

## STATE OF MISSISSIPPI

DEPARTMENT OF ENVIRONMENTAL QUALITY

JAMES I. PALMER, JR.

EXECUTIVE DIRECTOR



LAND DISPOSAL NOTICE OF INTENT (LNOI)

FOR COVERAGE UNDER LAND DISPOSAL STORM WATER

GENERAL NPDES PERMIT MSR50 0089

(Number to be assigned by State)

(file at least 60 days prior to the commencement of regulated industrial activity)

NAME OF FACILITY: Hancock County Development Company, LLC Class I Rubbish	Disposal site
PACILITY OWNER: Hancock County Development Company, LLC	
PACILITY OPERATOR (if different than owner):	
OPERATOR IS RESPONSIBLE FOR PERMIT COMPLIANCE)	
IS THIS NOTICE FOR A FACILITY THAT WILL NEED ANY OTHER PER If so, circle which one(s): NPDES or PRETREATMENT (for leaded to be sold was sold was permit #SW0230020443  ODES THIS FACILITY MEET THE RUN-ON AND RUNOFF CONTROLS PUR UBTITLE D OF THE SOLID WASTE DISPOSAL ACT WITH AN NPDES IN UNOFF FROM THE ACTIVE PORTION OF THE FACILITY (48 CFR 258	ste Management RSUANT TO PERMIT FOR
If yes, a storm water permit may not be needed for a city ACILITY CONTACT PERSON: Gary LaBrenz, Site Manager	//county.
ELEPHONE NUMBER (INCLUDE AREA CODE): 228-255-0700	
ACILITY HAILING ADDRESS:	
NUMBER AND STREET (P. O. BOX): 7030 Mississippi Pumping Road	
CITY: Kiln STATE: MS ZIP:	39556
ACILITY LOCATION:	
STREET, ROUTE OR OTHER: Highway 43, 7030 Mississippi Pumping	Road
CITY: Kiln COUNTY: Hancock ZIP:	39556
REAGE OF LAND DISPOSAL SITE: 49.99 acres	
EARS OF OPERATION - FROM: Present TO: Life of	Site

OFFICE OF POLLUTION CONTROL, P. O. BOX 10385, JACKSON, MS 39289-0385, 1601) 961-5171

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LIST KNOWN INDUSTRIAL WASTES D	ISPOSED AT THIS SITE:	
None Class I Rubbish Disposal Site		
		1
ATTACH A USGS QUAD MAP SHOWING Maps can be obtained from the	SITE LOCATION AND STORM	WATER OUTFALLS.
IS TREATHENT PROVIDED AT ANY ST	FORM WATER OUTFALL? IF	SO, DESCRIBE:
Sedimentation basins are provided on	the east and west sides of t	he landfill
See attached drawing.		2.5
ATTACH A STORM WATER POLLUTION See attached.	PREVENTION PLAN AS REQU	IRED IN THE PERMI
IF USING AN ASSOCIATION OR GENI	ERIC SWPPP ALREADY SUBMI	TTED, GIVE NAME:
NA.		
recreify under penalty of law were prepared under my direction system designed to assure that evaluated the information submit or persons who manage the system of my knowledge and belief, truthers are significant penalties including the possibility of fiviolations.	that this document and on or supervision in account of a county of the county of the county of the information submitted, accurate and complete for submitting false in	all attachments cordance with a perly gathered ar- dry of the person ectly responsible ed is, to the bes- es. I am aware the information,
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signature (Must be signed be operator when different than ow	DATE BIGNE	<b>D</b>
PATRICK M'NULTY	Title	
and the second of the second		
This application shall be signed Part V.B., as follows:	ed according to the Gen	eral Permit,
For a corporation, by a For a partnership, by a For a sole proprietorsh: For a municipal, state of principal executive off: official.	general partner. ip, by the proprietor. or other public facility	y, by either a
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