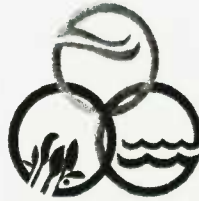


AI # 15277
Gnp20110001

RECEIVED

FEB 23 2011

MDEQ



MISSISSIPPI DEPARTMENT OF
ENVIRONMENTAL QUALITY

LAND DISPOSAL NOTICE OF INTENT (LDNOI)
FOR COVERAGE UNDER LAND DISPOSAL STORM WATER
GENERAL NPDES PERMIT MSR50 0138
(Number to be assigned by State)

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

NAME OF FACILITY: West Jackson County (Seaman Road) Rubbish Site

FACILITY OWNER: Jackson County Board of Supervisors

FACILITY OPERATOR (if different than owner):

Ronda J. Powell, Solid Waste Director

(OPERATOR IS RESPONSIBLE FOR PERMIT COMPLIANCE)

IS THIS NOTICE FOR A FACILITY THAT WILL NEED OTHER PERMITS? Yes

~~If so,~~ circle which one(s): NPDES or PRETREATMENT (for leachate),
SOLID WASTE, other(s) _____

DOES THIS FACILITY MEET THE RUN-ON AND RUNOFF CONTROLS PURSUANT TO
SUBTITLE D OF THE SOLID WASTE DISPOSAL ACT WITH AN NPDES PERMIT FOR
RUNOFF FROM THE ACTIVE PORTION OF THE FACILITY (40 CFR 258.26)? Yes

FACILITY CONTACT PERSON: Ronda J. Powell

TELEPHONE NUMBER (INCLUDE AREA CODE): (228) 872-8340

FACILITY MAILING ADDRESS:

NUMBER AND STREET (P. O. BOX): Post Office Box 998

CITY: Pasacagoula STATE: MS ZIP: 39568

FACILITY LOCATION:

STREET, ROUTE OR OTHER: 10401 & 10501 Seaman Road

CITY: Vancleave COUNTY: Jackson ZIP: 39565

ACREAGE OF LAND DISPOSAL SITE: 139 Total Acres per SWMP

YEARS OF OPERATION - FROM: March 01, 1997 TO: 2011 Continue

LIST KNOWN INDUSTRIAL WASTES DISPOSED AT THIS SITE: N/A

ATTACH A USGS QUAD MAP SHOWING SITE LOCATION AND STORM WATER OUTFALLS.
Maps can be obtained from the Office of Geology: 601-961-5523

IS TREATMENT PROVIDED AT ANY STORM WATER OUTFALL? IF SO, DESCRIBE:

N/A

ATTACH A STORM WATER POLLUTION PREVENTION PLAN AS REQUIRED IN THE PERMIT.
IF USING AN ASSOCIATION OR GENERIC SWPPP ALREADY SUBMITTED, GIVE NAME:

LCNOI

ATTACH A COPY OF ANY EXISTING LABORATORY DATA YOU HAVE FOR EACH STORM WATER OUTFALL. IF MULTIPLE SAMPLING HAS BEEN PERFORMED, PROVIDE A SUMMARY FOR EACH PARAMETER, INCLUDING SAMPLING DATES AND THE MINIMUM, AVERAGE AND MAXIMUM VALUES.

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.

Ronda J. Powell
Signature¹ (Must be signed by operator when different than owner)

2-18-11
DATE SIGNED

Ronda J. Powell
Printed Name¹

Solid Waste Director (Commerical Class I Rubbish Operator RSO-046)
Title

¹This application shall be signed according to the General Permit, Part V.E., 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 either a principal executive officer, the mayor, or ranking elected official.

After signing, please mail to:

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