LARGE CONSTRUCTION STORM WATER GENERAL NPDES PERMIT MSR10



INSTRUCTIONS

Coverage recipients shall notify the Mississippi Department of Environmental Quality of plans to expand the "footprint" of an existing project or add subsequent phases. This form and a modified Storm Water Pollution Prevention Plan (SWPPP), including COE Section 404, dam safety, and wastewater collection and treatment information, must be submitted when:

- SWPPP details have been developed and are ready for MDEQ review for subsequent phases of an existing, covered project.
- The "footprint" identified in the original Notice of Intent and SWPPP is proposed to be enlarged.

This form must be signed by the original coverage recipient under Mississippi's Large Construction Storm Water General Permit. A different developer of new phases of existing projects must apply for separate permit coverage. Coverage recipients are authorized to discharge storm water associated with proposed expansions of existing projects or subsequent phases, under the conditions of the General Permit, <u>only upon receipt of written notification of approval by the MDEQ</u>. All other modifications, such as changes of erosion and sediment controls used, must be in accordance with ACT 7, S-1 (4) of Mississippi's Large Construction Storm Water General Permit.

COVERAGE RECIPIENT INFORMATION		
COVERAGE RECIPIENT CONTACT PERSON: Bruce Hughes		
COMPANY NAME: Okhissa	Lake Sewer District	
STREET OR P.O. BOX: 734		
CITY: Meadville	STATE: M	IS ZIP: 39653
PHONE # (INCLUDE AREA C	ODE): (601) 384-3953	
PROJECT INFORMATION		
CONSTRUCTION STORM WATER GENERAL PERMIT COVERAGE NUMBER: MSR10 4 9 1 3		
ADDITIONAL ACREAGE TO BE DISTURBED: 2 acres		
PROJECT NAME: Okhissa Lake Sewer District Phase II Water Collection System		
CITY: Bude	COUNTY: Franklin	
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.		
Signature (must be signed by coverage recipient)		/0 - 6 - 10 Date
Bruce Hughes		Chairman
Printed Name		Title
Please submit this form to:	Chief, Environmental Permits Division MS Department of Environmental Quality, Office of Pollut P.O. Box 2261 Jackson, Mississippi 39225-2261	cion Control