pollution Control P.O. Box 2261 Jackson, Mississippi 39225	

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COVERAGE NUMBER (MSR32 _____) INSPECTION YEAR_ SITE INSPECTION REPORT AND CERTIFICATION FORM MINING GENERAL PERMIT



Results of the inspection by ACT7 of this permit shall be recorded on this report form and in addition, copies of all completed forms shall be retained onsite or locally available. Inspections must be performed monthly and after a 2-year, 24-hour storm event (approx. 6-inches on Gulf Coast to 4-inches at MS/TN State Line). The coverage number must be listed at the top of all Site Inspection Report and Certification Forms.

		COVERAGE REC	IPIENT INFORM	MATION	
COMPANY NAME:	Wrens Constru	ction LLC	MINE NAME	Wrens 26	
MINE LOCATION:	Old Hwy 26				ERMIT NO. n/a
NEAREST PROJECT CITY: Wiggins		GEOLOGY APPLICATION/PERMIT NO. n/a COUNTY: Stone			
	s: 47 Stillmore Ro	pad			
MAILING ADDRESS			STATE: MS	3	ZIP: 39577
MAILING CITY:	Brent Hickman		STATE:		610-928-8840
CONTACT PERSON	Bront Hound		CONTACT PE	HONE NUMBER	: 010 020 0010
		INSPECTION D AFTER 2-YEAR, 24-	OCUMENTATIO	ON	
DATE (mm/dd/yy)	TIME (hh:mm AM/PM)	HOUR STORM EVENT? (CHECK IF YES)		CIENCIES? K IF YES)	INSPECTOR(S)
					=
Deficiencies Noted Dur	ring any Inspection (give d	ate(s); attach additional sheets if	necessary):		
Corrective Action Take	en or Planned (give date(s)	attach additional sheets if neces	ssary):		
Based upon this inspe-	ction which I or personne those deficiencies noted al	l under my direct supervision of	conducted, I certif	y that all erosion	n and sediment controls have been implemented and n filed with the Office of Pollution Control and sound
engineering practices a	s required by the above ref	erenced permit. I further certify	that the MNOI and	d SWPPP informa	ation on file with MDEQ is up to date.
qualified personnel pro information submitted	perly gather and evaluate	the information submitted. Bas dge and belief, true, accurate and	ed on my inquiry	of the person or 1	on in accordance with a system designed to assure that persons responsible for gathering the information, the esignificant penalties for submitting false information
Authorized Signature				Date	
Printed Name				Title	
i i iiited i vaille					

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MAJOR MODIFICATION FORM FOR MINING GENERAL PERMIT Coverage No. MSR32 ____ County ___



INSTRUC	CTIONS	
Coverage recipients shall notify the Mississippi Department of "footprint" of an existing mining activity or modify the existing all that apply):	of Environmental Qu mining operation. T	ality of plans to expand the acreage or his form must be submitted when (check
SWPPP details have been developed and are ready for I mining activity	MDEQ review for sub	sequent phases of an existing, covered
"Footprint" identified in the original MNOI is proposed topographic map must be submitted)	to be enlarged (a mo	dified SWPPP and an updated USGS
Mine dewatering is proposed	Mine dewaterin	g has been discontinued
Closed loop wash operations are proposed	Closed loop wa	sh operations have been discontinued
This form must be signed by the original coverage recipient und must have general permit coverage transferred prior to cove discharge storm water associated with proposed expansions discharge, under the conditions of the General Permit, <u>only up MDEQ</u> . If mining activities change which will incorporate wastewaters to State waters additional permitting actions shall be	rage being modified. of dewater pits or o on receipt of write a hydraulic dredgin	Coverage recipients are authorized to operate a recirculation system with no ten notification of approval by the
COVERAGE RECIPIE	ENT INFORMATIO)N
COVERAGE RECIPIENT CONTACT PERSON:		
COMPANY NAME:		
STREET OR P.O. BOX:		
CITY:	STATE:	ZIP:
PHONE NUMBER : EMAIL	ADDRESS:	
PROJECT IN	ORMATION	
		BED:
GEOLOGY APPLICATION/PERMIT NOCITY		COUNTY:
I certify under penalty of law that this document and all attachmen with a system designed to assure that qualified personnel properly inquiry of the person or persons who manage the system, or thos information submitted is, to the best of my knowledge and belief, penalties for submitting false information, including the possibility of	gathered and evaluated se persons directly respective, accurate and com-	d the information submitted. Based on my consible for gathering the information, the plete. I am aware that there are significant
Signature (must be signed by coverage recipient)	Ī	Date
Printed Name		itle
Please submit this form to: Chief, Environmental Permits Division		

MS Department of Environmental Quality, Office of Pollution Control

P.O. Box 2261

Jackson, Mississippi 39225

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Environmental Permits for Industrial Facilities Request for Transfer of Permit, General Permit Coverage and/or Name Change

Instructions: For Ownership Change-Complete all Items on Page 1 (except Item VIII) and Page 2 (reverse side).

For Name Change Only-Complete Items I, II, V, VI, VII, VIII, and Page 2 (reverse side).

Note-This form should be submitted to MDEQ when a transferal date is finalized but prior to the actual transfer.

Item I.	Item II.
Facility Name:	Responsible official after transfer or name change:
Location: (Do Not Use P.O. Box)	Name:
Street:	
City: State: MS Zip:	Mailing Address:
County:	Street/P.O. Box:
Telephone:	City: State: Zip:
Item III.	Telephone
	Item IV.
Previous Permittee ¹ :	
Mailing Address:	Mailing Address:
Street/P.O. Box:	
City: State: Zip:	City: State: Zip:
Telephone:	Telephone:
Item V. Industrial Activity SIC Code:	Item VI.
Brief Description:	Will Facility Operations Change? Yes No
Site State production	If yes, the appropriate applications and permits may require modification prior to change.
Item VII.	Item VIII.
Will Facility Name Change? Yes No No	Signature for Name Change
If Yes, Provide New Name for Permit Coverage.	Print Name:
New Name:	Authorized Signature ² :
	Title: Date:
Item IX. We the undersigned request transfer of permit(s) and/or	r permit coverage(s) listed on the backside of this form.
From:	
То:	
Board it has the financial resources and operational expertise an this document. By signature below, the previous permittee is re	re of the requirements of the permit(s), 2) the applicant can demonstrate to the Permit and 3) agrees to accept responsibility and liability for the permit(s) listed on the back of equesting that the permit(s) and/or permit coverage(s) be transferred to the recipient. ritten notification from the Office of Pollution Control (OPC). The OPC may require compliance history of the recipient.
Print New Permittee' Name	Print Previous Permittee ¹ Name
New Authorized Signature ²	Previous Authorized Signature ²
Title Dat	e Title Date
A Permittee is a company or individual that has been issued an individual that has been individual th	
² Authorized Signature must be owner or in the case of a corporation,	a corporate officer as defined in Regulations APC-S-2 and WPC-1. Page 1 of 2 SEPTEMBER 2000

Mississippi Department of Environmental Quality/Office of Pollution Control P.O. Box 2261

Jackson, Mississippi 39225 (601) 961-5171

Item X. Storm Water	Item XI. Hazardous Waste ID Number
(Check One)	EBA ID No
A Storm Water Pollution Prevention Plan (SWPPP) is not required for the site.	EPA ID No.
The recipient certifies that they have received a copy of the Office of	(Check One)
Pollution Control approved SWPPP from the original owner.	An EPA Hazardous Waste ID Number is not required for the site.
The recipient is submitting a new SWPPP, which is attached to this form.	The site's EPA ID Number is listed above and a Notification of Regulated Waste Activity Form is attached.
A copy of the SWPPP cannot be obtained from the original owner.	
Item XII. Permit(s) and/or C	Coverage(s) to be Transferred
Permit Type:	Permit Type:
Permit/Coverage No.:	
	Permit/Coverage No.:
Permit Issuance Date:	Permit Issuance Date:
Date of General Permit Coverage:	Date of General Permit Coverage:
Permit Expiration Date:	Permit Expiration Date:
Permit Type:	Permit Type:
Permit/Coverage No.:	Permit/Coverage No.:
Permit Issuance Date:	Permit Issuance Date:
Date of General Permit Coverage:	Date of General Permit Coverage:
Permit Expiration Date:	Permit Expiration Date:
Permit Type:	Permit Type:
Permit/Coverage No.:	Permit/Coverage No.:
Permit Issuance Date:	Permit Issuance Date:
Date of General Permit Coverage:	Date of General Permit Coverage:
Permit Expiration Date:	Permit Expiration Date:
Permit Type:	OTHER INFORMATION:
Permit/Coverage No.:	
Permit Issuance Date:	
Date of General Permit Coverage:	
Permit Expiration Date:	
	2 of 2 SEPTEMBER 2000 _

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Request for Termination (RFT) of Coverage

MISSISPI DEPARTMENT OF ENVIRONMENTAL QUALITY

Mining General NPDES Permit No. MSR32 ____ County Stone

(Fill in your Certificate of Coverage Number and County) Use this form to request coverage termination only after mining activities have permanently stopped and permanent erosion and sediment controls are successfully established. Inspections must continue until the coverage recipient receives written notice of coverage termination by MDEO. Please check which of the following apply: Non-Exempt Mining Operation (copy of Permit Board Order, authorizing 90% or final release of mining performance bond attached) Exempt Mining Operation (as defined in MDEQ's Mississippi Surface Mining and Reclamation Rules and Regulations) (Please Print or Type) Closure Date: Physical Site Street Address (if not available, indicate nearest named road): City: Wiggins County: Landowner Company Name: Landowner Company Contact Name and Position: Street Address / P.O. Box: ___ Zip: 39577 City: Operator Company Name (if different than owner): Operator Contact Name and Position: Street/ Address / P.O. Box: Tel. #(928-8840 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 industrial activity under this general permit. Discharging pollutants in storm water associated with industrial activity to waters of the United States is unlawful under the Clean Water Act where the discharge is not authorized by a NPDES permit. 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. Date Signed Authorized Name (Print) Telephone Signature

¹This application shall be signed according to the General Permit, ACT 15, T-4 as follows:

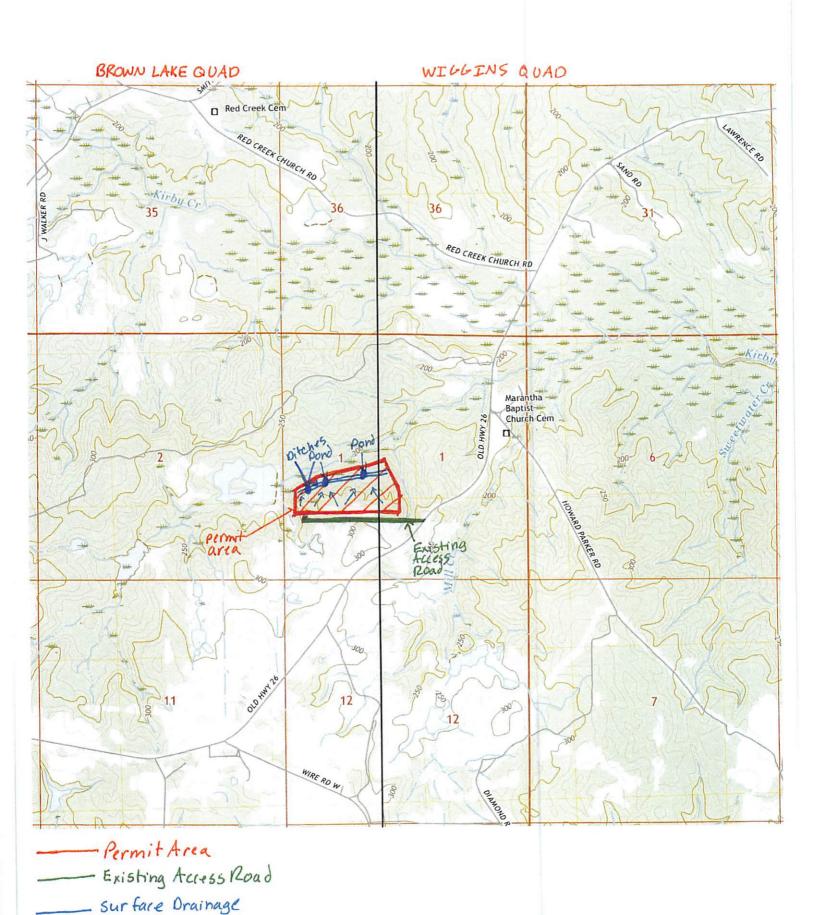
- For a corporation, by a responsible corporate officer.
- For a partnership, by a general partner.
- For a sole proprietorship, by the proprietor.
- For a municipal, state or other public facility, by principal executive officer, mayor, or ranking elected official.

After signing please mail to:

Environmental Permits Division, Office of Pollution Control

P.O. Box 2261 Jackson, MS 39225

Revision: 2/16/2018



MINING STORM WATER PLAN FOR WRENS 26 WRENS CONSTRUCTION. STONE COUNTY, MS. FORTY LINE PROPERTY LINE 15" NE 1/4-SW 1/4 DRAIN PIPE 15" DIA. **APPROXIMATE** 989-93 WETLANDS PIPE BOX 588 28 25 E NW 1/4-SW 1/4 CENTERLINE OF CREEK DRAIN 6" FAIRCLOTH SKIMMER DRAIN 15" DIA. **BOX** 574.24 N80*54*10** DETENTION POND 3 SKIMMER 6"-FAIRGEOTH SKIMMER DETENTION POND 2 SECTION PERMITTED AREA: 48 ACRES PHASE I 48.0 ACRES DETENTION, POND N89 52 41 W ACCESS ROAD PROPERTY LINE SW 1/4-SW 1/4 SE 1/4-SW 1/4

DETENTION POND 1 CALCULATIONS

DA = 13 ACRES REQD. = 3,600 FT^3/ACRE X 13 ACRES V REQD. = 46,800 FT^3

AVERAGE DEPTH = 5 FT. SA REQD = 9,360 FT^2 SA SUPPLIED = 10,128 FT^2 V SUPPLIED = 50,640 FT^3

DETENTION POND 2 CALCULATIONS

DA = 9 ACRES REQD. = 3,600 FT^3/ACRE X 9 ACRES V REQD. = 32,400 FT^3

AVERAGE DEPTH = 5 FT. SA REQD = 6,480 FT^2 SA SUPPLIED = 6.835 FT^2 V SUPPLIED = 34.175 FT^3

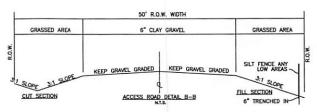
DETENTION POND 3 CALCULATIONS

DA = 26 ACRES REQD. = 3,600 FT^3/ACRE X 26 ACRES V REQD. = 93,600 FT^3

AVERAGE DEPTH = 5 FT. SA REQD = 18,720 FT^2 SA SUPPLIED = 18,750 FT^2 V SUPPLIED = 93,750 FT^3

BOUNDARY COORDINATES

	LATITUDE (N)	LONGITUDE (W)
Α	30'48'42.56"	89'14'54.55"
В	30'48'42.52"	89'15'20.98"
С	30'48'48.92"	89'15'21.01"
D	30'48'49.84"	89'15'14.51"
Ε	30'48'53.25"	89'15'09.18"
F	30'48'53.02"	89'14'57.83"
G	30'48'48.37"	89'14'54.57"



NOTE: ANY AREA'S ALONG THE EXISTING ROADWAY THAT ARE DISTURBED SHOULD BE GRASSED SILT FENCE ANY EXISTING LEADOFF DITCHES

PROJECT NO. 21143		SC	CALE	
CHECKED BY:	300	0	300	600
FILE NAME: 21143_BRENT				B. C.
DRAWN BY: HALEY DICKENS		AND MEDITED	although a	
INDEXING INSTRUCTIONS: NORTH TOWNSHIP 3 SOUTH, RANGE 13				
CLASS "D" SURVEY: BEARINGS	DETERMINE	D BY: GPS		

LEGEND =FOUND CONCRETE MONUMENT =FOUND LIGHT WOOD STAKE =FOUND P.K. NAIL =SET 1/2" RE-BAR (UNLESS OTHERWISE NOTED OR DESCRIBED) =FOUND 1/2" RE-BAR (UNLESS OTHERWISE NOTED OR DESCRIBED) =NO CORNER SET OR FOUND =POWER POLE OR UTILITY POLE DESCRIPTION

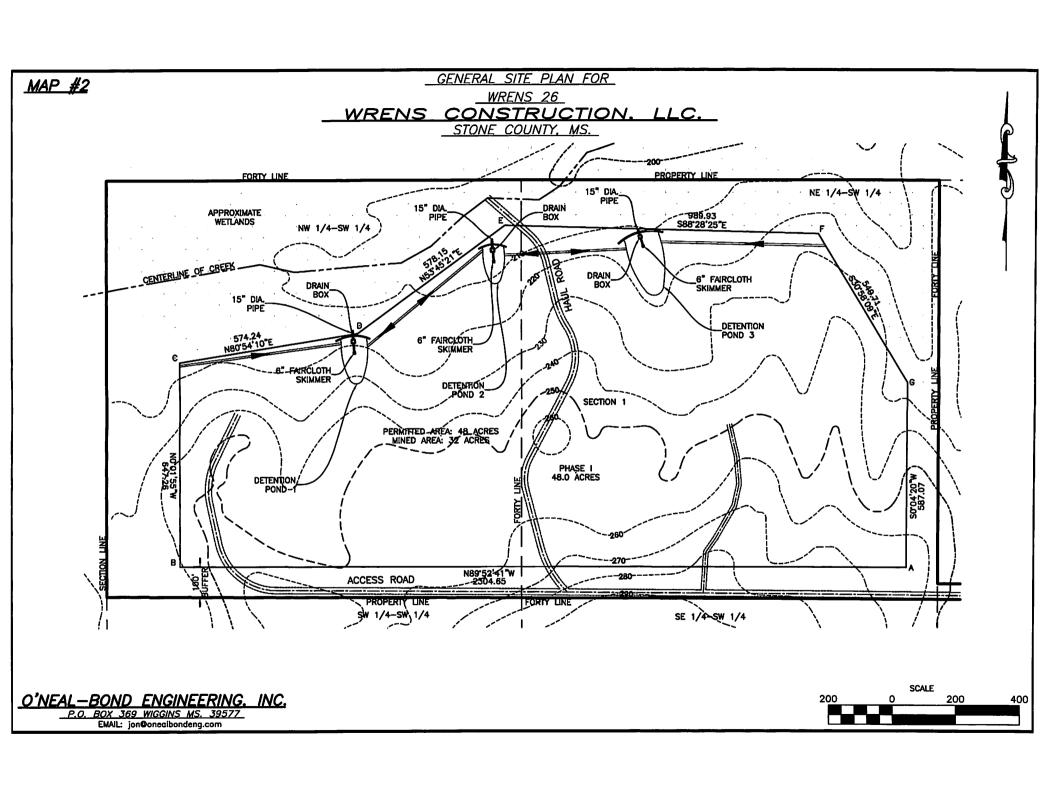
THE NORTH HALF OF THE SOUTHWEST QUARTER OF SECTION 1, TOWNSHIP 3 SOUTH, RANGE 13 WEST, STONE COUNTY, MS.

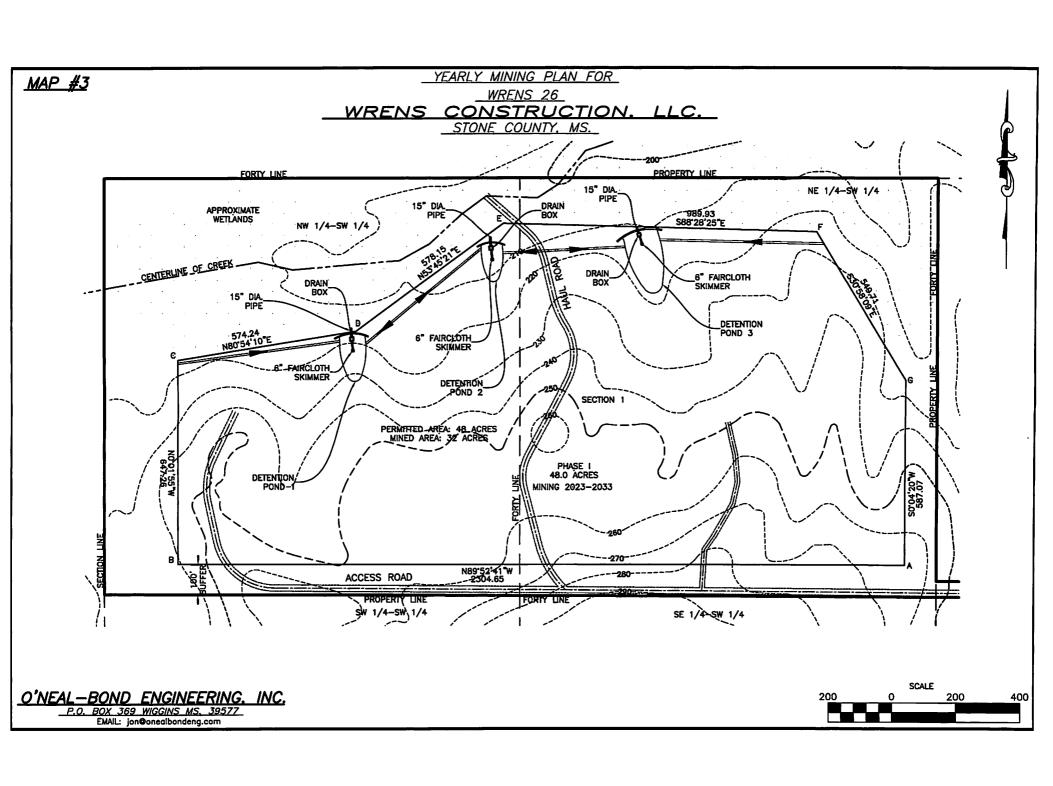
DRAWN: 03/2023

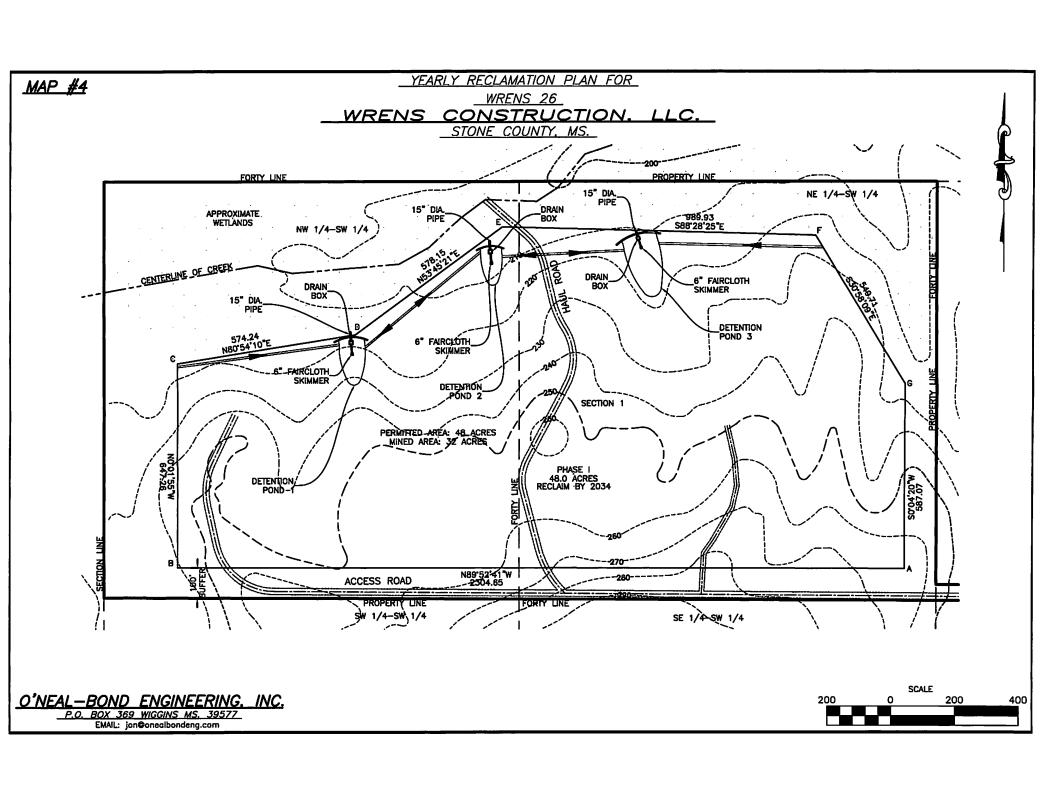
O'NEAL-BOND ENGINEERING. INC. P.O. BOX 369 WIGGINS MS. 39577

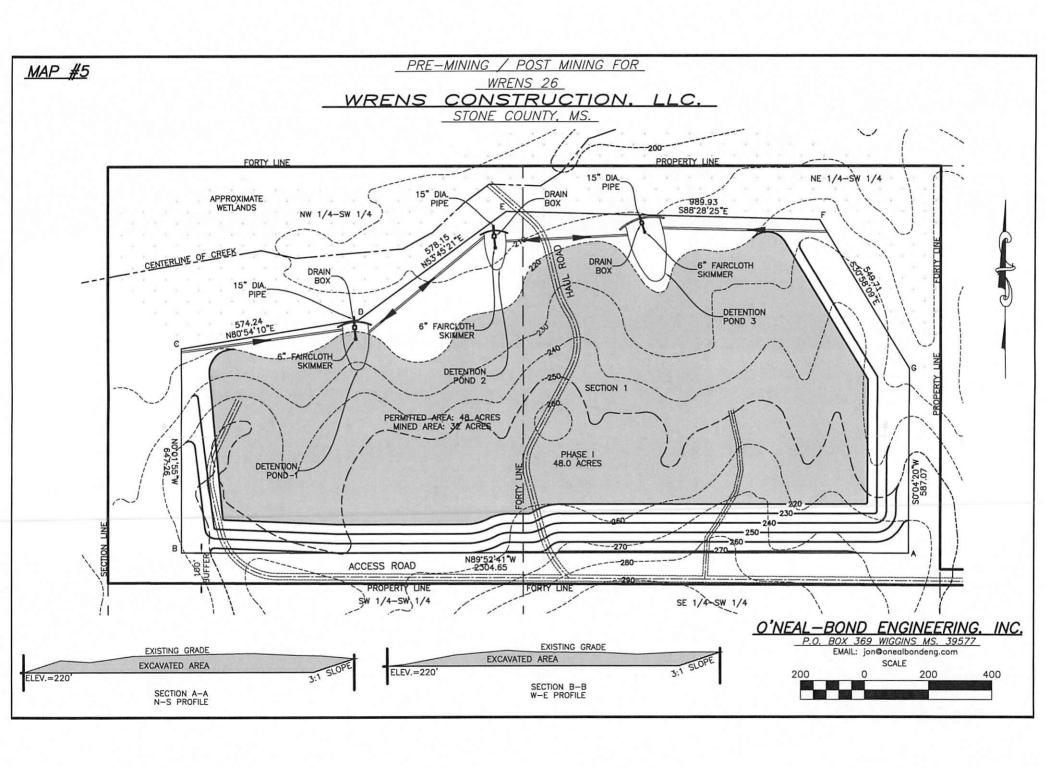
EMAIL: jon@onealbondeng.com

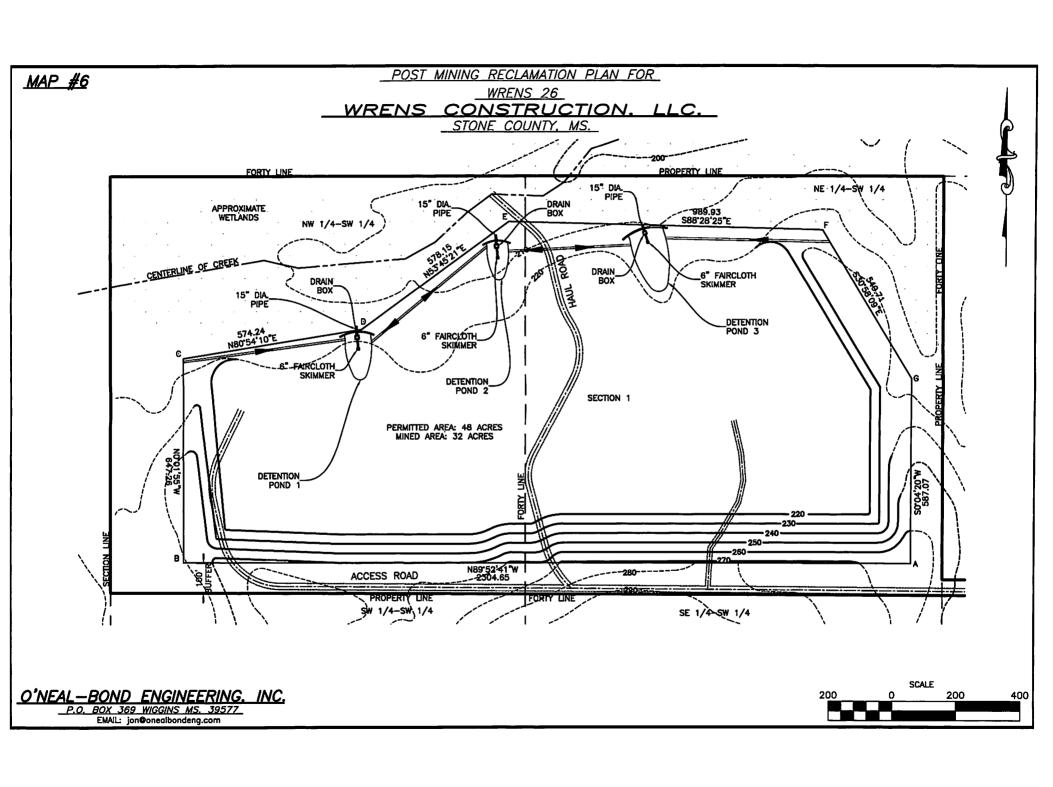
(601) 928 FAX # (601) 928-5526

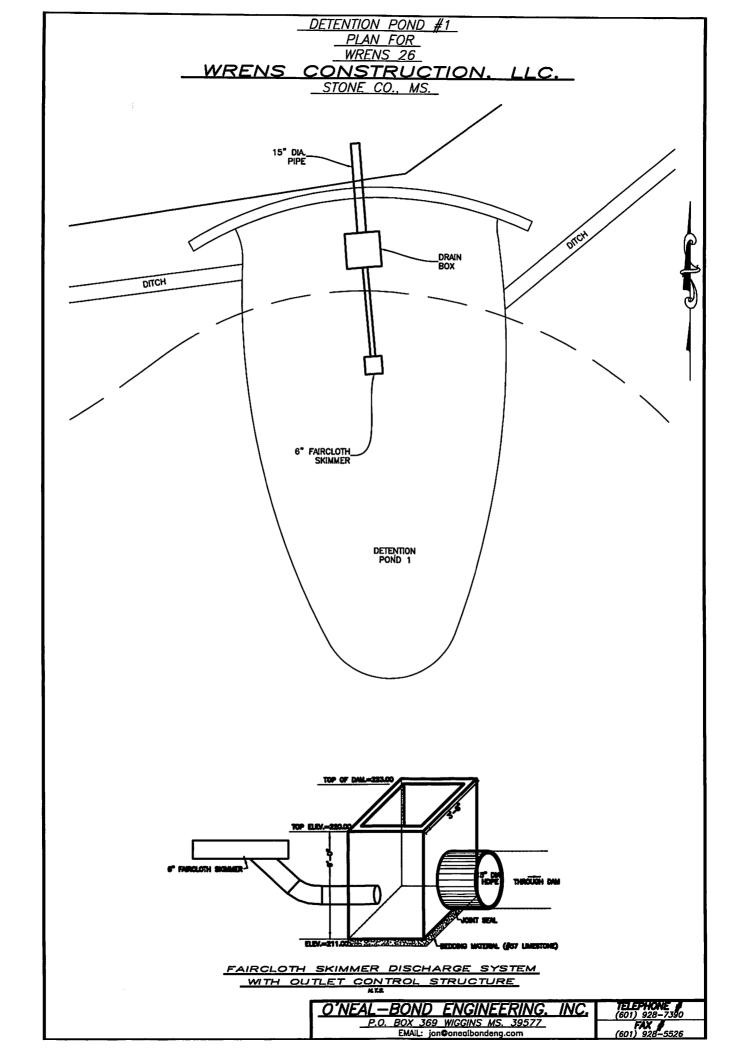


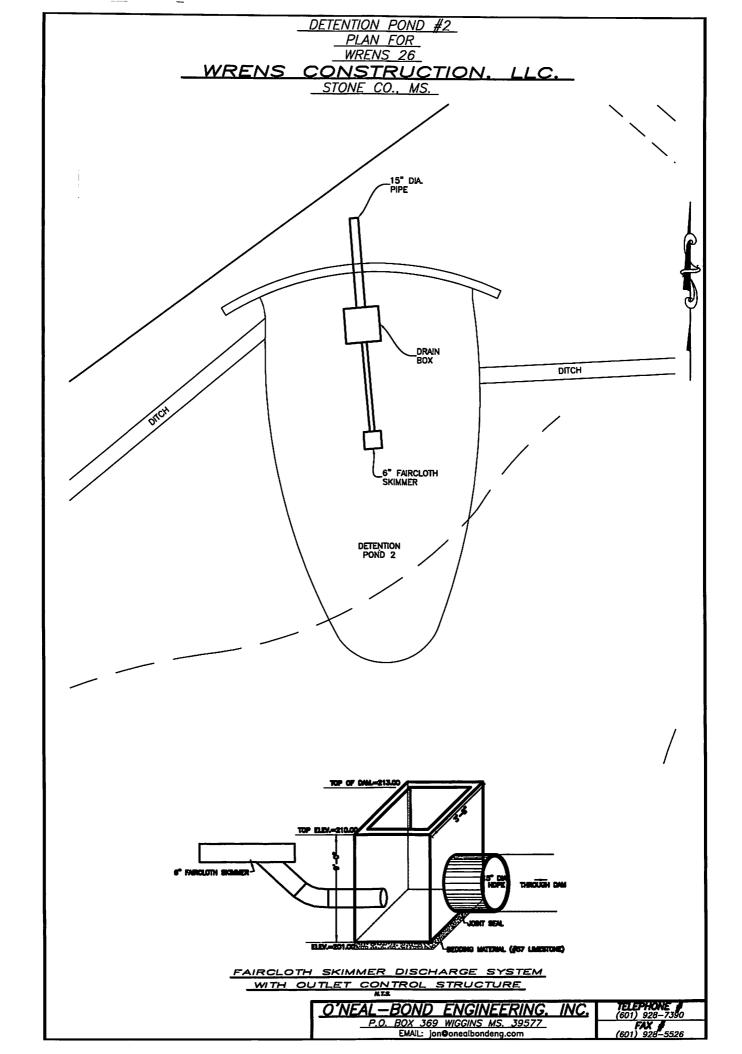


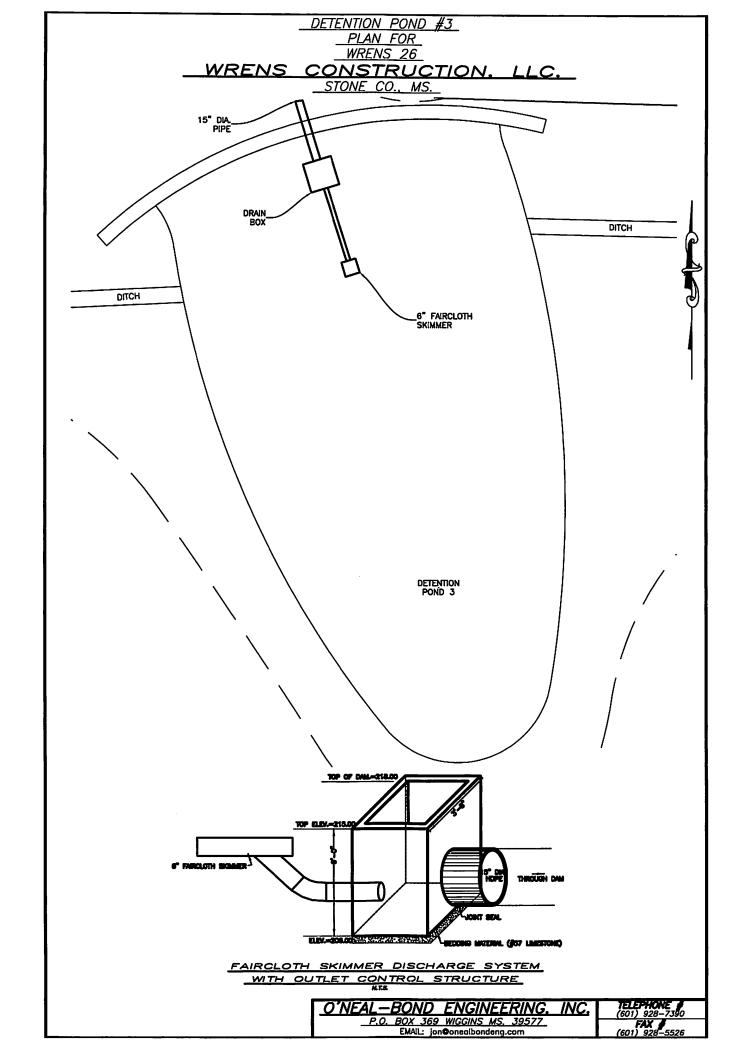












Narrative of Storm Water Prevention Plan for

Wrens 26 Wrens Construction, LLC.

Project Description

This 48 acre site will be mined in multiple phases. The construction entrance will be a gravel drive to Old Highway 26 and the haul road will meander existing roads on the south border of the site and through the center of the pit. Storm water will be directed to one of the detention ponds by diversion ditches directing runoff to the ponds. A security for reclamation will be posted. Each phase will be grassed and planted when done. The ponds will remain permanently.

Adjacent Property

The adjacent properties consist of wooded areas and fields as well as one house to the south of the entrance road.

Planned Erosion, Sediment, and Storm Water Control Practices

- 1. Silt Fence Place silt fence at the bottom of any slope steeper than 5:1 and around the perimeter of the site. Replace at 50% capacity before overtopping occurs.
- 2. Permanent Seeding Establish a permanent grass in all disturbed areas after each phase. These areas may be seeded or sodded. Cover cannot be certified until after a minimum of 6 weeks of establishment and at least ½" of rainfall has occurred.
- 3. Straw bales Placed with the silt fence around pipe culverts for added protection.
- 4. <u>Special Provision</u> All Vegetative practices must be initiated whenever any clearing, grading, excavating or other land disturbing activities have temporarily or permanently ceased on any portion of the site and will not resume for a period of (14) days or more. The appropriate temporary or permanent vegetative practices shall be implemented within (7) calendar days.

Good Housekeeping Practices

- 1. Vehicles entering the roadway shall be washed down (if muddy) prior to entering the roadway. The vehicle will pass over a limestone (10 lbs riprap) bed and be washed down of the major portion of mud. The washdown is through a depression basin lined with rock and fabric below rock to hold water.
- 2. Equipment maintenance and repairs shall only be performed on upland areas with a 12" dirt berm installed around the perimeter of the work area. Proper chemicals shall be on hand to be placed on fluid spills in accordance with manufacturers recommendations. All contaminated soil shall be loaded and properly disposed of in a certified landfill accepting hazardous material. The closest are McNeill, Pine Belt, and Jackson County.
- 3. Waste receptacles shall be placed where the work is being performed and shall move with the work. The contractor shall not let a full container stand for more than 48 hours before changing out or 7 days, whichever comes first.
- 4. Pota-lets shall be made available and used.

Construction Sequence

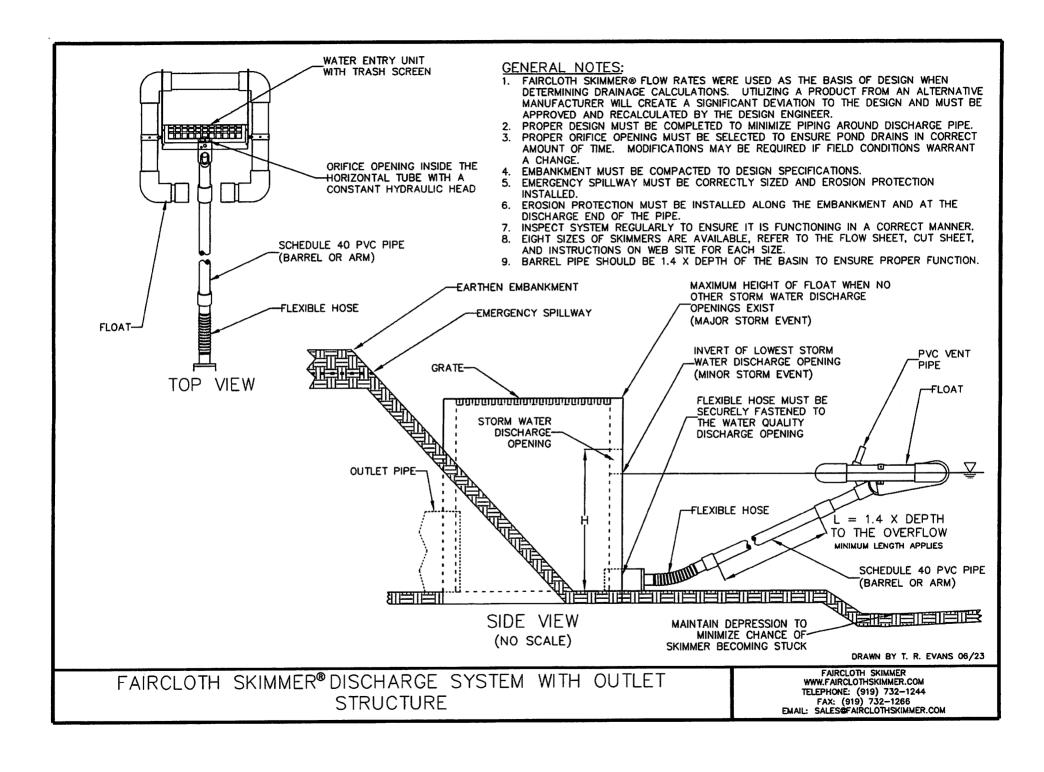
- 1. Complete all permits and approvals.
- 2. Complete site clearing and grass disturbed areas.
- 3. Construct Phase one then other phases as appropriate.
- 4. Make sure all temporary controls are in place immediately following site clearing.
- 5. Topsoil all disturbed areas and establish permanent grass.
- 6. Remove all temporary controls and implement all permanent sedimentation controls (ditches and detention ponds).
- 7. Weekly inspection reports should be made and submitted at the end of the project by the responsible party, if required to do so.
- 8. All erosion controls and outfalls/discharge points will be inspected a minimum of once per month and after any 2 year, 24 hour storm event.

Short Term Maintenance Plan

- 1. Check all controls after rainfall events and at least once a week.
- 2. Repair controls as soon as possible after discovered.
- 3. Clean out sedimentation from the silt fence or check dams when 50% capacity has been reached.
- 4. Re-fertilize and reseed all exposed areas as needed.
- 5. The sediment ponds must be cleaned out when the capacity falls to 50% or 1,800 cu.ft. per acre drained.

Long Term Maintenance Plan

- 1. Maintain or restore all vegetated areas to provide good ground cover.
- 2. The Owner will inspect the site periodically to check for maintenance issues.
- 3. During the construction phase, the operator shall be the responsible party to make sure this plan is executed correctly.
- 4. Should the owner lease, sub-lease or sell all or a portion of the property, the owner shall assign responsibility to the new party in written form. A copy of said form shall be sent to the Office of Pollution Control for concurrence.
- 5. The sediment ponds must be cleaned out when capacity falls to 50% or 1,800 cu. Ft. per acre drained.



J. W. Faircloth & Son Inc.

TEL (919) 732-1244 FAX (919) 732-1266 www.FairclothSkimmer.com



INSTRUCTIONS FOR ENGINEERS: How to specify a Faircloth Skimmer® surface drain

- 1. The Faircloth Skimmer® surface drain is sized by the maximum size of the <u>inlet</u> or <u>orifice</u> where water enters the skimmer. We make 8 different sizes ranging from 1-1/2" to 8". (NOTE: Always use the manufacturer's sizing guidelines orifice size is not the only factor in dewatering time.)
- 2. The skimmer can be <u>customized</u> by the user to reduce the flow rate to the desired dewatering time by reducing the size of the <u>orifice</u>. Each *Faircloth Skimmer*[®] includes a *plug* and *adjustable cutter* for making the orifice (hole) smaller than the inlet diameter to customize the flow rate for the particular basin in which the skimmer will be used.
- 3. Skimmer sizing instructions and a sizing calculator are available at http://fairclothskimmer.com/skimmer-sizing. If you choose to manually calculate the size please be sure to specify the diameter not just the radius. Plans should include both the SKIMMER SIZE and the ORIFICE DIAMETER SIZE.

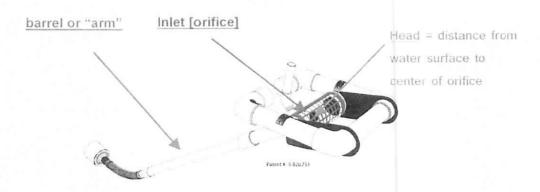
EXAMPLE:

Basin/Trap	Volume (Cu. Ft)	Dewater time (Days)	Skimmer Size	Orifice Size
A 38,578		3 days	4"	3.2"
В	112,482	3 days	6")	5.1"

- 4. The <u>head</u> on the Faircloth Skimmer® refers to the depth of the center of the orifice below the surface of the water. The head on our skimmers allows a nearly constant flow rate as the basin fills and drains.
- 5. The <u>barrel or arm</u> of the Faircloth Skimmer® is <u>smaller</u> than the maximum orifice size of the skimmer to reduce the buoyancy when the pipe is less than full. This buoyancy would tend to lift the inlet causing it to float upward and could reduce flow through the skimmer. The arm is vented (see cut sheets) to allow the <u>orifice size</u> to control the flow rate. Many generic sketches or details of skimmers appear to use a barrel the same size as the inlet, but these do not accurately show features of the Faircloth Skimmer®. Please refer to the cut sheets and FAQ at www.FairclothSkimmer.com.
- 6. CAD drawings for use in plans are available at http://fairclothskimmer.com/cad-drawings.

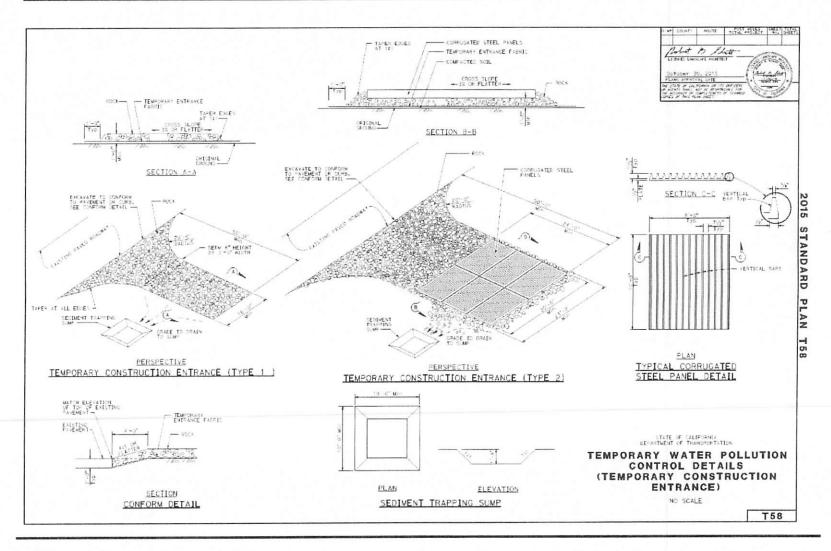
Extensive information on the Faircloth Skimmer® including a sizing template, cut sheets, installation instructions, and FAQ's is available at www.FairclothSkimmer.com.

Questions? Call (919) 732-1244



Temporary Construction Entrance/Exit







Caltrans Storm Water Quality Handbooks

Construction Site BMP Manual

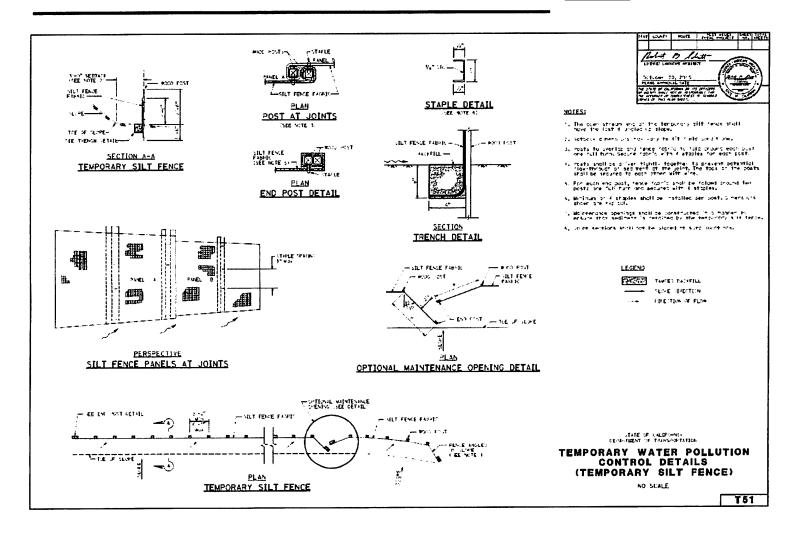
May 2017

Section 6

Temporary Construction Entrance/Exit TC-1

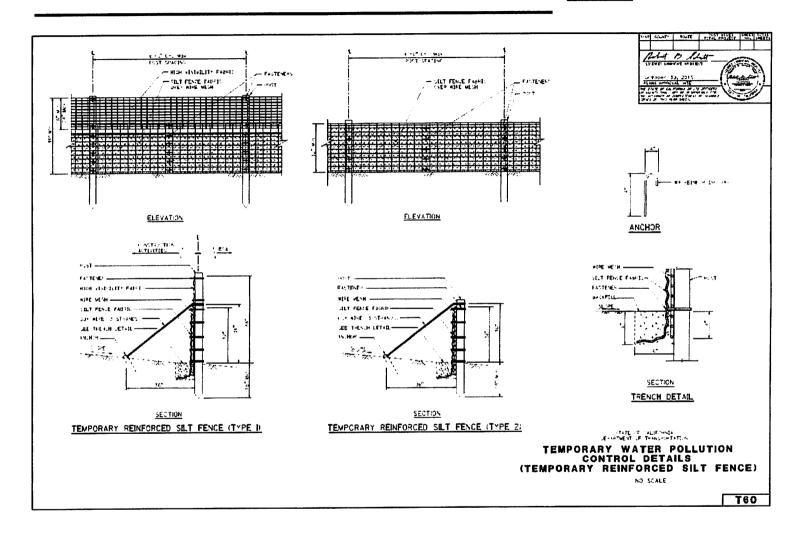
Temporary Silt Fence





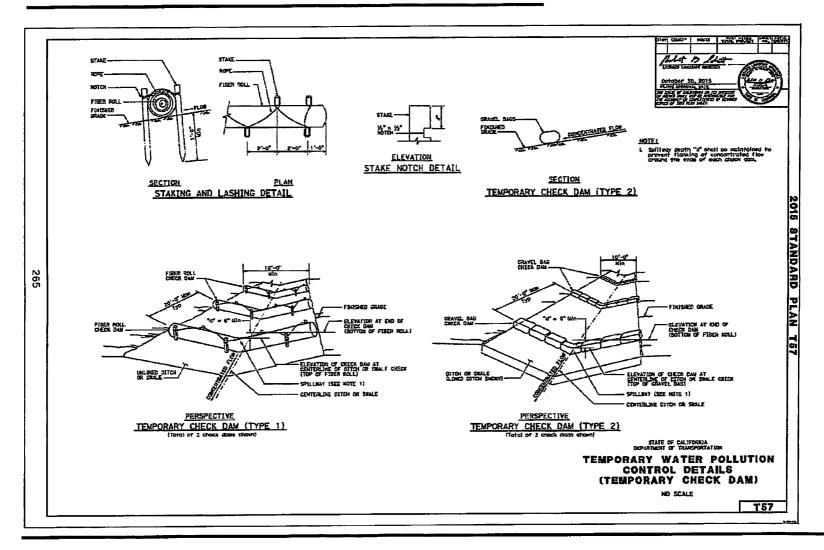
Temporary Silt Fence





Check Dams







Caltrans Storm Water Quality Handbooks

Construction Site BMP Manual

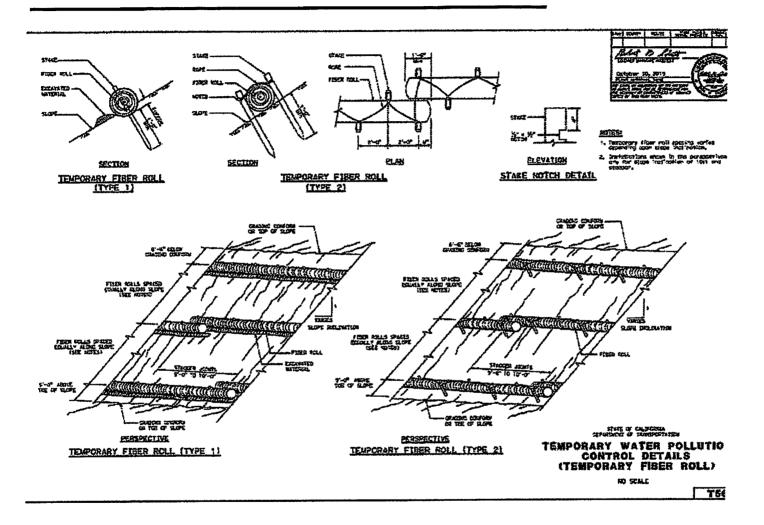
May 2017

Section 4

Check Dams SC-4

Fiber Rolls







Caltrans Storm Water Quality Handbooks

Construction Site BMP Manual

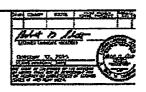
May 2017

Section 4

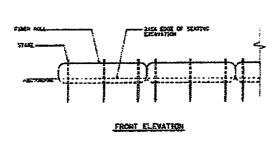
Fiber Rolls SC-5

Fiber Rolls

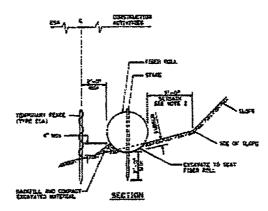




- 1. Theodropy force (Type ESA) after for reference purposes trity.



TEMPORARY LARGE SECTMENT BARRIER



PLACEMENT DETAIL
FOR TEMPORARY FENCE TYPE ESA1
USED WITH TEMPORARY LARGE SEDIMENT BARRIER

TEMPORARY WATER POLLUTION CONTROL DETAILS (TEMPORARY LARGE SEDIMENT BARRIER

Tee



Caltrans Storm Water Quality Handbooks

Construction Site BMP Manual

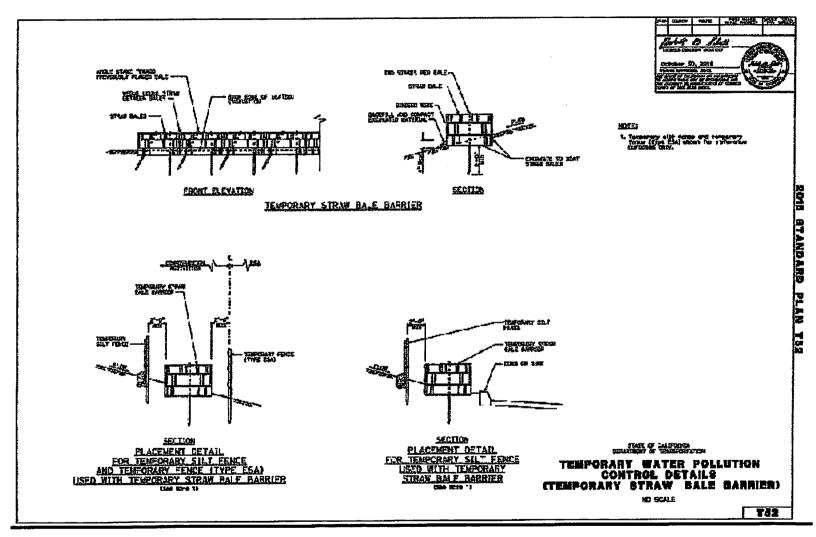
May 2017

Section 4

Fiber Rolls SC-5

Straw Bale Barrier







Cattrans Storm Water Quality Handbooks

Construction Site BMP Manual

May 2017

Section 3

Straw Bale Barrier SC-9



P.O. Box 369 Wiggins, Mississippi 39577

Email: haley@onealbondeng.com/Phone: 601-928-7390

August 8, 2023

AUG 1 0 2023 Pob Number 2114

Dept. of Environmental Quality

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

RE: Wrens Construction LLC

Wrens 26 Pit Stormwater Permit

To Whom It May Concern:

Included in this package is the Mining Notice of Intent (MNOI) for Coverage under Mining Storm Water, Dewatering and No Discharge General Perment application submitted on behalf of Wrens Construction LLC. The pit, named Wrens 26, is located in the Northeast ½ of the Southwest ¼ of Section 1, Township 3 South, Range 13 West, Stone County, Mississippi, on Old Highway 26. In addition to the MNOI, we have included maps showing the pit's location, a general site plan, and pre/post mining conditions. Also included is a narrative detailing the stormwater prevention plan and details showing how those preventative measures will be achieved.

Please let us know if you have any questions or comments.

Thank You,

Haley N. Dickens, E.I., S.I.

Attachment