AI #24931 GNP20170001



JUL 27 2017 MDEO

MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY

UNDERGROUND STORAGE TANK GROUNDWATER REMEDIATION NOTICE OF INTENT (USTNOI)

For Coverage under Mississippi's Underground Storage Tank (UST) Groundwater Remediation General Permit General Permit MSG12 0257

(NUMBER TO BE ASSIGNED BY STATE)

INSTRUCTIONS

Applicant must be the owner or operator of the remediation system. To avoid unnecessary delays, please be sure that the USTNOI is signed in accordance with permit ACT9, T-7 of the General Permit. The owner or operator that receives coverage is responsible for permit compliance. File at least 30 days prior to proposed discharge.

Required Submittals with the USTNOI Include:

- A USGS quadrangle map or copy extending at least one-half of a mile beyond the site's property boundary. The site location and outfalls must be outlined or highlighted. Quad maps can be obtained from the Office of Geology at 601-961-5523. If a copy is submitted, provide the name of the quadrangle map that is found in upper right hand corner.
- A letter of approval or denial from an available POTW or Wastewater Collection Authority (see permit ACT4, S-6 and MDEQ Wastewater Regulations, Chapter One, Part I.C.1.a.).
- Certified-return receipts from contiguous landowner notifications (not required if the remediation system was operating under a previous permit or coverage see permit ACT4, S-7).
- A list of water treatment chemicals proposed to be used. Please submit the following information for each specific chemical: name and composition of the additive, discharge concentration, dosage addition rates, frequency of use, EPA registration (if applicable), aquatic species toxicological data and Material Safety Data Sheet (MSDS).

<u>ALL INFORMATION REQUESTS MUST BE ANSWERED</u> (answer "NA" if not applicable)



THE APPLICANT IS \Box OWNER

OPERATOR (please check one or both)

OWNER INFORMATION

Owner Contact Name: Allen Schrepferman	Position: Environmetal Manager
Owner Company Name: Dutch Oil Company	
Owner Street (P.O. Box): PO Box 2323	
Owner City: Columbus	State: MSZip: 39704
Owner Phone Number (include area code): <u>662-327-5202</u>	

OPERATOR INFORMATION (if different than owner)

Operator Contact Name: Fareed Ahmed	Posit	tion: Project Manager
Operator Company Name: PELA GeoEnvironmental, Inc.		
Operator Street (P.O. Box): PO Box 2310		
Operator City: Tuscaloosa	_State: AL	Zip: _35403
Operator Phone Number (include area code): 205-752-5543 ext.	25	

PROJECT INFORMATION

Project Name: Sprint Mart #4109		
Mississippi Groundwater Protection Trust Fund ID No. (if applicable): 9953		
Physical Site Address (if not available indicate the nearest named road):		
Street: 2001 South Commerce Street	City: Grenada	
County: Grenada	Zip: <u>38901</u>	
Latitude: <u>33</u> degrees <u>45</u> minutes <u>40.4</u> seconds Longitude: <u>8</u>	9 degrees 48 minutes $32.\epsilon$ seconds	
Method Used to Determine Lat. & Long. (GPS (Please GPS Facility Entrance) or Map Interpolation): MDEQ Database		

WASTEWATER DISCHARGE INFORMATION

Where is the remediated groundwater proposed to be discharged? State Waters V POTW/Collection System		
Name of Nearest Receiving Stream: NA		
Name of POTW: City of Grenada - Water and Sewer Department		
POTW contact, title and telephone number: <u>Henry Pryor</u> , Superintendent 662-227-3418		
Name of Wastewater Collection Authority (if different from POTW): NA DALE RAHLE		
Wastewater Collection Authority contact, title and telephone number: <u>NA</u>		
DATE RAFLEFF WATER & SERVER SUPT 662-227-3415		
Proposed rate of flow (gallons/day): <u>4,320</u>		
Describe type of treatment: Air Stripping		

CERTIFICATION

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.

0 Signature⁴ (Must be signed by operator whe different than Bashir A. Memon Printed Name¹

June 27, 2017 Date Signed

Senior Hydrogeologist Title

¹This application shall be signed according to the General Point, ACT9, T-7 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, the mayor, or ranking elected official.

MS

USTNOI forms must be submitted to:

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

Revised: April 6, 2011