AI: 63928

Rec'd via email: 03/08/2024



MAJOR MODIFICATION FORM FOR LARGE CONSTRUCTION GENERAL PERMIT

Coverage No. MSR10 ____ County ____

INSTRUCTIONS								
Coverage recipients shall notify the Mississippi Department of Environmental Quality (MDEQ) at least 30 days in advance of the following activities (check all that apply). This form should be submitted with a modified Storm Water Pollution Prevention Plan (SWPPP), updated USGS topographic map, Corps of Engineers Section 404 documentation and wastewater collection and treatment information, as appropriate. SWPPP details have been developed and are being submitted for MDEQ review for subsequent phases of an existing project. "Footprint" identified in the original LCNOI is proposed to be changed.								
								This form must be signed by the current coverage recipient under Mississippi's Large Construction General Permit. A different developer of new phases of existing subdivisions must apply for separate permit coverage through the submittal of a new complete LCNOI package. Coverage recipients are authorized to discharge storm water associated with proposed expansions of existing subdivisions or subsequent phases, under the conditions of the General Permit, <u>only upon receipt of written notification of approval by MDEQ</u> . All other modifications, such as changes of erosion and sediment controls used, must be in accordance with ACT6, S-1 (6) and S-2 (7) of the General Permit.
ALL INFORMATION MUST BE COMPLETED (indicate "N/A" where not applicable)								
CURRENT COVERAGE RECIPIENT INFORMATION								
COVERAGE RECIPIENT CONTACT NAME:		PHONE #	()					
COMPANY NAME:								
STREET OR P.O. BOX:								
CITY: STAT	E: ZIP:	_E-MAIL:						
IS THE APPLICANT DIFFERENT FROM THE CUR	RENT COVERAGE HOLDER?	YES	NO					
	ONSULTANT INFORMATION TO SOME THE PROPERTY OF							
PREPARER/CONSULTANT CONTACT NAME:		PHONE #	()					
COMPANY NAME:		_						
STREET OR P.O. BOX:								
CITY: STATE:								
MAY MDEQ CORRESPOND DIRECTLY WITH TH THE PROPOSED PROJECT / MODIFICATION?	E PREPARER / CONSULTANT I	REGARDING	YES	NO				
SIT	TE INFORMATION							
PROJECT NAME:								
CITY:	TRIBAL LAND ID (N/A If not appli		_					
Latitude / Longitude Collected at Project Entrance								
LATITUDE: degrees minutes seconds		minutes	seconds					
LAT & LONG COLLECTION METHOD (e.g., GPS, 1								
REDUCTION IN ACREAGE:	ADDITIONAL ACREAGE							
TOTAL PROJECT ACREAGE: ESTIMATED CONSTRUCTION END DATE:								

IS THE PROJECT RE OF ANY KIND? (If ye	ROUTING, FILLING OR CROSSING Ass, contact the U.S. Army Corps of Engine	WATER CONVEYANCE ers' Regulatory Branch for	YES permitting requ	✓ NO irements.)
IF THE PROJECT IS BE DISPOSED? Check	A SUBDIVISION OR A COMMERCIAL cone of the following and attach the perti	DEVELOPMENT, HOW V	VILL SANITAI	RY SEWAGE
"Information Regard Jackson, Pearl River an will accept written ac	r Commercial System. Please attach plans a ing Proposed Wastewater Projects" form or d Stone Counties. If the plans and specification cknowledgement from official(s) responsible roposed project can and will be transported a	approval from County Utility A ons cannot be provided at the le for wastewater collection and	uthority in Hancoc time of LCNOI s I treatment that the	ck, Harrison, ubmittal, MDEQ he flows
Collection and Treats MDEQ or indicate th	nent System will be Constructed. Please atta e date the application was submitted to MDI	ach a copy of the cover of the EQ (Date:	NPDES discharg	ge permit from
Acceptance from the	stewater Disposal Systems for Subdivisions Mississippi State Department of Health or o pport individual onsite wastewater disposal	certification from a registered p	ich a copy of the professional engi	Letter of General neer that the
installing a central se concerning the feasib a copy of the Letter of	stewater Disposal Systems for Subdivisions wage collection and treatment system must illity study must be attached. If a central col of General Acceptance from the State Depart ted lots should support individual onsite was	be made by MDEQ. A copy of llection and wastewater system tment of Health or certification	of the response from is not feasible,	om MDEQ then please attach
INDICATE ANY LOC N/A	AL STORM WATER ORDINANCE WI'	TH WHICH THE PROJECT	r must comi	PLY:
NEAREST NAMED R	ECEIVING STREAM: Unnamed Tribu	utary to Little Beaver Cree	∍k	
IS RECEIVING STRE BODIES? (The 303(d)	AM ON MISSISSIPPI'S 303(d) LIST OF list of impaired waters and TMDL stream s://www.mdeq.ms.gov/water/surface-wate	IMPAIRED WATER a segments may be found on	YES	✓ NO
HAS A TMDL BEEN I	ESTABLISHED FOR THE RECEIVING	STREAM SEGMENT?	VES	NO
with a system designed to inquiry of the person or p information submitted is, t	aw that this document and all attachments assure that qualified personnel properly gapersons who manage the system, or those to the best of my knowledge and belief, true se information, including the possibility of the best of the possibility of the possibilit	othered and evaluated the info persons directly responsible f e, accurate and complete. I a fine and imprisonment for known	rmation submitted for gathering the maware that the wing violations.	ed. Based on my information, the
William J. Van Deven	der, Jr.	Title	dut	
Printed Name		Title		
Please submit this form to:	Chief, Environmental Permits Division Office of Pollution Control MS Department of Environmental Quality P.O. Box 2261 Jackson, Mississippi 39225			
Electronically:	https://www.mdeq.ms.gov/construction-sto	ormwater/		