



MAJOR MODIFICATION FORM BY: FOR LARGE CONSTRUCTION GENERAL PERMIT Coverage No. MSR10 7 5 4 5 County Union



INSTRUCTIONS

Coverage recipients shall notify the Mississippi Department of Environmental Qualit (check all that apply). This form should be submitted with a modified Storm Water topographic map, Corps of Engineers Section 404 documentation and wastewater colling.	er Pollution Prevention Plan (SWPPP), updated USGS lection and treatment information, as appropriate.
SWPPP details have been developed and are ready for MDEQ review for subsequent phases of an existing, covered project. "Footprint" identified in the original LCNOI is proposed to be enlarged.	
This form must be signed by the current coverage recipient under Mississippi's Larg of new phases of existing subdivisions must apply for separate permit coverage throughout the coverage recipients are authorized to discharge storm water associated with proposition phases, under the conditions of the General Permit, only upon receipt of written notificated as changes of erosion and sediment controls used, must be in accordance with AC	ugh the submittal of a new complete LCNOI package, sed expansions of existing subdivisions or subsequent cation of approval by MDEQ. All other modifications, T6, S-1 (6) and S-2 (7) of the General Permit.
ALL INFORMATION MUST BE COMPLETED (indicate "N/A" where not applicable)	
COVERAGE RECIPIENT INFOR	MATION
COVERAGE RECIPIENT CONTACT NAME: David A. Roy	TEL#(304) 357-2874
COMPANY NAME: Columbia Gulf Transmission, LLC	
STREET OR P.O. BOX: 1700 MacCorkle Avenue, S.E., PO Box 1273	
CITY: Charleston STATE: WV ZIP: 25314	E-MAIL: david_roy@transcanada.com
PROJECT INFORMATION	N
PROJECT NAME: New Albany Compressor Station	
CITY: New Albany	
ADDITIONAL ACREAGE TO BE DISTURBED: 16.58	OTAL PROJECT ACREAGE: 26.37
I certify under penalty of law that this document and all attachments were prepare with a system designed to assure that qualified personnel properly gathered and exinquiry of the person or persons who manage the system, or those persons directinformation submitted is, to the best of my knowledge and belief, true, accurate an penalties for submitting false information, including the possibility of fine and imprint	etly responsible for gathering the information, the
Signature (must be signed by coverage recipient)	Date
Printed Name	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

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

Signature of Applicant (owner or prime contractor)

David A. Roy

Printed Name

1/22/2018

Date Signed

Vice President, U.S. Natural Gas Pipeline Projects

Title

This application shall be signed 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 principal executive officer, mayor, or ranking elected official

Please submit the LCNOI form to:

Chief, Environmental Permits Division MS Department of Environmental Quality, Office of Pollution Control

P.O. Box 2261

Jackson, Mississippi 39225