AI #38121 Chra0080001



# MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY (MDEQ) LARGE CONSTRUCTION NOTICE OF INTENT (LCNOI) FOR COVERAGE UNDER THE LARGE CONSTRUCTION STORM WATER

GENERAL NPDES PERMIT MSR10 5 2 2 4

# INSTRUCTIONS

The Large Construction Notice of Intent (LCNOI) is for coverage under the Large Construction Storm Water General Permit for land disturbing activities of five (5) acres or greater; or for land disturbing activities that are part of a larger common plan of development or sale that will disturb five (5) or more acres. Applicant must be 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 several responsibility for compliance with the Large Construction Storm Water General Permit MSR10.

File at least thirty (30) days prior to the commencement of construction, fifteen (15) days if a Storm Water Pollution Prevention Plan (SWPPP) is already on file. <u>Discharge of storm water from a "large" construction site</u> without written notification of coverage is a violation of state law.

#### Submittals with this LCNOI must include:

- A Storm Water Pollution Prevention Plan as described in the Large Construction Storm Water General Permit
- A USGS quad map or a copy showing site location

#### Additional submittals may include the following if applicable:

- Appropriate Section 404 documentation
- Appropriate sanitary sewage collection and disposal documentation
- Appropriate dam construction and low flow requirement documentation

ALL INFORMATION MUST BE COMPLETED (Put "NA" if not applicable)

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

OWNER INFORMATION

TREY HUEY				
WILLIAMS GOU	IPMENT CO.			
2657 WUST 9	YFORD LOOP			
	STATE:	M5	ZIP:	38655
	WILLIAMS 500 2657 WUST 9	WILLIAMS GOVIPMENT CO.  2657 WISST GREGOD LOOP  STATE:	WILLIAMS GOVIPMENT CO. 2657 WISST GREGOD LOOP	WILLIAMS GOVIPMENT CO.  2657 WISST GREGOD LOOP  STATE: MS ZIP:

### PRIME CONTRACTOR INFORMATION

	AG AS OWNER		
PRIME CONTRACTOR COMPANY:			
PRIME CONTRACTOR STREET OR P.O. BOX:			
PRIME CONTRACTOR CITY:	STATE:ZIP:		
PRIME CONTRACTOR PHONE # (INCLUDE AREA CODE			
PROJECT INFORMATION			
PROJECT NAME: WILLIAMS EQUIPMENT	SITE PLAN		
TOTAL ACREAGE THAT WILL BE DISTURBED <sup>1</sup> (To be edisturbed area must be five (5) acres or greater; or land disturdevelopment or sale that will disturb five (5) acres or greater.)	him a cativities that are most of a larger common when of		
IS THIS PART OF A LARGER COMMON PLAN OF DEVE	LOPMENT (Yes or No)?NO		
IF YES, NAME OF LARGER COMMON PLAN OF DEVELO	OPMENT:		
AND	PERMIT COVERAGE NUMBER:		
DIET STOCK PILE TRUE REMOVAL, JUNE CAR	REMODEL, DISCARDED TIRE REMOVAL		
PROPOSED DESCRIPTION OF PROPERTY USE AFTER Constandard industrial classification code (SIC) if known):	CONSTRUCTION HAS BEEN COMPLETED (include		
standard industrial classification code (SIC) if known):	The first transfer of the street of the stre		
PHYSICAL SITE ADDRESS (If the physical address is not avindicate the beginning of the project and identify all counties the STREET:	SIC Codesilable indicate the nearest named road. For linear projects, he project traverses.)		
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PHYSICAL SITE ADDRESS (If the physical address is not avindicate the beginning of the project and identify all counties the street:	SIC Code ailable indicate the nearest named road. For linear projects, he project traverses.)  LAFA(GTTU  NGITUDE: 54 degrees 22 minutes 60 seconds  ort Point) or Map Interpolation): MAP (ANTER POLATION)		
PHYSICAL SITE ADDRESS (If the physical address is not avindicate the beginning of the project and identify all counties the STREET:	SIC Code  SIC Code  SIC Code  ailable indicate the nearest named road. For linear projects, he project traverses.)  LAFACUTTE  NGITUDE: 4 degrees 22 minutes 60 seconds  or Point) or Map Interpolation): MAP (ANTER POLATION)  U.B. OF CACAGAS BRANCH  LIC PONDS OR LAKES WITHIN 1/2 MILE		
PHYSICAL SITE ADDRESS (If the physical address is not avindicate the beginning of the project and identify all counties the street:	SIC Code  SIC Code  SIC Code  ailable indicate the nearest named road. For linear projects, he project traverses.)  LAFACUTTE  NGITUDE: 54 degrees 72 minutes 60 seconds  ort Point) or Map Interpolation): MAP (ANTER POLATION)  LIC PONDS OR LAKES WITHIN 1/4 MILE  IMPACTED BY THE CONSTRUCTION		

<sup>&</sup>lt;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 THIS LCNOI FOR A FACILITY THAT WILL REQUIRE OTHER PERMITS (Yes or No)?
IF YES, CIRCLE WHICH ONE(S): AIR, HAZARDOUS WASTE, PRETREATMENT, WATER STATE OPERATING, INDIVIDUAL NPDES, OTHER:
IS THE PROJECT REROUTING, FILLING OR CROSSING A WATER CONVEYANCE OF ANY KIND (Yes or No)? NO. (If yes, contact the U.S. Army Corps of Engineers' Regulatory Branch for permitting requirements).
IF THE PROJECT REQUIRES A CORPS OF ENGINEER SECTION 404 PERMIT, PROVIDE APPROPRIATE DOCUMENTATION WITH THIS LCNOI THAT:
The project has been approved by individual permit, or
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 or No)? NO IF YES, PROVIDE APPROPRIATE APPROVAL DOCUMENTATION FROM THE MDEQ OFFICE OF LAND AND WATER, DAM SAFETY.
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.
<ol> <li>Existing Municipal or Commercial System. Please attach plans and specifications for the collection system and the associated "Information Regarding Proposed Wastewater Projects" form. If the plans and specifications can not be provided at the time of LCNOI submittal, the 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.</li> </ol>
2. Collection and Treatment System will be Constructed. Please attach a copy of the cover of the NPDES discharge permit from the MDEQ or indicate the date the application was submitted to the MDEQ. Date:
<ol> <li>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.</li> </ol>
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 the MDEQ. A copy of the response from the 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:

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

CONSTRUCTION STORM WATER GENERAL PERMIT.  INDICATE ANY ASSOCIATION OR GENERIC SWPPP (In additi- sediment controls identified. For linear projects such as roads and pi	on, attach a site map with the appropelines provide drawings of typical	priate erosion and	
Atthurse			
ATTACH A USGS QUAD MAP OR COPY OF QUAD MAP EXTENTIFIED THE SITE'S PROPERTY BOUNDARY OUTLINING THE SITE LO Office of Geology at 601-961-5523.) IF A COPY IS SUBMITTED PR upper right hand corner of map).	OCATION (Quad maps can be obtain	ned from MDEO	
ATTACHED			
I certify under penalty of law that this document and all attachments waccordance with a system designed to assure that qualified personnel pusubmitted. Based on my inquiry of the person or persons who manage gathering the information, the information submitted is, to the best of n I am aware that there are significant penalties for submitting false informationment for knowing yiolations.	operly gathered and evaluated the i	nformation responsible for	
	Date		
Signature (Nyast by signed by operator when different than owner)	14.6.000	-	
Signature' (Mast be signed by operator when different than owner)  1254 How  Printed Name'	MANACOR_		

Please submit this LCNOI form to:

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

# PRIME CONTRACTOR CERTIFICATION

By completing and submitting this form to the 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) and (2) 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 several 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: ()
	SAME AS OWILLER
PRIME CONTRACTOR STREET OR P.O. BOX:	
PRIME CONTRACTOR CITY:	STATE:ZIP:
OWN	ER INFORMATION
OWNER CONTACT PERSON:	PHONE NUMBER: ()
OWNER COMPANY NAME:	
PROJE	ECT INFORMATION
CONSTRUCTION STORM WATER GENERAL PER  MSR10	RMIT COVERAGE NUMBER (Found on Certificate of Coverage):
PROJECT NAME:	
DESCRIPTION OF CONSTRUCTION ACTIVITY: _	
PHYSICAL SITE ADDRESS (If the physical address is indicate the beginning of the project and identify all constraints:	
	UNTY:
NPDES permit. I further certify under penalty of law that th supervision in accordance with a system designed to assure the submitted. Based on my inquiry of the person or persons when information, the information submitted is, to the best of my keeps of my	vill comply with all the applicable requirements in the above referenced general is document and all attachments were prepared under my direction or that qualified personnel properly gathered and evaluated the information to manage the system, or those persons directly responsible for gathering the knowledge and belief, true, accurate and complete. I am aware that there are ng the possibility of fine and imprisonment for knowing violations.
Prime Contractor Signature <sup>1</sup>	Date
Printed Name <sup>i</sup>	Title
This application shall be signed as follows:	This Prime Contractor Certification form shall be submitted to:

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;

Duly Authorized Representative.

Chief, Environmental Permits Division

MS Department of Environmental Quality, Office of Pollution Control P.O. Box 2261

Jackson, Mississippi 39225-2261