



HYDROSTATIC TEST NOTICE OF INTENT (HTNOI)

FOR COVERAGE UNDER MISSISSIPPI'S HYDROSTATIC TEST GENERAL PERMIT GENERAL PERMIT MSG13 0 4 6 8

(Number to be assigned by MDEQ)

INSTRUCTIONS

The Hydrostatic Test Notice of Intent (HTNOI) is for coverage under the Hydrostatic Test General Permit to discharge hydrostatic test water and storm water associated with land disturbing activities of one (1) acre or greater; or for land disturbing activities, which are part of a larger common plan of development or sale that are initially less than one (1) acre but will ultimately disturb one (1) or more acres. Applicant must be the owner or operator. The coverage recipient is responsible for compliance with the conditions of the general permit.

Completed HTNOIs should be filed at least thirty (30) days prior to the commencement of regulated activity. Discharge of hydrostatic test water or storm water from regulated construction activities without written notification of coverage is a violation of state law.

A USGS quadrangle map or copy is a required submittal. The map shall extend at least one-half of a mile beyond the facility/ project property boundary. In the case of linear pipeline projects the map shall extend at least one-half of a mile beyond the pipeline right-of-way. The site location and outfalls must be outlined and labeled. Quad maps can be obtained from the Office of Geology (601-961-5523). If a copy is submitted, provide the name of the quadrangle map that is found in upper right hand corner.

Additional submittals may include the following:

- A site-specific Storm Water Pollution Prevention Plan (SWPPP) developed in accordance with ACT8 of the General Permit, if the project
 includes regulated construction activity disturbing five (5) acres or more
- A description of proposed water treatment additives as outlined in ACT4, S-4 of the General Permit
- Appropriate Section 404 documentation from U.S. Army Corps of Engineers
- Written authorization from the MDEQ, Office of Land and Water, if water withdrawal from surface waters or ground waters is to be used
 for the testing. For information call the Office of Land and Water at 601/961-5202

ALL REQUESTED INFORMATION MUST BE PROVIDED (Answer "NA" if not applicable)

| APPLICANT IS THE: | ✓ OWNER | ✓ OPERATOR | (Must chec | ek one or both) |
|-------------------------|-------------------------|-----------------------|----------------|----------------------|
| | OWN | ER INFORMATION | - | |
| OWNER CONTACT NAME & | POSITION: Brand | i Naughton, Natural R | esource Permit | tting Senior Analyst |
| OWNER COMPANY NAME: | Columbia Gulf Tra | nsmission, LLC | | ***** |
| OWNER STREET (P.O. BOX) | : 5151 San Felipe, | Ste 2500 | | |
| OWNER CITY: Houston | | S | TATE: TX | ZIP: 77056 |
| OWNER PHONE # (INCLUD | E AREA CODE): <u>71</u> | 3-386-3761 | | |

| | OPERATOR INFORMATION | ON | |
|---|--|--|--|
| OPERATOR CONTACT NAME & POS | ITION: Brandi Naughton, Na | itural Resource Pe | ermitting Senior Analyst |
| OPERATOR COMPANY: Columbia (| Gulf Transmission, LLC | | |
| OPERATOR STREET (P.O. BOX): 515 | 51 San Felipe, Ste 2500 | | ette facilità de la compansione della compansion |
| OPERATOR CITY: Houston | | _STATE: _TX | ZIP: 77056 |
| OPERATOR PHONE # (INCLUDE ARI | EA CODE): <u>713-386-3761</u> | | |
| | FACILITY/PROJECT INFORM | ATION | |
| FACILITY/PROJECT NAME: Inverne | ess Compressor Station/ Bi-D | irectional Moda | SIC Code: 4 9 2 2 |
| PIPELINE, STORAGE TANK OR FLO | WLINE BEING TESTED IS: | ✓ NEW | USED |
| IF USED, LIST PRIOR MATERIAL SE | RVICE OF EQUIPMENT: $N/2$ | 4 | |
| IF REGULATED LAND DISTURBING (NOTE: A construction SWPPP must be | | | |
| PHYSICAL SITE ADDRESS (If not ava | ilable, indicate nearest named ro | ad. Linear projects | indicate beginning of project): |
| STREET: Inverness Road | | HTY: Inverness | |
| COUNTY: Humphreys | | ZIP: 38753 | |
| TYPE OF TREATMENT (IF PROVIDE | D): N/A | • | |
| l certify under penalty of law that this document system designed to assure that qualified personn person or persons who manage the system, or the best of my knowledge and belief, true, accuration information, including the possibility of fines and Signature (Must be signed by operator where the system of the | el properly gathered and evaluated to use persons directly responsible for g ute and complete. I am aware that the lor imprisonment for knowing viola | he information submi pathering the informa nere are significant pe | tted. Based on my inquiry of the tion, the information submitted is, to nalties for submitting false |
| Brandi Naughton | | | ce Permitting Sr Analyst |
| Printed Name | | Title | |
| This application shall be signed according For a corporation, by a responsible cor For a partnership, by a general partne For a sole proprietorship, by the proprietorship of the proprietor a municipal, state or other public in | porate officer. r. Ietor. | | ranking elected official. |
| HTNOI forms must be submitted to: | Chief, Environmental Permits I MS Dept of Environmental Qua P.O. Box 2261 | | tion Control |
| | Jackson, Mississippi 39225 | | Revised: 06/01/11 |

OUTFALL INFORMATION

(To be submitted with HTNOI and Major Modification Forms)

INSTRUCTIONS:

- 1. For each outfall, complete the information in the table below (NOTE: Complete the last column of this form, only if it is being submitted with a Major Modification Form).
- 2. All outfalls must be spotted and labeled on a USGS quadrangle map.

| | | | | NEAREST RECEIVING STREAM ² | | | | STATUS OF | | | | | |
|--------|-----------------------|---------------|------------|---------------------------------------|------------|----------------------|-----|------------|-------------------------|--------------|------|-----------------------------|------------------------------------|
| OUTALL | LATITUDE 1 | LONGITUDE 1 | SOURCE OF | | 303 LIS | IDEQ B(D) T? 3 | TME | AS DL?3 | EST. TOTAL DISCHARGE | HARGE ETC. | | EXPECTED TEST DATE(S) | INDICATE WHETHER OUTFALL IS NEW OF |
| NO. | (deg/min/sec) | (deg/min/sec) | FILL WATER | NAME | Yes | No | Yes | No | (MIL GAL) | New | Used | (mm/dd/yr) | EXISTING |
| 001 | 33°18'49.08' <u>1</u> | 90°31'39.18"\ | Municipal | UNT Browns Bayou | | √ | | ✓ | 0.018 | \checkmark | | 02/12/16 | |
| 002 | | | | | | | | | | | | | |
| 003 | | | | | | | • | | | | | | |
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| 007 | | | د | | | | | | | | | | |
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| 011 | | | | | | | | | | | | | |
| 012 | | | | | | | | | | | | | |

Revised: 06/01/11

List the latitude and longitude of its location to the nearest 15 seconds.

Name of the nearest named receiving stream as listed on a USGS Quad Map.

MDEQ's 303(d) List of Impaired Water Bodies and approved TMDLs can be found at: http://www.deq.state.ms.us/MDEQ.nsf/page/TWB_Total_Maximum_Daily_Load_Section