PRIME CONTRACTOR CERTIFICATION

By completing and submitting this form to the MDEQ, the prime contractor is certifying that (1) they have operational control over the erosion and sediment control specifications (including the ability to make modifications to such specifications) and (2) have day-to-day operational control of those activities at the site necessary to ensure compliance with the SWPPP and applicable permit conditions. The owner(s) of the property and the prime contractor associated with regulated construction activity on the property have joint and several responsibility for compliance with the permit. Notwithstanding any permit condition to the contrary, the coverage recipient and any person who causes pollution of waters of the State or places waste in a location where they are likely to cause pollution of any waters of the State shall remain responsible under applicable federal and state laws and regulations and applicable permits.

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PRIME CONTRACTOR INFORMATION				
PRIME CONTRACTOR CONTACT PERSON: Harrison Gragory PHONE NUMBER: (62)871-3211 PRIME CONTRACTOR COMPANY: Century Construction ! leality PRIME CONTRACTOR STREET OR P.O. BOX: 705 Robert E. Cee Prine				
PRIME CONTRACTOR CITY: typelo STATE: M3 ZIP: 33802				
OWNER INFORMATION				
OWNER CONTACT PERSON: Poser Applewhite PHONE NUMBER: (728) 217-4135 OWNER COMPANY NAME: Waste Pro USA				
PROJECT INFORMATION				
PROJECT NAME: Kemper County Londfill Phase 4A DESCRIPTION OF CONSTRUCTION ACTIVITY: Excausion, Fresh Control description, Clearing. PHYSICAL SITE ADDRESS (If the physical address is not available indicate the nearest named road. For linear projects, indicate the beginning of the project and identify all counties the project traverses.)				
STREET: 2/21) Hy 16 E CITY: De Kalb, MS 39328 COUNTY: Kemper				
I certify that I am the prime contractor for this project and will comply with all the applicable requirements in the above referenced general NPDES permit. I further 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.				
Prime Contractor Signature Date				
Printed Name Title				
This application shall be signed as follows: For a corporation, by a responsible corporate officer; For a partnership, by a general partner; Chief, Environmental Permits Division MS Department of Environmental Quality Office of Pollution Control				

For a municipal, state or other public facility, by principal executive

officer, mayor, or ranking elected official; Duly Authorized Representative.

RECEIVED P.O. Box 2261

Jackson, Mississippi 39225-2261

AUG 31 2015