

AI: 20240

**MAJOR MODIFICATION FORM
FOR LARGE CONSTRUCTION GENERAL PERMIT
Coverage No. MSR10 3468 County Harrison**



INSTRUCTIONS

Coverage recipients shall notify the Mississippi Department of Environmental Quality 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, only upon receipt of written notification of approval by MDEQ. 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: Ryan Goldin TEL # (228) 539-5039
 COMPANY NAME: Florence Gardens, LLC
 STREET OR P.O. BOX: 123321 Preservation Drive
 CITY: Gulfport STATE: MS ZIP: 39505 E-MAIL: ryan@florencegardens.com
 IS THE APPLICANT DIFFERENT FROM THE CURRENT COVERAGE HOLDER? YES NO

PROJECT INFORMATION

PROJECT NAME: Florence Gardens, Phase XI
 CITY: Gulfport

FACILITY SITE TRIBAL LAND ID (N/A If not applicable): N/A
 LATITUDE: 30 degrees 27 minutes 58.28 seconds LONGITUDE: 89 degrees 3 minutes 22.09 seconds
 LAT & LONG DATA SOURCE (GPS (Please GPS Project Entrance/Start Point) or Map Interpolation): _____
 REDUCTION IN ACREAGE:
 ADDITIONAL ACREAGE TO BE DISTURBED: 12.1 TOTAL PROJECT ACREAGE: 397.12

IS THE PROJECT REROUTING, FILLING OR CROSSING A WATER CONVEYANCE OF ANY KIND? (If yes, contact the U.S. Army Corps of Engineers' Regulatory Branch for permitting requirements.) YES NO

IF THE PROJECT IS A SUBDIVISION OR A COMMERCIAL DEVELOPMENT, HOW WILL SANITARY SEWAGE BE DISPOSED? Check one of the following and attach the pertinent documents.

Existing Municipal or Commercial System. Please attach plans and specifications for the collection system and the associated "Information Regarding Proposed Wastewater Projects" form or approval from County Utility Authority in Hancock, Harrison, Jackson, Pearl River and Stone Counties. If the plans and specifications can not be provided at the time of LCNOI submittal, MDEQ will accept written acknowledgement from official(s) responsible for wastewater collection and treatment that the flows generated from the proposed project can and will be transported and treated properly. The letter must include the estimated flow.

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FOR LATE INQUIRY OF THE NATIONAL BUREAU OF INVESTIGATION

IDENTIFICATION

1. Name of the person being identified: [Illegible]

2. Date of identification: [Illegible]

3. Location of identification: [Illegible]

STATEMENT OF IDENTIFICATION

1. Name of the person being identified: [Illegible]

2. Date of identification: [Illegible]

3. Location of identification: [Illegible]

4. Name of the person making the identification: [Illegible]

5. Signature of the person making the identification: [Illegible]

6. Signature of the person being identified: [Illegible]

IDENTIFICATION OF THE IDENTIFIER

1. Name of the person making the identification: [Illegible]

2. Date of identification: [Illegible]

3. Location of identification: [Illegible]

4. Name of the person making the identification: [Illegible]

5. Signature of the person making the identification: [Illegible]

6. Signature of the person being identified: [Illegible]

7. Signature of the person making the identification: [Illegible]

8. Name of the person making the identification: [Illegible]

9. Date of identification: [Illegible]

10. Location of identification: [Illegible]

11. Signature of the person making the identification: [Illegible]

Collection and Treatment System will be Constructed. Please attach a copy of the cover of the NPDES discharge permit from MDEQ or indicate the date the application was submitted to MDEQ (Date: _____.)

Individual Onsite Wastewater Disposal Systems for Subdivisions Less than 35 Lots. Please attach a copy of the Letter of General Acceptance from the Mississippi State Department of Health or certification from a registered professional engineer that the platted lots should support individual onsite wastewater disposal systems.

Individual Onsite Wastewater Disposal Systems for Subdivisions Greater than 35 Lots. A determination of the feasibility of installing a central sewage collection and treatment system must be made by MDEQ. A copy of the response from MDEQ concerning the feasibility study must be attached. If a central collection and wastewater system is not feasible, then please attach a copy of the Letter of General Acceptance from the State Department of Health or certification from a registered professional engineer that the platted lots should support individual onsite wastewater disposal systems.

INDICATE ANY LOCAL STORM WATER ORDINANCE WITH WHICH THE PROJECT MUST COMPLY:

City of Gulfport 50 yr Storm

NEAREST NAMED RECEIVING STREAM: Fritz Creek

IS RECEIVING STREAM ON MISSISSIPPI'S 303(d) LIST OF IMPAIRED WATER BODIES? (The 303(d) list of impaired waters and TMDL stream segments may be found on MDEQ's web site: http://www.deq.state.ms.us/MDEQ.nsf/page/TWB_Total_Maximum_Daily_Load_Section) YES NO

HAS A TMDL BEEN ESTABLISHED FOR THE RECEIVING STREAM SEGMENT? YES NO

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.

Ryan Goldin

Signature (must be signed by coverage recipient)

6/8/2022

Date

Ryan Goldin
Printed Name

Vice President, Director of Operations
Title

Please submit this form to:

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

Electronically:

<https://www.mdeq.ms.gov/construction-stormwater/>

Revised: 3/9/22

1. The first step in the process of the treatment system will be to determine the type of water to be treated. This is done by the application of the following tests:

2. The second step is to determine the extent of the pollution. This is done by the application of the following tests:

3. The third step is to determine the type of treatment system to be used. This is done by the application of the following tests:

4. The fourth step is to determine the cost of the treatment system. This is done by the application of the following tests:

5. The fifth step is to determine the efficiency of the treatment system. This is done by the application of the following tests:

6. The sixth step is to determine the maintenance of the treatment system. This is done by the application of the following tests:

7. The seventh step is to determine the safety of the treatment system. This is done by the application of the following tests:

8. The eighth step is to determine the flexibility of the treatment system. This is done by the application of the following tests:

9. The ninth step is to determine the adaptability of the treatment system. This is done by the application of the following tests:

10. The tenth step is to determine the reliability of the treatment system. This is done by the application of the following tests:

11. The eleventh step is to determine the durability of the treatment system. This is done by the application of the following tests:

12. The twelfth step is to determine the economy of the treatment system. This is done by the application of the following tests:

13. The thirteenth step is to determine the safety of the treatment system. This is done by the application of the following tests:

14. The fourteenth step is to determine the flexibility of the treatment system. This is done by the application of the following tests:

15. The fifteenth step is to determine the adaptability of the treatment system. This is done by the application of the following tests:

16. The sixteenth step is to determine the reliability of the treatment system. This is done by the application of the following tests:

17. The seventeenth step is to determine the durability of the treatment system. This is done by the application of the following tests:

18. The eighteenth step is to determine the economy of the treatment system. This is done by the application of the following tests:

19. The nineteenth step is to determine the safety of the treatment system. This is done by the application of the following tests:

20. The twentieth step is to determine the flexibility of the treatment system. This is done by the application of the following tests: