



December 3, 2025

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

Re: Hydrostatic Request for Termination
Gulf South Pipeline Company, LLC
PN 14995
Hydrostatic Test General NPDES. No. MSG130656
Jefferson Davis County, Mississippi
Providence Project No. 196-708

To Whom It May Concern:

Gulf South Pipeline Company, LLC is submitting this Request for Termination (RFT) to terminate National Pollutant Discharge Elimination System General Permit MSG130656. All discharges are complete, and all discharge monitoring reports have been submitted.

Please find attached the RFT (**Attachment A**). If you have questions, please contact me at (713) 479-8080 or kelsey.gocke@bwpipelines.com or Yvonne Baker at (225) 766-7400 or yvonnebaker@providenceeng.com.

Sincerely,

A handwritten signature in blue ink that reads "Kelsey Gocke".

Kelsey Gocke
Supervisor, Environmental Permitting
Gulf South Pipeline Company, LLC

Enclosures: As stated

cc: Yvonne Baker, Providence Engineering and Environmental Group LLC

ATTACHMENT A

REQUEST FOR TERMINATION

Request for Termination (RFT) of Coverage

AI: 88467

Rec'd via email:
12/03/2025

HYDROSTATIC TEST GENERAL PERMIT
Coverage No. MSG13 _____ **County** _____
(Fill in your Certificate of Coverage Number and County)



INSTRUCTIONS

The coverage recipient must terminate coverage when hydrostatic test water will no longer be discharged in accordance with the provisions of ACT11, S-1 of the General Permit. Failure to submit this form is a violation of permit conditions.

All outstanding Discharge Monitoring Report (DMR) Forms must be completed and submitted before coverage can be terminated.

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

FACILITY/PROJECT INFORMATION

FACILITY/PROJECT NAME: _____

PHYSICAL SITE STREET ADDRESS (if not available, indicate nearest named road): _____

CITY: _____ **COUNTY:** _____ **ZIP:** _____

COVERAGE RECIPIENT INFORMATION

COVERAGE RECIPIENT COMPANY NAME: _____

STREET ADDRESS / P.O. BOX: _____

CITY: _____ **COUNTY:** _____ **ZIP:** _____

COVERAGE RECIPIENT CONTACT NAME: _____

CONTACT POSITION/TITLE: _____ **PHONE: (____) _____**

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

Kelsey Locke

Signature

Date Signed

¹This form shall be signed according to the General Permit, ACT12, 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.

OC

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