AI: 86024 MSR109227

(NUMBER TO BE ASSIGNED BY STATE)

APPLICANT IS THE:	OWNER P	RIME CONTRAC	TOR		
OWNER CONTACT INFORMATION					
OWNER CONTACT PERSON: Jon	Reeves				
OWNER COMPANY LEGAL NAME: Chrisjon Development, LLC					
OWNER STREET OR P.O. BOX: _56	627 Getwell Roa	d, Bldg C, Suite	5		
OWNER CITY: Southaven		_state: MS		z _{IP:} _38672	
OWNER PHONE #: (901) 493-4	491 ow	NER EMAIL: jreev	es@rwllc.ne	et	
PREPARER CONTACT INFORMATION					
IF NOI WAS PREPARED BY SOMEON	NE OTHER THAN	THE APPLICANT			
CONTACT PERSON: Ben Smith					
COMPANY LEGAL NAME: IPD, LI					
STREET OR P.O. BOX: 8180 Airw					
CITY: Southaven	STATI	E: MS	z	_{IP:} _38671	
PHONE # (662) 393-3346	E	MAIL: ben@ipdso	lutions.net		
PRIME CONTRACTOR CONTACT INFORMATION					
PRIME CONTRACTOR CONTACT PERSON: Chris Lamb					
PRIME CONTRACTOR COMPANY LEGAL NAME: Lamb Construction and Equip Services, LLC					
PRIME CONTRACTOR STREET OR P.O. BOX: 3225 Byhalia Road					
PRIME CONTRACTOR CITY: He	rnando	STATE:		_{ZIP:} 38632	
PRIME CONTRACTOR PHONE #: (662) 449-5432 PRIME CONTRACTOR EMAIL: sales@lambequipment.com					
FACILITY SITE INFORMATION					
FACILITY SITE NAME: Southpoint Community P.U.D.					
FACILITY SITE ADDRESS (If the physical address is not available, please indicate the nearest named road. For linear projects indicate the beginning of the project and identify all counties the project traverses.) STREET: Browns Ferry Road and Terry Lane					
CITY: Senatobia	STATE: MS	COUNTY:	Tate	ZIP: 38668	
FACILITY SITE TRIBAL LAND ID	(N/A If not applicab	_{le):} n/a			
LATITUDE: 34 degrees 36 minutes 43 seconds LONGITUDE: 89 degrees 58 minutes 31 seconds					
LAT & LONG DATA SOURCE (GPS (Please GPS Project Entrance/Start Point) or Map Interpolation): Map Interpolation					
TOTAL ACREAGE THAT WILL BE DISTURBED 1: 39.7					

IS THIS PART OF A LARGER COMMON PLAN OF DEVELOPMENT? YES	NO V				
IF YES, NAME OF LARGER COMMON PLAN OF DEVELOPMENT: 1/2 AND PERMIT COVERAGE NUMBER: MSR10					
ESTIMATED CONSTRUCTION PROJECT START DATE: 2024-05-28 YYYY-N					
ESTIMATED CONSTRUCTION PROJECT END DATE: 2026-05-28 YYYY-N					
DESCRIPTION OF CONSTRUCTION ACTIVITY: Clearing, grubbing, grading and intrastructure install	lation				
PROPOSED DESCRIPTION OF PROPERTY USE AFTER CONSTRUCTION HAS BEEN COMPLETED: Subdivsion including a commercial lot					
SIC Code: 1521 NAICS Code 236115					
NEAREST NAMED RECEIVING STREAM: Bonner 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 http://www.deq.state.ms.us/MDEQ.nsf/page/TWB_Total_Maximum_Daily_Load_Section)	NQ√				
HAS A TMDL BEEN ESTABLISHED FOR THE RECEIVING STREAM SEGMENT? YES	Nd✓				
FOR WHICH POLLUTANT:	—				
ARE THERE RECREATIONAL STREAMS, PRIVATE/PUBLIC PONDS OR LAKES YES WITHIN ½ MILE DOWNSTREAM OF PROJECT BOUNDRY THAT MAY BE IMPACTED BY THE CACTIVITY?	NO V				
EXISTING DATA DESCRIBING THE SOIL (for linear projects please describe in SWPPP): Collins silt loam, Grenada silt loam, Grenada gullied, Memphis gullied and Loring-Grenad silt loams					
WILL FLOCCULANTS BE USED TO TREAT TURBIDITY IN STORM WATER?	Nd✓				
IF YES, INDICATE THE TYPE OF FLOCCULANT. ANIONIC POLYACRYLIMIDE (PACTION OTHER					
IF YES, DOES THE SWPPP DESCRIBE THE METHOD OF INTRODUCTION, THE LOCATION OF AND THE LOCATION OF WHERE FLOCCULATED MATERIAL WILL SETTLE?	INTRODUCTION				
IS A SDS SHEET INCLUDED FOR THE FLOCCULATE? YES	Nd✓				
WILL THERE BE A 50 FT BUFFER BETWEEN THE PROJECT DISTURBANCE AND THE WATER STATE?	S OF THE NO				
IF NOT, PROVIDE EQUIVALENT CONTROL MEASURES IN THE SWPPP.					

¹Acreage for subdivision development includes areas disturbed by construction of roads, utilities and drainage. Additionally, a housesite of at least 10,000 ft² per lot (entire lot, if smaller) shall be included in calculating acreage disturbed.

DOCUMENTATION OF COMPLIANCE WITH OTHER REGULATIONS/REQUIREMENTS COVERAGE UNDER THIS PERMIT WILL NOT BE GRANTED UNTIL ALL OTHER REQUIRED MDEQ PERMITS AND APPROVALS ARE SATISFACTORILY ADDRESSED

IS LCNOI FOR A FACILITY THAT WILL REQUIRE OTHER PERMITS?	
	YES NO V
IF YES, CHECK ALL THAT APPLY: AIR HAZARDOUS WASTE	PRETREATMENT
WATER STATE OPERATING INDIVIDUAL NPDES	OTHER:
IS THE PROJECT REROUTING, FILLING OR CROSSING A WATER CONVEYAL OF ANY KIND? (If yes, contact the U.S. Army Corps of Engineers' Regulatory Branch	NCE YES NO V
IF THE PROJECT REQUIRES A CORPS OF ENGINEER SECTION 404 PERMIT, I DOCUMENTATION THAT:	PROVIDE APPROPRIATE
-The project has been approved by individual permit, or -The work will be covered by a nationwide permit and NO NOTIFICATION to the Cor-The work will be covered by a nationwide or general permit and NOTIFICATION to the covered by a nationwide or general permit and NOTIFICATION to the covered by a nationwide or general permit and NOTIFICATION to the covered by a nationwide or general permit and NOTIFICATION to the covered by a nationwide or general permit and NOTIFICATION to the covered by a nationwide or general permit and NOTIFICATION to the covered by a nationwide or general permit and NOTIFICATION to the covered by a nationwide or general permit and NOTIFICATION to the covered by a nationwide or general permit and NOTIFICATION to the covered by a nationwide or general permit and NOTIFICATION to the covered by a nationwide or general permit and NOTIFICATION to the covered by a nationwide or general permit and NOTIFICATION to the covered by a nationwide or general permit and NOTIFICATION to the covered by a nationwide or general permit and NOTIFICATION to the covered by a nationwide or general permit and NOTIFICATION to the covered by a nationwide or general permit and NOTIFICATION to the covered by t	rps is required, or the Corps is required
IS THE PROJECT REROUTING, FILLING OR CROSSING A STATE WATER COLOF ANY KIND? (If yes, please provide an antidegradation report.)	NVEYANCE YES NO 🗸
IS A LAKE REQUIRING THE CONSTRUCTION OF A DAM BEING PROPOSED? (If yes, provide appropriate approval documentation from MDEQ Office of Land and V	YES NO NO Water, Dam Safety.)
IF THE PROJECT IS A SUBDIVISION OR A COMMERCIAL DEVELOPMENT, HOBE DISPOSED? Check one of the following and attach the pertinent documents.	OW WILL SANITARY SEWAGE
Existing Municipal or Commercial System. Please attach plans and specification associated "Information Regarding Proposed Wastewater Projects" form or app Hancock, Harrison, Jackson, Pearl River and Stone Counties. If the plans and specific of LCNOI submittal, MDEQ will accept written acknowledgement from official(secollection and treatment that the flows generated from the proposed project can approperly. The letter must include the estimated flow.	roval from County Utility Authority in ations can not be provided at the time s) responsible for wastewater
Collection and Treatment System will be Constructed. Please attach a copy of the permit from MDEQ or indicate the date the application was submitted to MDEQ	e cover of the NPDES discharge ((Date:)
Individual Onsite Wastewater Disposal Systems for Subdivisions Less than 35 Lo of General Acceptance from the Mississippi State Department of Health or certif engineer that the platted lots should support individual onsite wastewater disposa	ication from a registered professional
Individual Onsite Wastewater Disposal Systems for Subdivisions Greater than 35 feasibility of installing a central sewage collection and treatment system must be response from MDEQ concerning the feasibility study must be attached. If a cen is not feasible, then please attach a copy of the Letter of General Acceptance from certification from a registered professional engineer that the platted lots should s disposal systems.	made by MDEQ. A copy of the straightful collection and wastewater system the State Department of Health or
INDICATE ANY LOCAL STORM WATER ORDINANCE (I.E. MS4)WITH WHICH	THE PROJECT MUST COMPLY:
City of Senatobia	
1	

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.

Signature of Applicant (owner or prime contractor)

Date Signed Title

¹This 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

Electronically:

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

Revised 3/23/22