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MISSISSIPPI DEPARTMENT OF
ENVIRONMENTAL QUALITY

RECEIVED
FEB 11 2015
Dept. of Environmental Quality

LAND DISPOSAL NOTICE OF INTENT (LDNOI)
FOR COVERAGE UNDER LAND DISPOSAL STORM WATER
GENERAL NPDES PERMIT MSR50 0142
(Number to be assigned by State)

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

NAME OF FACILITY: City of Louisville Class I Rubbish Disposal Facility

FACILITY OWNER: City of Louisville

FACILITY OPERATOR (if different than owner):

Mr. Kenneth Morris, P.E.

(OPERATOR IS RESPONSIBLE FOR PERMIT COMPLIANCE)

IS THIS NOTICE FOR A FACILITY THAT WILL NEED OTHER PERMITS? No
If so, circle which one(s): NPDES or PRETREATMENT (for leachate),
SOLID WASTE, other(s) R1-019

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)? NA

FACILITY CONTACT PERSON: Mr. Kenneth Morris, P.E.

TELEPHONE NUMBER (INCLUDE AREA CODE): 662-773-9201

FACILITY MAILING ADDRESS:

NUMBER AND STREET (P. O. BOX): Post Office Box 510

CITY: Louisville STATE: MS ZIP: 39339

FACILITY LOCATION:

STREET, ROUTE OR OTHER: 3698 Landfill Road

CITY: Louisville COUNTY: Winston ZIP: 39339

ACREAGE OF LAND DISPOSAL SITE: 10.57 acres which includes a 50 foot buffer on all sides.

YEARS OF OPERATION - FROM: 04/28/2014 TO: Present

LIST KNOWN INDUSTRIAL WASTES DISPOSED AT THIS SITE: None

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:

Sedimentation Pond

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

SWPPP City of Louisville Class I Rubbish Disposal Facility

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.

Will Hill
Signature¹ (Must be signed by operator when different than owner)

02/04/2015
DATE SIGNED

WILLIAM A. "WILL" HILL
Printed Name¹

MAYOR
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