AI: 89674

MSR109657



Rec'd via email: 09/18/2025

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
- Antidegradation report for disturbance within Waters of the State

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

APPLICANT IS THE: OWNER	PRIME CONTRACTOR	R		
	CONTACT INFORMATION			
OWNER CONTACT PERSON: MIKE BAKEF	The state of the s			
OWNER COMPANY LEGAL NAME: BAKER	FARMS			
OWNER STREET OR P.O. BOX: 469 hugh to	aylor rd			
OWNER CITY: SENATOBIA OWNER PHONE #: (662) 288-1838	_{STATE} : MS	ZIP: 38668		
OWNER PHONE #: (662)288-1838	OWNER EMAIL: MIKESGL	ASSSENATOBIA@GMAIL.COM		
	CONTACT INFORMATION	N		
IF NOI WAS PREPARED BY SOMEONE OTHER	THAN THE APPLICANT			
CONTACT PERSON: MIKE BAKER	<u> </u>			
COMPANY LEGAL NAME: BAKER FARM	5			
STREET OR P.O. BOX: 469 hugh taylor ro	110	20000		
CITY: Senatobia	STATE: MS	ZIP: 38668		
PHONE # () 662-288-1838	EMAIL: MIKESGLASS	SENATOBIA@GMAIL.(
PRIME CONTRACTOR CONTACT INFO	ORMATION	- Annual Control of the Control of t		
PRIME CONTRACTOR CONTACT PERSON:	MIKE BAKER			
PRIME CONTRACTOR COMPANY LEGAL NA	AME:			
PRIME CONTRACTOR STREET OR P.O. BOX	: 469 hugh taylor rd	20000		
PRIME CONTRACTOR CITY: SENATOBIA	STATE: IVIS	zip: 38668		
PRIME CONTRACTOR PHONE #: (662) 288-	1838 PRIME CONTRACTOR EM	MAIL: MIKESGLASSSENATOBIA@GMAIL.COM		
FACILITY SITE INFORMATION				
FACILITY SITE NAME:				
FACILITY SITE ADDRESS (If the physical address indicate the beginning of the project and identify all STREET: SCOTT ST	counties the project traverses.)			
CITY: SENATOBIA STATE:	COUNTY: TATE	ZIP: 38668		
FACILITY SITE TRIBAL LAND ID (N/A If not	applicable): N/A			
LATITUDE: degrees minutes sec		es minutes seconds		
LAT & LONG DATA SOURCE (GPS (Please GPS P.	roject Entrance/Start Point) or Map Interpola	ation):		
TOTAL ACREAGE THAT WILL BE DISTURB	BED 1:			

IS THIS PART OF A LARGER COMMON PLAN OF DEVELOPMENT?	YES	NO
IF YES, NAME OF LARGER COMMON PLAN OF DEVELOPMENT:AND PERMIT COVERAGE NUMBER: MSR10		
ESTIMATED CONSTRUCTION PROJECT START DATE:	2025-09-31 YYYY-MM-DD	
ESTIMATED CONSTRUCTION PROJECT END DATE:	UNKNOWN YYYY-MM-DD	
DESCRIPTION OF CONSTRUCTION ACTIVITY: CLEARING AND BUILDING TALLER FOUNDATION		
PROPOSED DESCRIPTION OF PROPERTY USE AFTER CONSTRUCTION HAS BEEN OF SELL	COMPLETED:	
		77
SIC Code: NAICS Code		
NEAREST NAMED RECEIVING STREAM:		
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 Mattp://www.deq.state.ms.us/MDEQ.nsf/page/TWB_Total_Maximum_Daily_Load_Section)	YES IDEQ's web site:	NO
HAS A TMDL BEEN ESTABLISHED FOR THE RECEIVING STREAM SEGMENT?	YES	NO
FOR WHICH POLLUTANT:	_	
ARE THERE RECREATIONAL STREAMS, PRIVATE/PUBLIC PONDS OR LAKES WITHIN ½ MILE DOWNSTREAM OF PROJECT BOUNDRY THAT MAY BE IMPACTE ACTIVITY?	D BY THE CONST	NO RUCTION
EXISTING DATA DESCRIBING THE SOIL (for linear projects please describe in SWPPP)		
WILL FLOCCULANTS BE USED TO TREAT TURBIDITY IN STORM WATER?	YES	NO
IF YES, INDICATE THE TYPE OF FLOCCULANT. ANIONIC POLYACRY OTHER	LIMIDE (PAM)	
IF YES, DOES THE SWPPP DESCRIBE THE METHOD OF INTRODUCTION, THE LOC AND THE LOCATION OF WHERE FLOCCULATED MATERIAL WILL SETTLE?	CATION OF INTRO	DUCTION
IS A SDS SHEET INCLUDED FOR THE FLOCCULATE?	YES	NO
WILL THERE BE A 50 FT BUFFER BETWEEN THE PROJECT DISTURBANCE AND T STATE?	HE WATERS OF T	HE NO
IF NOT, PROVIDE EQUIVALENT CONTROL MEASURES IN THE SWPPP.		

¹Acreage for subdivision development includes areas disturbed by construction of roads, utilities and drainage. Additionally, a housesite of at least 10,000 ft² 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	PRETREATMEN	TT
WATER STATE OPERATING INDIVIDUAL NPDES	OTHER:	
IS THE PROJECT REROUTING, FILLING OR CROSSING A WATER CONVEYANC OF ANY KIND? (If yes, contact the U.S. Army Corps of Engineers' Regulatory Branch for	CE YES or permitting requirem	NO vents.)
IF THE PROJECT REQUIRES A CORPS OF ENGINEER SECTION 404 PERMIT, PR DOCUMENTATION THAT:	OVIDE APPROPRIAT	TE
-The project has been approved by individual permit, or -The work will be covered by a nationwide permit and NO NOTIFICATION to the Corps -The work will be covered by a nationwide or general permit and NOTIFICATION to the	s is required, or e Corps is required	
IS THE PROJECT REROUTING, FILLING OR CROSSING A STATE WATER CONVOY OF ANY KIND? (If yes, please provide an antidegradation report.)	EYANCE YES	NO 🗸
IS A LAKE REQUIRING THE CONSTRUCTION OF A DAM BEING PROPOSED? (If yes, provide appropriate approval documentation from MDEQ Office of Land and Wa	YES ater, Dam Safety.)	NO
IF THE PROJECT IS A SUBDIVISION OR A COMMERCIAL DEVELOPMENT, HOW BE DISPOSED? Check one of the following and attach the pertinent documents.	W WILL SANITARY S	EWAGE
Existing Municipal or Commercial System. Please attach plans and specifications of associated "Information Regarding Proposed Wastewater Projects" form or appro Hancock, Harrison, Jackson, Pearl River and Stone Counties. If the plans and specificate of LCNOI submittal, MDEQ will accept written acknowledgement from official(s) collection and treatment that the flows generated from the proposed project can an properly. The letter must include the estimated flow.	val from County Utility A ions can not be provided responsible for wastewa	Authority in d at the time later
Collection and Treatment System will be Constructed. Please attach a copy of the copy of t	cover of the NPDES disc Date:	charge)
Individual Onsite Wastewater Disposal Systems for Subdivisions Less than 35 Lots of General Acceptance from the Mississippi State Department of Health or certific engineer that the platted lots should support individual onsite wastewater disposal	ation from a registered	f the Letter professional
Individual Onsite Wastewater Disposal Systems for Subdivisions Greater than 35 l feasibility of installing a central sewage collection and treatment system must be m response from MDEQ concerning the feasibility study must be attached. If a centr is not feasible, then please attach a copy of the Letter of General Acceptance from certification from a registered professional engineer that the platted lots should sudisposal systems.	ade by MDEQ. A copy al collection and wasted the State Department o	of the water system f Health or
INDICATE ANY LOCAL STORM WATER ORDINANCE (I.E. MS4)WITH WHICH T	THE PROJECT MUST	COMPLY:

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 award that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature of Applicant¹ (owner or prime contractor)

Date Signed

MICHAEL LEE BAKER

OWNER

Printed Name

Title

¹This 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.mdeq.ms.gov/construction-stormwater/

Revised 3/23/22