



May 7, 2024

Chief, Environmental Permits Division  
MS Department of Environmental Quality, Office of Pollution Control  
P.O. Box 2261  
Jackson, Mississippi 39225

Re: **Groundwater Discharge Permit  
Application (MSG12)**  
Circle K # 2723458  
1000 Cedar Lake Road  
Biloxi, Harrison County, Mississippi 39232  
**State ID No. 9731**

Dear Sir or Madam,

Jones Environmental, Inc. (JEI) is pleased to submit the enclosed Discharge Permit for the above referenced site as requested by the Mississippi Department of Environmental Quality (MDEQ). Please contact Mr. Joel Barron at 469-642-7992 with questions regarding the following document.

I have reviewed this document in sufficient depth to accept full responsibility for its contents related to the geologic discussion/data/information contained herein.

Sincerely,

A handwritten signature in blue ink that reads "Joel Barron".

Joel Barron, RPG  
Senior Professional Expert  
Jones Environmental, Inc.

Circle K Stores, Inc.  
Circle K Store #2723458  
1000 Cedar Lake Road  
Biloxi, Harrison County, Mississippi  
39532



Joel Barron, PG  
Jones Environmental, Inc.  
708 Milam Street, Suite 100  
Shreveport, LA 71101  
Office: (318) 226-8444

## **GROUNDWATER DISCHARGE PERMIT**

**CIRCLE K #2723458**  
**1000 CEDAR LAKE ROAD**  
**BILOXI (HARRISON COUNTY) MISSISSIPPI 39232**  
***FACILITY ID # 9599***

### **Section 1.0 – Introduction**

Circle K Store #3458 is currently an active Leaking Underground Storage Tank (LUST) site with the Mississippi Department of Environmental Quality (MDEQ). Several soil borings and monitor wells exceed MDEQ cleanup levels for soil and groundwater. Jones Environmental, Inc. is currently drafting a Turnkey Remedial Action Plan (TRAP) which addresses the elevated soil and groundwater concentrations.

The proposed remedial action method is Dynamic Groundwater Recirculation combined with Dual Phase Extraction. This groundwater recirculation system consists of multiple injection/recovery wells, utilized for circulation of treated groundwater, surfactant, and oxidizer (if needed). Dynamic groundwater recirculation will be utilized to flush contaminants located within upper clayey sediments, overlying the groundwater bearing unit composed of poorly graded sand, into the recovery wells for treatment. Recovery wells containing submersible pumps will be used for extraction of treated water and surfactant. These submersible pumps will be utilized to direct recovered groundwater through an onsite treatment system consisting of an oil water separator, air stripper and Granular Activated Carbon (GAC) vessels.

A portion of the treated groundwater, approximately 40 gallons per minute, will be injected into the subsurface; the remaining portion will be discharged to the POTW owned by the City of Biloxi, Mississippi. Prior to any discharge of treated water, a groundwater discharge permit, obtained under Mississippi's Underground Storage Tank Groundwater Remediation General Permit (MSG12). The application for the preceding permit is attached as Appendix A.

### **Section 2.0 – Outfall Map**

Provided with the application is a portion of a quadrangle map named "Biloxi Quadrangle, Mississippi, 7.5-Minute Series" and is attached as Appendix B with a half-mile outfall radius.

### **Section 3.0 – Contiguous Landowner Notifications**

As required by the MDEQ, all contiguous landowners were sent documentation, the attached Contiguous Landowner Notification Form in Appendix C, detailing the site location and a brief description of work to be undertaken. Owner addresses used for notification were based on publicly available government land records. All signed return receipts received are included with the form. In lieu of signatures acknowledging receipt, delivery attempts will be provided via tracking number information.

Circle K Stores, Inc.  
Circle K Store #2723458  
1000 Cedar Lake Road  
Biloxi, Harrison County, Mississippi  
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#### **Section 4.0 – Proposed Water Treatment Chemicals**

As stated in the Notice of Intent Form, a 2-3% concentration of Ivey-Sol is the proposed treatment chemical for this remedial system. It is administered as an injection directly into wells to treat hydrocarbon contamination from fuels. It is unlikely that this chemical makes it into the influent, much less the discharged effluent. Direct influent treatment is performed purely mechanically as the water passes through an air scrubber, Oil-Water Separator (OWS), bag filters and activated carbon vessels to remove influent concentrations prior to discharging as effluent. An MSDS for Ivey-Sol 103 is attached as Appendix D.

Circle K Stores, Inc.  
Circle K Store #2723458  
1000 Cedar Lake Road  
Biloxi, Harrison County, Mississippi  
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Office: (318) 226-8444

# **Appendix A**

MSG12 Permit Application

AI: 86445

MSG120284



MISSISSIPPI DEPARTMENT OF  
ENVIRONMENTAL QUALITY

Rec'd via email:  
05/09/2024

# UNDERGROUND STORAGE TANK GROUNDWATER REMEDIATION NOTICE OF INTENT (USTNOI)

For Coverage under Mississippi's Underground Storage Tank (UST)  
Groundwater Remediation General Permit  
General Permit MSG12 **0284** \_

(NUMBER TO BE ASSIGNED BY STATE)

## INSTRUCTIONS

Applicant must be the owner or operator of the remediation system. To avoid unnecessary delays, please be sure that the USTNOI is signed in accordance with permit ACT9, T-7 of the General Permit. The owner or operator that receives coverage is responsible for permit compliance. File at least 30 days prior to proposed discharge.

### Required Submittals with the USTNOI Include:

- A USGS quadrangle map or copy extending at least one-half of a mile beyond the site's property boundary. The site location and outfalls must be outlined or highlighted. Quad maps can be obtained from the Office of Geology at 601-961-5523. If a copy is submitted, provide the name of the quadrangle map that is found in upper right hand corner.
- A letter of approval or denial from an available POTW or Wastewater Collection Authority (see permit ACT4, S-6 and MDEQ Wastewater Regulations, Chapter One, Part I.C.1.a.).
- Certified-return receipts from contiguous landowner notifications (not required if the remediation system was operating under a previous permit or coverage - see permit ACT4, S-7).
- A list of water treatment chemicals proposed to be used. Please submit the following information for each specific chemical: name and composition of the additive, discharge concentration, dosage addition rates, frequency of use, EPA registration (if applicable), aquatic species toxicological data and Material Safety Data Sheet (MSDS).

**ALL INFORMATION REQUESTS MUST BE ANSWERED** (answer "NA" if not applicable)

O.C

THE APPLICANT IS  OWNER  OPERATOR (please check one or both)

### OWNER INFORMATION

Owner Contact Name: Joel Barron Position: Project Manager  
Owner Company Name: Jones Environmental, Inc.  
Owner Street (P.O. Box): 107 Park West Drive  
Owner City: Scott State: LA Zip: 70583  
Owner Phone Number (include area code): (337) 232-0011

### OPERATOR INFORMATION (if different than owner)

Operator Contact Name: \_\_\_\_\_ Position: \_\_\_\_\_  
Operator Company Name: \_\_\_\_\_  
Operator Street (P.O. Box): \_\_\_\_\_  
Operator City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Operator Phone Number (include area code): \_\_\_\_\_

### PROJECT INFORMATION

Project Name: Circle K Store #2723458  
Mississippi Groundwater Protection Trust Fund ID No. (if applicable): \_\_\_\_\_  
Physical Site Address (if not available indicate the nearest named road):  
Street: 1000 Cedar Lake Road City: Biloxi  
County: Harrison Zip: 39532  
Latitude: 30 degrees 26 minutes 49 seconds Longitude: 88 degrees 56 minutes 03 seconds  
Method Used to Determine Lat. & Long. (GPS (Please GPS Facility Entrance) or Map Interpolation): Map Interpolation

## WASTEWATER DISCHARGE INFORMATION

Where is the remediated groundwater proposed to be discharged?  State Waters  POTW/Collection System

Name of Nearest Receiving Stream: Unnamed tributary of the Tchoutacabouffa River.

Name of POTW: Harrison County Utility Authority (East Biloxi POW)

POTW contact, title and telephone number: \_\_\_\_\_

John L Wilson, Executive Director, 228-236-6446

Name of Wastewater Collection Authority (if different from POTW): City of Biloxi

Wastewater Collection Authority contact, title and telephone number: \_\_\_\_\_

Christy LeBatard, Director of Engineering, 228-435-6269, clebatard@biloxi.ms.us


Proposed rate of flow (gallons/day): 30,000

Describe type of treatment: Influent (treated with 2-3% Ivey-Sol 103) passes through an OWS, air-stripper,

bag filters and activated carbon vessels to remove all influent concentrations prior to discharge to POTW.

## CERTIFICATION

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<sup>1</sup> (Must be signed by operator when different than owner)

2/12/24

Date Signed

Joel Barron

Printed Name<sup>1</sup>

Project Manager

Title

<sup>1</sup>This application shall be signed according to the General Permit, ACT9, T-7 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, the mayor, or ranking elected official.

USTNOI forms must be submitted to:

Chief, Environmental Permits Division  
MS Dept of Environmental Quality, Office of Pollution Control  
P.O. Box 2261  
Jackson, Mississippi 39225

Revised: April 6, 2011

# POTW AND WASTEWATER COLLECTION AUTHORITY NOTIFICATION AND APPROVAL FORM



## INSTRUCTIONS

The Mississippi Department of Environmental Quality (MDEQ) must receive approval from the local POTW and Wastewater Collection Authority (if different entities) in order for the applicant to obtain coverage under Mississippi's Underground Storage Tank Groundwater Remediation General Permit (see permit ACT4, S-6). Once both sections of the form have been completed, it shall be submitted to the address below. Coverage is required prior to discharging remediated groundwater to a POTW or Wastewater Collection Authority. If you have any questions, please contact the Service and Miscellaneous Industries Branch at 601/961-5171.

## APPLICANT (please print or type)

Joel Barron \_\_\_\_\_ [name of applicant] is applying for coverage under Mississippi's Underground Storage Tank Groundwater Remediation General Permit (**copy attached**). Remediated groundwater, associated with a leaking underground petroleum storage tank, is proposed to be discharged from a site located at 1000 Cedar Lake Road, Biloxi, Harrison County, Mississippi 39532 [complete address with county]. Approximately 30,000 \_\_\_\_\_ [gallons per day] of treated groundwater will be discharged to Harrison County Utility Authority \_\_\_\_\_ [name of local POTW or Wastewater Collection Authority]. The treated groundwater will be discharged in accordance with the conditions, requirements and limitations of Mississippi's Underground Storage Tank Groundwater Remediation General Permit.

## POTW and WASTEWATER COLLECTION AUTHORITY APPROVAL

I certify that I am a duly authorized representative of this POTW (or Collection Authority) and directly responsible for managing daily operations. I am familiar with the requirements of the above referenced General Permit and acknowledge that, by signing this form, I am providing MDEQ with written approval of this proposed discharge to our treatment works.

<p><u><i>John L. Wilson</i></u> POTW Authorized Signature</p> <p><u>John L. Wilson</u> Printed Name</p> <p><u>EXECUTIVE DIRECTOR</u> Title</p> <p><u>2/22/24</u>      <u>228-236-6446</u> Date Signed      Daytime Telephone</p>	<p><u><i>Christy LeBatard</i></u> Collection Authority Authorized Signature</p> <p><u>Christy LeBatard</u> Printed Name</p> <p><u>Director of Engineering</u> Title</p> <p><u>02/15/2024</u>      <u>228-435-6269</u> Date Signed      Daytime Telephone</p>
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This form shall be submitted to: Chief, Environmental Permits Division  
MS Dept of Environmental Quality, Office of Pollution Control  
P.O. Box 2261  
Jackson, Mississippi 39225

Revised: April 6, 2011



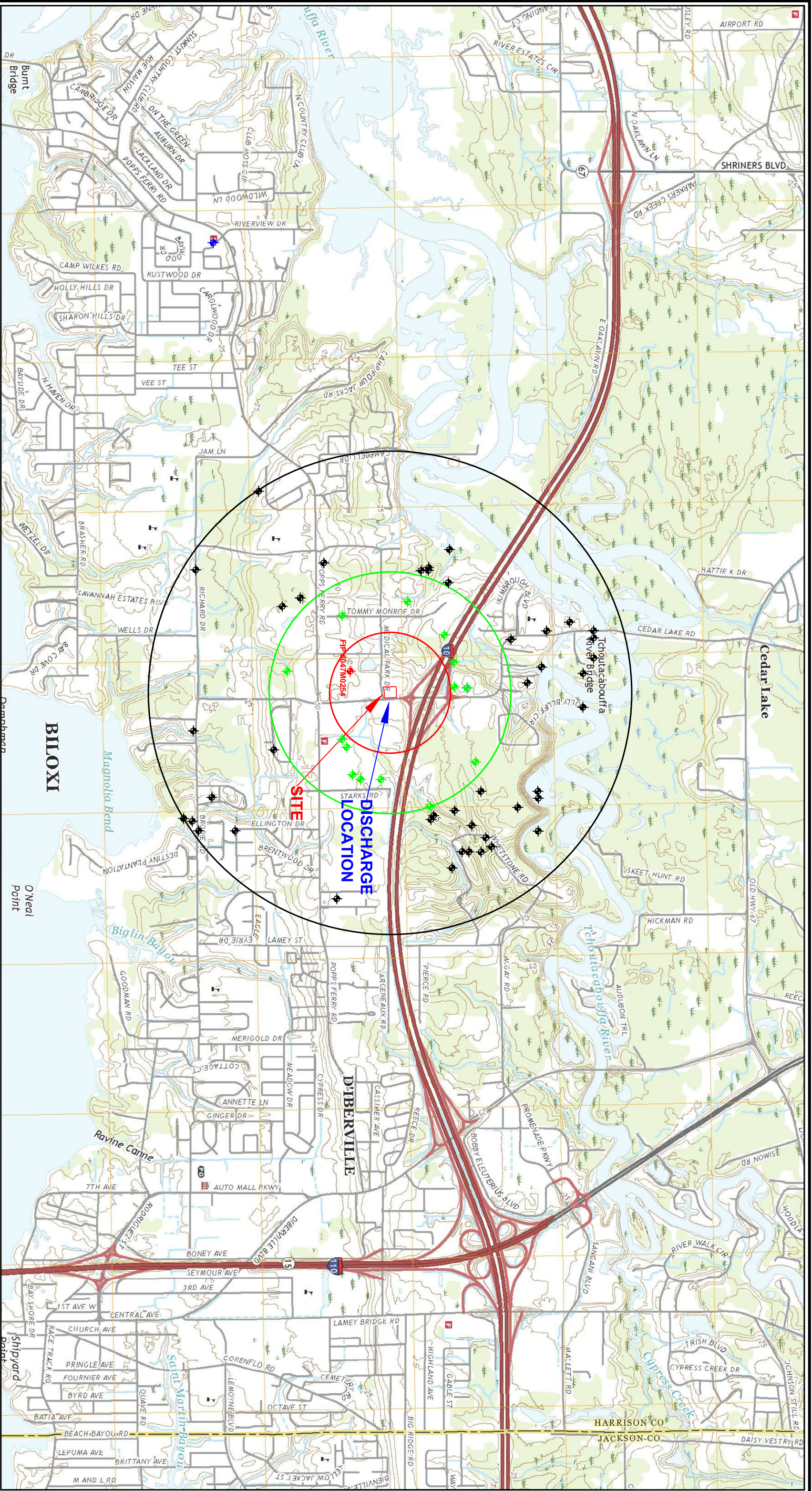
Circle K Stores, Inc.  
Circle K Store #2723458  
1000 Cedar Lake Road  
Biloxi, Harrison County, Mississippi  
39532



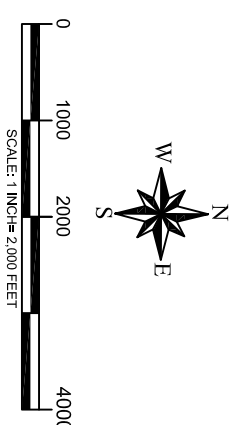
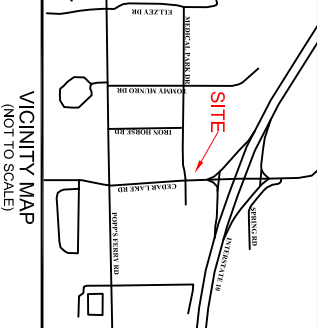
Joel Barron, PG  
Jones Environmental, Inc.  
708 Milam Street, Suite 100  
Shreveport, LA 71101  
Office: (318) 226-8444

## **Appendix B**

### Site Outfall Map



**TURNKEY REMEDIAL ACTION  
DISCHARGE LOCATION MAP  
DECEMBER, 2023**



SOURCE: USGS 7.5 MINUTE TOPOGRAPHIC MAP- HOT SPRINGS SOUTH  
 QUADRANGLE: HOT SPRINGS NORTH QUADRANGLE: MOUNTAIN PINE  
 QUADRANGLE: HEMPWALLACE QUADRANGLE: ARKANSAS 2020.

LEGEND	
	WOODLAND
	WOODED MARSH OR SWAMP
	LAND SUBJECT TO INUNDATION
	PERENNIAL LAKE/POND
	INTERMITTENT LAKE/POND
	INTERMITTENT STREAM
	PERENNIAL STREAM
	TOPOGRAPHIC CONTOUR
	0.25-MILE RADIUS
	0.5-MILE RADIUS
	1.0 - MILE RADIUS
	REGISTERED WELL - < 0.25 MILES
	REGISTERED WELL - < 0.50 MILES
	REGISTERED WELL - < 1.00 MILES

**JONES** ENVIRONMENTAL

DALLAS REGIONAL OFFICE  
 207 HUFFINES BLVD, STE C  
 LEWISVILLE, TEXAS 75056  
 OFFICE: (469) 942-9324

**FIGURE 1**

**CIRCLE K STORES, INC.**  
 CIRCLE K STORE #273458  
 MDEO FACILITY ID #9731  
 1000 CEDAR LAKE ROAD  
 BILOXI, HARRISON COUNTY, MISSISSIPPI 39232

Circle K Stores, Inc.  
Circle K Store #2723458  
1000 Cedar Lake Road  
Biloxi, Harrison County, Mississippi  
39532



Joel Barron, PG  
Jones Environmental, Inc.  
708 Milam Street, Suite 100  
Shreveport, LA 71101  
Office: (318) 226-8444

## **Appendix C**

Contiguous Landowner Notification and Receipts

**CONTIGUOUS LANDOWNER NOTIFICATION OF  
CORRECTIVE ACTION AND SUBSEQUENT DISCHARGE  
OF TREATED GROUNDWATER DUE TO LEAKING  
UNDERGROUND STORAGE TANK(S)**  
(see ACT4, S-7 of the USTGP)



Underground storage tanks located at 1000 Cedar Lake Road, Biloxi, Harrison County, Mississippi 39532  
\_\_\_\_\_ [street address with city and county]

have been determined to have released motor fuel. In order to protect the environment and public health, a cleanup process must be started. The cleanup involves bringing a trailer contained groundwater treatment system to the site, pumping out the contaminated groundwater, treating it and discharging the treated water into the city wastewater sewer to be further treated or, in rare cases, to State waters. The recovered fuel is disposed at an offsite permitted facility. The time a unit is on site averages approximately three years.

Jones Environmental, Inc. [applicant's name]

201 Huffines Blvd, Suite C, Lewisville, Texas 75056 [address]

(469) 942-9324 [phone number] is proposing to begin the cleanup process and discharge treated

groundwater to Harrison County Utility Authority [name of

receiving stream or Publicly Owned Treatment Works or Wastewater Collection Authority]. This

notification is to provide you with an opportunity to comment to the Mississippi Department of

Environmental Quality Permit Board before the Board makes a final decision regarding the matter. No

discharge of treated groundwater will occur unless the Board grants coverage of this activity under the

General Permit for Underground Storage Tank Groundwater Remediation. This notice has been sent to you

by Certified Mail - Return Receipt Requested. If you have no comments regarding this proposed facility, no

response is necessary and the permitting process will continue. If you have any comments, they must be

received by the Mississippi Department of Environmental Quality within 10 days of receipt of this

correspondence. **The Department of Environmental Quality is limited in its review of this project to**

**those environmental issues in which statutory authority has been given.** If you have any questions you

may contact the Service and Miscellaneous Branch of MDEQ at (601) 961-5171. Any comments relative to

zoning or economic and social impacts are within the jurisdiction of local zoning and planning authorities

and should be addressed to those authorities. Comments are to be mailed to the following address:

**Chief, Environmental Permits Division  
MS Department of Environmental Quality, Office of Pollution Control  
P. O. Box 2261  
Jackson, Mississippi 39225**

Revised: April 6, 2011

Tracking Number:

9589071052700281295116

Copy Add to Informed Delivery

**Latest Update**

Your item arrived at our COPPELL TX DISTRIBUTION CENTER origin facility on April 7, 2024 at 7:42 am. The item is currently in transit to the destination.

Get More Out of USPS Tracking:

USPS Tracking Plus®

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CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Gulfport, MS 39506

Certified Mail Fee	\$4.40
Extra Services & Fees (check box, add fee as appropriate)	\$3.65
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage \$0.68

Total Postage and Fees \$8.73

0057  
9

Postmark  
Here

02/23/2024

Sent To

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

**In Transit from Origin Processing**

**Arrived at USPS Regional Origin Facility**

COPPELL TX DISTRIBUTION CENTER  
April 7, 2024, 7:42 am

**In Transit to Next Facility**

April 6, 2024

**Arrived at USPS Regional Destination Facility**

JACKSON MS DISTRIBUTION CENTER  
April 5, 2024, 1:15 pm

**Reminder to pick up your item before March 12, 2024**

GULFPORT, MS 39506  
March 3, 2024

**Available for Pickup**

EAST STATION  
363 COURTHOUSE RD  
GULFPORT MS 39507-9998  
M-F 0830-1700; SAT 0930-1200  
February 27, 2024, 6:03 am

**Arrived at Post Office**

GULFPORT, MS 39507  
February 27, 2024, 6:01 am

**Arrived at USPS Regional Destination Facility**

GULFPORT MS DISTRIBUTION CENTER  
February 26, 2024, 6:54 pm

**Arrived at USPS Regional Destination Facility**

MOBILE AL DISTRIBUTION CENTER ANNEX  
February 25, 2024, 12:41 pm

**Arrived at USPS Regional Origin Facility**

COPPELL TX DISTRIBUTION CENTER  
February 23, 2024, 9:08 pm

**USPS in possession of item**

LEWISVILLE, TX 75057  
February 23, 2024, 3:53 pm

Hide Tracking History

9589 0710 5270 0281 2951 16

Tracking Number:

9589071052700281295109

Copy  Add to Informed Delivery

Latest Update

Your item was delivered to the front desk, reception area, or mail room at 10:55 am on March 1, 2024 in SLIDELL, LA 70458.

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Delivered

Delivered, Front Desk/Reception/Mail Room

SLIDELL, LA 70458

March 1, 2024, 10:55 am

See All Tracking History

What Do USPS Tracking Statuses Mean?

U.S. Postal Service™  
CERTIFIED MAIL® RECEIPT  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Slidell, LA 70458

Certified Mail Fee	\$4.40
Extra Services & Fees (check box, add fee as appropriate)	\$3.65
<input type="checkbox"/> Return Receipt (hardcopy)	\$10.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

0057  
9

Postmark  
Here

Postage \$0.68

02/23/2024

Total Postage and Fees \$8.73

Sent To

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

9589 0710 5270 0281 2951 09

Retail

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Raymond Masker III  
683 Old Spanish Trail  
Slidell, LA 70458



9590 9402 7588 2098 4279 67

2. Article Number (Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *CP Biloski*

Agent  
 Addressee

B. Received by (Printed Name)

*Biloski*

C. Date of Delivery

*3-1-24*

D. Is delivery address different from item 1?  Yes  
If YES, enter delivery address below:  No

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

Tracking Number:

9589071052700281295123

Copy  Add to Informed Delivery

Latest Update

Your item was picked up at the post office at 1:54 pm on March 5, 2024 in PASCAGOULA, MS 39567.

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Delivered

Delivered, Individual Picked Up at Post Office

PASCAGOULA, MS 39567

March 5, 2024, 1:54 pm

See All Tracking History

What Do USPS Tracking Statuses Mean?

U.S. Postal Service™  
CERTIFIED MAIL® RECEIPT  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Pascagoula, MS 39568

Certified Mail Fee	\$4.40
Extra Services & Fees (check box, add fee appropriate)	\$3.65
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage	\$0.68
Total Postage and Fees	\$8.73

0057  
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Postmark  
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02/23/2024

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Street and Apt. No., or PO Box No.

City, State, ZIP+4®

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

9589 0710 5270 0281 2951 23

retail  
TION

COMPLETE THIS SECTION ON DELIVERY

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

Article Addressed to:

Leake Medical Plaza LLC  
2909 Magnolia St, P.O. Box 306  
Pascagoula, MS 39568



9590 9402 7588 2098 4282 54

2. Article Number (Transfer from service label)

A. Signature

X *[Signature]*

Agent  
 Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?  Yes  
If YES, enter delivery address below:  No

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

Tracking Number:

9589071052700281295079

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**Latest Update**

Your package will arrive later than expected, but is still on its way. It is currently in transit to the next facility.

Get More Out of USPS Tracking:

USPS Tracking Plus®

Delivered

Out for Delivery

Preparing for Delivery

**Moving Through Network**

**In Transit to Next Facility, Arriving Late**

February 27, 2024

**Arrived at USPS Regional Origin Facility**

COPPELL TX DISTRIBUTION CENTER

February 23, 2024, 9:07 pm

[See All Tracking History](#)

9589 0710 5270 0281 2950 79

**U.S. Postal Service™  
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For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Norcross, GA 30071

Certified Mail Fee	\$4.40
Extra Services & Fees (check box, add fee as appropriate)	\$3.65
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage \$0.68

Total Postage and Fees \$8.73

0057  
9

Postmark  
Here

02/23/2024

Sent To

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions



Tracking Number:

9589071052700281295093

Copy  Add to Informed Delivery

**Latest Update**

Your item was delivered to an individual at the address at 8:59 am on February 28, 2024 in WAYNESBORO, MS 39367.

Get More Out of USPS Tracking:

USPS Tracking Plus®

**Delivered**

Delivered, Left with Individual

WAYNESBORO, MS 39367

February 28, 2024, 8:59 am

See All Tracking History

What Do USPS Tracking Statuses Mean?

9589 0710 5270 0281 2950 93

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Waynesboro, MS 39367

**OFFICIAL USE**

Certified Mail Fee	\$4.40	0057
Extra Services & Fees (check box, add fee \$1.00/minute)	\$3.65	9
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	Postmark Here
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.68	02/23/2024
<b>Total Postage and Fees</b>	<b>\$8.73</b>	

Sent To  
Street and Apt. No., or PO Box No.  
City, State, ZIP+4®

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:  
Clark Properties, LLC  
720 Station St  
Waynesboro, MS 39363

2. Article Number (Transfer from service label)  
9590 9402 7588 2098 4279 74

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 *Laura Wattle*  Agent  Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1?  Yes  
If YES, enter delivery address below:  No

3. Service Type

<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Collect on Delivery Restricted Delivery	
<input type="checkbox"/> Insured Mail	
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	

PS Form 3811, July 2020 PSN 7530-02-000-9053

Circle K Stores, Inc.  
Circle K Store #2723458  
1000 Cedar Lake Road  
Biloxi, Harrison County, Mississippi  
39532



Joel Barron, PG  
Jones Environmental, Inc.  
708 Milam Street, Suite 100  
Shreveport, LA 71101  
Office: (318) 226-8444

## **Appendix D**

Treatment Chemical MSDS

# SAFETY DATA SHEET

SDS # 181019-01

Ivey-sol® Surfactant Remediation Technology

Ivey-sol® Formulations: 103, 106 and 108

## 1. Identification

Product identifier: Ivey-sol® 103, 106, 108  
 Other means of identification: Not applicable  
 Recommended use: Remediation surfactant  
 Restriction on use: Not applicable  
 Manufacturer/Supplier Address: Ivey International Inc.  
 Unit 7, 19122-27 Avenue, Surrey, BC Canada V3Z 5T1  
 Emergency telephone number: Tel: +1 (604) 538-1168 (Not available 24 hours)  
 Toll Free: +1 800 246-2744

## 2. Hazard Identification

WHMIS 2015/OSHA Hazcom 2012/GHS Classification:

- Serious Eye Damage/Irritation Category 2
- Skin Corrosion/Irritation Category 3

Label elements:

Signal word: Warning Pictograms: Hazard statements:

H316 – May causes mild skin irritation.

H319 – may causes eye irritation.



Precautionary Statements:

P264 - Wash contacted areas thoroughly after handling.

P280 - Wear eye protection.

P305/P351/P338 - If In Eyes: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do so. Continue rinsing.

P332/P313 - If skin irritation occurs: Get medical advice/attention.

P337/P313 - If eye irritation persists: Get medical advice/attention

## 3. Composition / Information on Ingredients

Chemical Name	CAS No.	Concentration (v/v)	Other Identifiers
Biodegradable Non-ionic Surfactant 1	Proprietary	1-10%	Not applicable
Biodegradable Non-ionic Surfactant 2	Proprietary	1-10%	Not applicable
Biodegradable Non-ionic Surfactant 3	Proprietary	1-10%	Not applicable
Biodegradable Non-ionic Surfactant 4	Proprietary	1-10%	Not applicable
Biodegradable Non-ionic Surfactant 5	Proprietary	1-10%	Not applicable
Biodegradable Non-ionic Surfactant 6	Proprietary	1-10%	Not applicable



Preservative	4080-31-3	<90%	Food Grade (Optional)
Scent	8016	<1%	Optional
Water	7732-18-5	<90%	Not applicable

*Regulatory Note: Chemical names, CAS numbers and actual concentrations have been withheld as part of a confidential business information claim with HMIRA Registry #11724 filed on 2017-07-17*

#### 4. First-aid Measures

- Inhalation:** No adverse effects anticipated by this route when handled according to section 7 of document. However, if necessary, move person to fresh air.
- Skin contact:** Generally will not irritate skin. Wash contact areas with soap and water. If irritation persist, seek medical attention.
- Eye contact:** May cause eye irritation. Flush eyes with plenty of water for at least 15 minutes, remove contact lenses if present and easy to do so. If irritation persists, seek medical attention.
- Ingestion:** Do NOT induce vomiting. Never give anything by mouth to an unconscious person. Rinse mouth with water. If necessary, seek medical attention.

Most Important Symptoms and Effects, Acute and Delayed

Acute Symptoms:

**Eye Contact:** May be irritating to the eyes. Occasional contact through splashing is not expected to affect the eyes. If irritation occurs, effect will be transient.

Chronic Symptoms: Not Applicable

Immediate Medical Attention and Special Treatment: Not Applicable

#### 5. Fire-Fighting Measures

Suitable extinguishing media: Not flammable. Use extinguishing media for surrounding fire.

Unsuitable extinguishing media: Not applicable

Specific hazards arising from the hazardous product: Not available

Special protective equipment for fire-fighters: Not available

#### 6. Accidental release measures

Personal Precautions, Protective Equipment:

Observe good industrial hygiene practices. Use personal protective equipment as recommended in Section 8. Avoid breathing vapours, mist or gas. Ensure adequate ventilation. Emergency Procedures: Eliminate and/or contain source with inert material (sand, earth, absorbent pads, etc.). Wear basic eye and skin protection. Floor may be slightly slippery; so use care to avoid falling. Avoid discharge to natural waters, and/or dilute with water. Transfer liquids to suitable containers for recovery, re-use or disposal. Contact Ivey for technical assistance if required.

#### 7. Handling and Storage

Precautions for Safe Handling:

Practice good housekeeping. Avoid breathing excessive vapours. Ensure adequate ventilation. Avoid contact with skin and eyes. Wear protective gloves. Wash thoroughly after handling.

Conditions for Safe Storage: Keep closed or sealed when not in use. Do not allow to freeze, keep >0°C.

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## 8. Exposure Controls / Personal Protection

Control parameters: Not available  
Appropriate Engineering Controls: General mechanical room ventilation is expected to be satisfactory.  
Individual Protections Measures: Eye/face protection: Mono goggles or similar.  
Skin protection: Latex gloves, or similar, would be sufficient. Normal work clothes.  
Respiratory Protection: None expected to be needed. However, if an engineered / industrial application where vapours and/or misting may occur, wear MSHA/NIOSH approved half mask air purifying respirator

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## 9. Physical and Chemical Properties

Appearance: Liquid, cloudy  
Odour: Mild  
Odour threshold: Not available  
pH: 7 (+/- 0.5) (1% solution)  
Melting Point: ~0°C  
Freezing point: ~0°C  
Boiling Point: Not available  
Flash Point: Not applicable  
Evaporation Rate: <0.01  
Flammability: Not applicable  
Lower flammable/ explosive limit: Not applicable  
Upper flammable/Explosive Limit: Not applicable  
Vapour Pressure: <0.01 mm Hg  
Vapour Density: >1  
Relative Density: 0.99-1.04  
Solubility: 100% (Completely miscible in water)  
Partition Coefficient: Not available (n-octanol / water)  
Auto-Ignition Temperature: Not applicable  
Decomposition Temperature: Not available  
Viscosity: Not available

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## 10. Stability and Reactivity

Reactivity: Not reactive.  
Chemical Stability: Stable.  
Possibility of Hazardous Reactions: Not applicable  
Conditions to Avoid: Prolonged excessive heat may cause product decomposition. Freezing should also be avoided as it may cause product decomposition. In some cases freezing may cause irreversible changes.  
Incompatible Materials: Normally un-reactive; however avoid strong bases at high temperatures, strong acids, strong oxidizing agents, and materials with reactive hydroxyl compounds. These compounds would damage the mixture and reduce its effectiveness during application.  
Hazardous Decomposition products: Not applicable

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## 11. Toxicological Information

Likely Routes of Exposure  
Inhalation: No  
Skin contact: No  
Eye contact: Yes



Ingestion: No  
 Acute Toxicity:  
 LD50 - Oral (Rat): = >43.000mg/kg (rat) mg/kg  
 LD50 - Dermal (Rabbit): >58.000mg/kg (rabbit) mg/kg  
 Inhalation: Not available  
 Skin corrosion/irritation: Mild irritation  
 Serious eye damage/irritation: Eye irritation  
 Respiratory or skin sensitization: No  
 Germ cell mutagenicity: No  
 Carcinogenicity: None known or expected  
 Reproductive toxicity: No

## 12. Ecological Information

Toxicity: Low potential to affect aquatic organisms when used in accordance with Ivey International Inc. In-situ and Ex-situ Remediation Application Guidelines.

Acute toxicity	Time	Species	Method	Evaluation	Remarks
LC/50 = 0.07695%	96h	Rainbow trout	OECD 203	Not applicable	Not applicable
LC/50 = 0.11%	48h	Daphnia magna	OECD 202	Not applicable	Not applicable
EC/50 = Not applicable	72h	Algae	OECD 201	Not applicable	Not applicable

Persistence and degradability: >90% biodegradable in < 28 days.\*  
 Bio-accumulative potential: Not available  
 Mobility in soil: Completely miscible with water.  
 Other adverse effects: Not available

Based on actual testing or on data for similar material(s). Degradation Biodegradation reached in Modified OECD Screening Test (OECD Test No.301 E) after 28 days: 90 %. Biodegradation reached in CO2 Evolution Test (Modified Sturm Test, (OECD Test No. 301 B) after 28 days: 70 %.

## 13. Disposal Considerations

Product/Packaging:

For aqueous mixture solutions; aerobic biological wastewater treatment systems are effective in treating said mixtures. Ivey-sol does not have any known negative affect on coagulant or flocculent water treatment processes.

## 14. Transport Information

UN Number: Not applicable  
 Proper Shipping Name: Not applicable  
 Technical Name: Not applicable  
 Transport Hazard Class: Not applicable  
 Packing Group: Not applicable  
 Environmental Hazards: Not applicable



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## 15. Regulatory Information

UN GHS Classification: Classified in accordance with GHS 5th revised edition.

WHMIS Classification: Classified in accordance with HPR August 29, 2016 revised edition.

CPR Compliance: This product has been classified in accordance with the hazard criteria of the CPR, and the SDS contains all the information required by the CPR.

CEPA Compliance: All ingredients of this product are listed on the DSL.

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## 16. Other Information

Creation Date: July 5, 2017

Revision Date: Updated October 2, 2017, October 18, 2018

Disclaimer: This Safety Data Sheet (SDS) was prepared by iHazmat Regulatory Ltd., (www.iHazmat.com) using information provided by Ivey International Inc. The information in this SDS is offered for your consideration and guidance when working with this product. As per usual practice, accuracy of the information included is based on what was provided by the manufacturer and sole liability for the accuracy of these documents falls to Ivey International Inc.

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