nP20070001



ATTACHMENT#1

MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY

James I. Palmer, Jr., Executive Director

CONSTRUCTION NOTICE OF INTENT (CNOI)

FOR COVERAGE UNDER CONSTRUCTION STORM GENERAL NPDES PERMIT MSR10 4637

(NUMBER TO BE ASSIGNED BY STATE)

FILE AT LEAST 30 DAYS PRIOR TO THE COMMENCEMENT OF CONSTRUCTION 15 DAYS IF A STORM WATER POLLUTION PREVENTION PLAN (SWPPP) IS ALREADY ON FILE

INSTRUCTIONS

MDEQ

SUBMITTALS WITH THIS CNOI MUST INCLUDE: A USGS QUAD MAP (OR A COPY) SHOWING SITE LOCATION AND STORM WATER OUTFALLS AND STORM WATER POLLUTION PREVENTION PLAN (CONSTRUCTION GENERAL PERMIT PART III.)

ADDITIONAL SUBMITTALS MAY INCLUDE DOCUMENTATION OF SWPPP APPROVAL WITH LOCAL ORDINANCES (CONSTRUCTION GENERAL PERMIT PART III. B.); APPROPRIATE SECTION 404 DOCUMENTATION FROM CORPS OF ENGINEERS (IF REQUIRED); APPROPRIATE DOCUMENTATION FROM HEALTH DEPARTMENT AND/OR MDEQ/OPC FOR FUTURE DISPOSAL OF SANITARY SEWAGE AND SEWAGE COLLECTION SYSTEM; APPROPRIATE DOCUMENTATION FROM MDEQ/OFFICE OF LAND & WATER, FOR DAM CONSTRUCTION AND LOW FLOW REQUIREMENTS.

APPLICANT MUST BE OWNER OR PRIME CONTRACTOR.
THE APPLICANT RECEIVES COVERAGE AND IS RESPONSIBLE FOR PERMIT COMPLIANCE. OWNER MAY APPLY AND AT A LATER DATE REQUIRE PRIME CONTRACTOR TO ASSUME PERMIT COMPLIANCE (SEE PRIME CONTRACTOR CERTIFICATION)

All OUESTIONS MUST BE ANSWERED (Answer "NA" if the question is not applicable)

IS APPLICANT THE OWNER OR PRIME CONTRACTOR? (CIRCLE ONE OR BOTH)

OWNER INFORMATION

William R. Hover OWNER CONTACT PERSON: Hover Gravel Co., Inc. OWNER COMPANY NAME: ___ #18 Woodville Trace OWNER STREET (P.O. BOX): OWNER CITY: Hattiesburg STATE: MS ZIP: 39402 OWNER PHONE # (INCLUDE AREA CODE): ___(601) 264-8727

PRIME CONTRACTOR INFORMATION

PRIME CONTRACTOR CONTACT PERSON: PRIME CONTRACTOR COMPANY: PRIME CONTRACTOR STREET (P.O. BOX): PRIME CONTRACTOR CITY: ______STATE: ____ZIP: _____ PRIME CONTRACTOR PHONE # (INCLUDE AREA CODE):

> OFFICE OF POLLUTION CONTROL P.O. Box 10385 Jackson, MS 39289.0385 Phone 601.961.5171 Fax 601.354.6612

PROJECT INFORMATION

| PROJECT NAME: Class II Rubbish Site |
|---|
| DESCRIPTION OF CONSTRUCTION ACTIVITY: Dispose of rubbish in old gravel pit |
| PRODUCED DESCRIPTION OF PROPERTY LICE AFTER CONSTRUCTION WAS DEED COMPLETED |
| PROPOSED DESCRIPTION OF PROPERTY USE AFTER CONSTRUCTION HAS BEEN COMPLETED (INCLUDE STANDARD INDUSTRIAL CLASSIFICATION CODE (SIC) IF KNOWN): |
| SIC Code |
| |
| PHYSICAL SITE ADDRESS (IF NOT AVAILABLE INDICATE THE NEAREST NAMED ROAD - FOR LINEAR PROJECTS INDICATE BEGINNING OF PROJECT. IN ADDITION, IDENTIFY ALL COUNTIES THAT LINERAR PROJECT TRAVERSES.): |
| STREET: Gravel Pit Road |
| CITY:, COUNTY: _Lamar |
| ZIP: 39402 |
| |
| NEAREST NAMED RECEIVING STREAM:Small unamed stream |
| ARE THERE ANY WETLANDS, RECREATIONAL STREAMS, PRIVATE/PUBLIC PONDS OR LAKES WITHIN 1/2 |
| ARE THERE ART WEIGHTED THE MINO, THE TAIL OF BEING ON DIMED WITH |
| MILE DOWNSTREAM OF PROJECT BOUNDRY? Yes, stream discharges into small lake |
| |
| MILE DOWNSTREAM OF PROJECT BOUNDRY? Yes, stream discharges into small lake |

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

| IS THIS NOTICE FOR A FACILITY THAT WILL REQUIRE OTHER PERMITS (Yes or No)? No Is circle which one(s): AJR, HAZARDOUS WASTE, PRETREATMENT, STATE OPERATING, INDIVIDUAL NPDE CORPS OF ENGINEERS SECTION 404 (If so, provide appropriate documentation from the Corps), other(s): | f so, ES, |
|---|--------------|
| IS A LAKE REQUIRING THE CONSTRUCTION OF A DAM BEING PROPOSED (Yes or No)? No IF SO, PROVIDE APPROPRIATE APPROVAL DOCUMENTATION FROM MDEQ, OFFICE OF LAND AND WDAM SAFETY. | ATÉ I |
| IF THE PROJECT IS A SUBDIVISION, INDUSTRIAL PARK OR LARGE APARTMENT COMPLEX HOW WILL SANITARY SEWAGE BE DISPOSED? Circle one of the following and attach the pertinent documents. | LL |
| Existing Municipal or Commercial System. Please attach a copy of the letter from MDEQ that the plans and specifications for the collection system have been submitted and approved. | |
| Collection and Treatment System will be Constructed. Please attach a copy of the cover of the NPDES dischargermit from MDEQ or indicate the date the application was submitted to MDEQ (Date: | ge) |
| Individual Onsite Wastewater Disposal Systems for Subdivisions Less than 35 Lots. Please attach a copy of the of General Acceptance from the Mississippi State Department of Health or certification from a registered prof- engineer that the platted lots should support individual onsite wastewater disposal systems. | Lette |
| 4. 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. | e 1e |
| 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 t platted lots should support individual onsite wastewater disposal systems. | he |
| IF THE PROJECT IS NOT ONE OF THE ABOVE, HOW WILL SANITARY SEWAGE BE DISPOSED? | |
| NA | |
| INDICATE ANY LOCAL STORM WATER ORDINANCE WITH WHICH THE PROJECT MUST COMPLY ANI SUBMIT ANY DOCUMENTATION OF APPROVAL. (APPROVED PLANS WILL RECEIVE EXPEDITED REV | D IEW): |
| | |

STORM WATER POLLUTION PREVENTION PLAN (SWPPP) AND USGS QUAD MAP REQUIREMENT

| PROVIDE DRAWINGS OF TYPICAL CONTROLS USED (SEE PERMIT): | TS (ROAD AND PIPELINE PROJECTS) |
|--|--|
| | |
| ATTACH A USGS QUAD MAP OR COPY OF QUAD MAP EXTENDING AT LETHE SITE'S PROPERTY BOUNDRY OUTLINING THE SITE LOCATION. (QUAOFFICE OF GEOLOGY: 601-961-5523). | AST ONE-HALF OF A MILE BEYOND AD MAPS CAN BE OBTAINED FROM THE |
| IF A COPY IS SUBMITTED PROVIDE THE NAME OF THE QUAD MAP (FOUN Hattiesburg SW | D IN UPPER RIGHT HAND CORNER OF MAP) |

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 (Must be signed by operator when different than owner) William R. Hoven

7-20-00 Date Signed

William R. Hover

Printed Name

OWNER

¹This application shall be signed according to the General Permit, Part V.E., 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.

Duly Authorized Representative.