Snp2000000



Mississippi Department of Environmental Quality
Office of Pollution Control – Environmental Permits Division
POST OFFICE BOX 2261 • JACKSON, MS 39225-2261
TEL: (601) 961-5171 • FAX: (601) 354-6612
www.deq.state.ms.us



DRY LITTER POULTRY ANIMAL FEEDING OPERATIONS

NOTICE OF INTENT (DLPNOI)

FOR COVERAGE UNDER

MULTIMEDIA GENERAL POLLUTION CONTROL PERMIT NO. MSG20

(Number to be assigned by State)

APPLICANT MUST BE THE OWNER AND/OR OPERATOR OF THE PROPERTY ASSOCIATED WITH THE REGULATED ACTIVITY. ALL SUBMITTALS MUST INCLUDE THE FOLLOWING:

ALL SUBMITTALS WITH THIS DLPNOI MUST INCLUDE:

- A CURRENT NUTRIENT MANAGEMENT PLAN (SEE SECTION II)
- A USGS QUAD MAP OR A COPY SHOWING THE SITE LOCATION
- A SITE DRAWING

ADDITIONAL SUBMITTALS MAY INCLUDE THE FOLLOWING IF APPLICABLE:

- APPROPRIATE SECTION 404 DOCUMENTATION (WETLANDS)
- A STORM WATER POLLUTION PREVENTION PLAN (SWPPP), IF THERE IS TO BE CONSTRUCTION WORK TOTALING ONE ACRE OR MORE
- CONTIGUOUS LAND OWNER NOTIFICATION(S) AS IDENTIFIED IN CONDITION S-2, ACT2
 OF THE DRY LITTER POULTRY ANIMAL FEEDING OPERATIONS MULTIMEDIA GENERAL
 POLLUTION CONTROL PERMIT NO. MSG20.

USGS QUAD MAPS SUBMITTED MUST EXTEND AT LEAST ONE MILE BEYOND THE PROPERTY BOUNDARIES OF THE FACILITY AND MUST CLEARLY SHOW ALL SPRINGS AND SURFACE WATER BODIES IN THE AREA, PLUS ALL DRINKING WATER WELLS WITHIN ¼ MILE OF THE FACILITY. ADDITIONALLY, ALL PUBLIC DRINKING WELLS WITHIN ONE MILE OF THE FACILITY MUST BE IDENTIFIED.

THE SITE DRAWING MUST SHOW THE PROPERTY BOUNDARIES AND MUST INDICATE THE APPROXIMATE LOCATION OF EACH EXISTING AND PROPOSED STRUCTURE (HOUSE, INCINERATOR, DEAD BOX, LAND APPLICATION FIELD, COMPOSTING AREA, LITTER STORAGE STRUCTURE, ETC). THE SITE DRAWING MUST INCLUDE A COMPASS DIRECTION HEADER.

SUBMIT AT LEAST 180 DAYS PRIOR TO COMMENCEMENT OF CONSTRUCTION OR PLANNED OPERATIONS. ALL FORMS MUST BE SUBMITTED TO: CHIEF, ENVIRONMENTAL PERMITS DIVISION, MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY, P.O. BOX 2261, JACKSON, MISSISSIPPI 39225-2261.

<u>ALL QUESTIONS MUST BE ANSWERED.</u> FOR THIS APPLICATION TO BE CONSIDERED, ALL QUESTIONS ON THIS FORM MUST BE ANSWERED. IF AN ITEM DOES NOT APPLY, ENTER "N/A" (NOT APPLICABLE) TO SHOW THAT YOU CONSIDERED THE QUESTION.

I. GENERAL INFORMATION:

CONTACT AND FACILITY INFORMATION

Name of Owner: (Kris Mª Ne.)		
Facility Name: MENeil Facms		
Mailing Address:		
Street or P.O. Box: 129 CR 2343		
City: Louin State: MS Zip: 39338		
Physical Address: (If the physical address is not available indicate the nearest named road or intersection.)		
Street (can not be a P.O. Box)		
City: Louin State: MS Zip: 39338		
County: Jasper		
Latitude (degrees/min/sec): 323' 41.8097		
Longitude (degrees/min/sec): 89° 11' 79.1948		
Nearest named receiving stream:		
Facility Telephone No. (Include Area Code): 601-764-668 Z		
Facility Fax No. (Include Area Code):		
Facility Cell Phone No. (Include Area Code): 601-670-5492		
Other Contact Phone Numbers (Include Area Code): 601-577-1452		
TYPES OF ACTIVITY		
Check all that apply:		
Existing dry litter poultry operation that is not proposing an increase in the number of houses		
Construction and/or operation of an incinerator		
New or expanding operations that will require construction activities disturbing one acre or more		

II. DRY LITTER POULTRY FEEDING OPERATION CHARACTERISTICS:

TYPE AND AMOUNT OF CHICKENS Check all that apply and indicate the amounts Broilers (SIC 0251): /3/000 Layers (SIC 0252): TOTAL AMOUNT: /3/000 Housed under roof Open confinement TYPES OF DRY LITTER CONTAINMENT, S Check all that apply and indicate total days of storage and the		
Type of Storage	Total Number of Days	Total Capacity (tons)
☐ Roofed Storage Shed	360	1059
Concrete Pad		
Impervious Soil Pad		
Other: Specify		
Are all poultry houses, that have been constructed or enlarged after February 24, 1994, at least 600 feet from all occupied dwellings or commercial establishments not owned by the applicant and at least 150 feet from all adjoining property lines? Yes No, attach wavier Are all incinerators at least 150 feet from the nearest residential or recreational area, all dwellings, and all light commercial buildings not owned by the applicant? NOTE: If answered no to any of these questions then attach a completed Poultry Buffer Zone Waiver. The wavier must be completed by all affected property owners and notarized by a State of Mississippi appointed Notary Public. A copy of the Dry Litter Poultry Buffer Zone Waiver can be found in the Dry Litter Poultry Forms Package or by calling (601) 961-5171 or at http://www.deq.state.ms.us/MDEQ.nsf/page/epd_AgriculturalBranchEPD?OpenDocument CONTRACT INFORMATION		
CONTRACT INFORMATION		
Is this facility a contract operation? Yes No		
If yes, what is the name and address of the integrator?		
Name: Peco Farms	Address:	Bay Springs 18

II. DRY LITTER POULTRY FEEDING OPERATION CHARACTERISTICS (continued):

ATTACHMENTS
Attach a USGS quad map or a copy that extends at least one mile beyond the property boundaries of the facility and clearly show all springs and surface water bodies in the area, plus all drinking water wells within ¼ mile of the facility. Additionally, all public drinking wells within one mile of the facility must be identified. Quad maps can be obtained from MDEQ Office of Geology at (601) 961-5523.
Attach a site drawing showing the property boundaries and must indicate the approximate location of each existing and proposed structure (house, incinerator, dead box, land application field, composting area, etc). The site drawing must include a compass direction header.
NUTRIENT MANAGEMENT PLAN Answer the following
My most current and up to date nutrient management plan was developed on 2003. Duyle who DCT 2-25-09 (Date)
I understand that my nutrient management plan identified above expires five years from the date it was developed and that an updated nutrient management plan must be submitted to MDEQ prior to its expiration date.
The expiration date of my current plan is 2069.
Is a nutrient management plan already being implemented for the facility? Yes No
What is the estimated amount of litter generated per year? 1059 tons/year
Total acreage needed for land application:
Total acreage available for land application:
Will a third party remove litter off site? Yes No
If yes, how much litter will be transferred to other persons per year? 1059 tons/year
If not land applying, describe alternative use(s) of the litter:

III. CONSTRUCTION AND/OR OPERATINCINERATOR	TION OF A POULTRY MORTALITY	
Yes, there will be mortality incineration equipm	ent located at the facility. This page must be completed.	
you wish to construct and/or operate poultry mou updated DLPNOI by completing Sections III and	on equipment located at the facility. If at a future date retality incineration equipment, you must submit an d V. Constructing and operating poultry mortality rage or issuance of individual permits is a violation of	
have previously submitted approved stack test. For please visit http://www.deq.state.ms.us/MDEQ.nsf/p or call (601) 961-5171. Carcasses generated at facilities other than the one is	dentified in this DLPNOI are not permitted for easses generated on site are permitted for incineration.	
MANUFACTURER'S INFORMATION	TYPE OF INCINERATOR	
Manufacturer Name: Destructor	Single Chamber	
Model Number: <u>J83D5</u> LP	☐ Multiple Chamber	
Capacity (tons/hour): 5006h	Other, describe	
Latitude Latitude	erator and indicate the latitude and longitude	
FUEL TYPE AND INCINERATOR TEMPERATE Fuel Type: If fuel oil is burned, what is the sulfur content of the Incinerator operating temperature range 300	e oil?%	