

AF #14927

Kenny



MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY

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MAR 28 2011

MDEQ

BASELINE STORM WATER GENERAL PERMIT RE-COVERAGE FORM

FOR COVERAGE UNDER MISSISSIPPI'S REISSUED
BASELINE GENERAL PERMIT MSR00
GENERAL NPDES COVERAGE NO. MSR00 1 4 7 5

INSTRUCTIONS

The submittal of this form is required to receive coverage under the reissued Baseline General Permit. This form must be completed and returned to the address printed at the bottom of page 2 within 30 days of the date of the Letter of Instruction for Re-Coverage.

The signatory of this form must be the owner or operator who is the current coverage recipient (rather than the plant/site manager or environmental consultant). The coverage recipient is responsible for permit compliance.

Amendments to the Storm Water Pollution Prevention Plan (SWPPP) are required to be attached if the plan is not current or is ineffective in controlling storm water pollutants. The visual assessment and training sections of your SWPPP will probably need to be updated to adhere to permit requirements (see ACT8, S-1 and ACT12, S-1 and S-2). These updates do NOT need to be submitted to MDEQ.

If the facility is out of business or no longer a regulated facility, please request termination of coverage by completing the Request for Termination (RFT) Form found in the Baseline Forms Package. Facilities that continue to discharge wastewater without applicable permit coverage are in violation of state law.

Do not submit this form if submitting a "Request for Termination" (RFT).

Do not submit this form if submitting a "No Exposure Certification."

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

The Certificate of Coverage should be mailed to: owner/operator facility (please check one)

COVERAGE RECIPIENT INFORMATION

CONTACT NAME & POSITION: Mr. Jose Briceno

COMPANY NAME: 3 Rivers Flooring, Inc.

STREET OR P.O. BOX: P.O. Box 6

CITY: Marks

STATE: Mississippi

ZIP: 38646

PHONE NUMBER (INCLUDE AREA CODE): 662-326-7559

FACILITY INFORMATION

FACILITY NAME: 3 Rivers Flooring, Inc.

CONTACT NAME & POSITION: Mr. Jose Briceno

CONTACT PHONE NUMBER (INCLUDE AREA CODE): 662-326-7559

PRIMARY STANDARD INDUSTRIAL CLASSIFICATION (SIC) CODE & DESCRIPTION OF INDUSTRIAL ACTIVITY: 2 4 3 6

PHYSICAL SITE ADDRESS: STREET: 200 Brooks Road

CITY: Marks COUNTY: Quitman ZIP: 38646

PROVIDE THE COORDINATES OF THE PLANT ENTRANCE:

LATITUDE: 34 degrees 14 minutes 25.2 seconds LONGITUDE: 90 degrees 16 minutes 27.3 seconds

NEAREST NAMED RECEIVING STREAM FOR STORM WATER LEAVING THE SITE: Coldwater River

IS RECEIVING STREAM ON MDEQ's 303(d) LIST? [] YES [x] NO

IF YES, HAS A TMDL BEEN ESTABLISHED FOR THE RECEIVING STREAM SEGMENT? [] YES [x] NO

STORM WATER POLLUTION PREVENTION PLAN (SWPPP)

1. IS A COPY OF THE SWPPP AT THE PERMITTED SITE? [x] YES [] NO

2. IS THE SWPPP UP-TO-DATE AND EFFECTIVE IN CONTROLLING STORM WATER POLLUTANTS? [x] YES [] NO IF NO, PLEASE ATTACH REQUIRED SWPPP AMENDMENTS (see Instructions on front page).

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 further certify that I understand when coverage is terminated the facility is no longer authorized to discharge storm water associated with industrial activity under this general permit. I understand that discharging pollutants in storm water associated with industrial activity to waters of the state without NPDES coverage is in violation of state law.

Signature: [Handwritten Signature]

Date: 3/24/11

Printed Name: Jose Briceno

Title: Plant Manager

This form shall be signed according to ACT14, T-9 of the General Permit, 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.

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

Fields & Associates, LLC

75 Norfolk Drive
Maumelle, AR 72113

Office: (501) 912-6381
Fax: (866) 228-5146

"Providing Innovative Solutions to the Solid Waste Industry"

March 25, 2011

Mr. Jim Morris
Chief, General Permits Branch
Environmental Permits Branch
MS Department of Environmental Quality, Office of Pollution Control
P.O. Box 2261
Jackson, Mississippi 39225

RECEIVED
MAR 28 2011
Dept of Environmental Quality

RE: 3 Rivers Flooring (formally Marks Veneer), Baseline Storm Water General Permit, MSR001475

Dear Mr. Ross:

Fields & Associates, LLC, on behalf of 3 Rivers Flooring, Inc. (formally Marks Veneer, Inc.), is pleased to provide the Recoverage Form for the Baseline Storm Water Permit MSR001475.

Please feel free to call me if you have any questions, concerns or require any additional information. Fields & Associates, LLC and 3 Rivers Flooring appreciate the consideration given to this request.

Sincerely,
Fields & Associates, LLC


Phillip Fields
President Fields & Associates, LLC

cc: Mr. Jose Briceno