AI: 87767

MSR109429



Rec'd via email: 11/15/2024

## LARGE CONSTRUCTION NOTICE OF INTENT (LCNOI) FOR COVERAGE UNDER THE LARGE CONSTRUCTION STORM WATER GENERAL NPDES PERMIT

## **INSTRUCTIONS**

The Large Construction Notice of Intent (LCNOI) is for coverage under the Large Construction General Permit for land disturbing activities of five (5) acres or greater; or for land disturbing activities, which are part of a larger common plan of development or sale that are initially less than five (5) acres but will ultimately disturb five (5) or more acres. Applicant must be the owner or operator. For construction activities, the operator is typically the prime contractor. The owner(s) of the property and the prime contractor associated with regulated construction activity on the property have joint and severable responsibility for compliance with the Large Construction Storm Water General Permit MSR10.

<u>If the company seeking coverage is a corporation, a limited liability company, a partnership, or a business trust, attach proof of its registration with the Mississippi Secretary of State and/or its Certificate of Good Standing. This registration or Certificate of Good Standing must be dated within twelve (12) months of the date of the submittal of this coverage form. Coverage will be issued in the company name as it is registered with the Mississippi Secretary of State.</u>

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

Submittals with this LCNOI must include:

• A site-specific Storm Water Pollution Prevention Plan (SWPPP) developed in accordance with ACT5 of the General Permit

• A detailed site-specific scaled drawing showing the property layout and the features outlined in ACT5 of the General Permit

• A United States Geological Survey (USGS) quadrangle map or photocopy, extending at least one-half mile beyond the facility property boundaries with the site location and outfalls outlined or highlighted. The name of the quadrangle map must be shown on all copies. Quadrangle maps can be obtained from the MDEQ, Office of Geology at 601-961-5523.

Additional submittals may include the following, if applicable:

• Appropriate Section 404 documentation from U.S. Army Corps of Engineers

Appropriate documentation concerning future disposal of sanitary sewage and sewage collection system construction
Appropriate documentation from the MDEQ Office of Land & Water concerning dam construction and low flow

requirements

• Approval from County Utility Authority in Hancock, Harrison, Jackson, Pearl River and Stone Counties

• Antidegradation report for disturbance within Waters of the State

ALL QUESTIONS MUST BE ANSWERED (Answer "NA" if the question is not applicable)

MSR10 MSR109429

(NUMBER TO BE ASSIGNED BY STATE)

<b>APPLICANT IS THE:</b>		PRIME CONT	RACTOR				
OWNER CONTACT INFORMATION							
OWNER CONTACT PERSON:_							
OWNER COMPANY LEGAL NA							
OWNER STREET OR P.O. BOX	:						
OWNER CITY:		STATE:		ZIP:			
OWNER PHONE #: ()		OWNER EMAIL: _					
		NTACT INFOR					
IF NOI WAS PREPARED BY SOM							
CONTACT PERSON:							
COMPANY LEGAL NAME:							
STREET OR P.O. BOX:							
CITY:	ST.	АТЕ:	ZIP:				
PHONE # ( )		EMAIL:					
PRIME CONTRACTOR CO	NTACT INFORM	IATION					
PRIME CONTRACTOR CONTA	ACT PERSON:						
PRIME CONTRACTOR COMP.							
PRIME CONTRACTOR STREET OR P.O. BOX:							
PRIME CONTRACTOR CITY:		STATE	:	_ ZIP:			
PRIME CONTRACTOR PHONE	E #: ()	PRIME CONTRA	CTOR EMAIL:				
FACILITY SITE INFORMATION							
FACILITY SITE NAME:							
<b>FACILITY SITE ADDRESS</b> (If the indicate the beginning of the project	ne physical address is n t and identify all counti	ot available, please in es the project traverse	dicate the nearest named ro s.)	ad. For linear projects			
STREET: CITY:		COLN	TX7.	710			
FACILITY SITE TRIBAL LANI LATITUDE: degrees n							
LAT & LONG DATA SOURCE (GPS ( <i>Please GPS Project Entrance/Start Point</i> ) or Map Interpolation):							
IVIAL AUKEAUE IHAI WIL	DE DISTUKBED "						

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IS THIS PART OF A LARGER COMMON PLAN OF DEVELOPMENT?	YES 🗆	NO 🗆
IF YES, NAME OF LARGER COMMON PLAN OF DEVELOPMENT: AND PERMIT COVERAGE NUMBER: MSR10		
ESTIMATED CONSTRUCTION PROJECT START DATE:	YYYY-MM-DD	
ESTIMATED CONSTRUCTION PROJECT END DATE:	YYYY-MM-DD	
DESCRIPTION OF CONSTRUCTION ACTIVITY:		
PROPOSED DESCRIPTION OF PROPERTY USE AFTER CONSTRUCTION HAS BEEN CO	MPLETED:	
SIC Code: NAICS Code		
NEAREST NAMED RECEIVING STREAM:		
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 MDI http://www.deq.state.ms.us/MDEQ.nsf/page/TWB_Total_Maximum_Daily_Load_Section)	YES□ EQ's web site:	NO□
HAS A TMDL BEEN ESTABLISHED FOR THE RECEIVING STREAM SEGMENT?	<b>YES</b>	NO
FOR WHICH POLLUTANT: Total Phosporous, Sediment, Low Dissolved Oxygen, Nutrient Pollution		
Oxygen, Nutrient Pollution ARE THERE RECREATIONAL STREAMS, PRIVATE/PUBLIC PONDS OR LAKES WITHIN ½ MILE DOWNSTREAM OF PROJECT BOUNDRY THAT MAY BE IMPACTED B ACTIVITY?	YES □ Y THE CONSTR	NO 🗆 RUCTION
EXISTING DATA DESCRIBING THE SOIL (for linear projects please describe in SWPPP):		
WILL FLOCCULANTS BE USED TO TREAT TURBIDITY IN STORM WATER?	YES	NO
IF YES, INDICATE THE TYPE OF FLOCCULANT.	IIDE (PAM)	
IF YES, DOES THE SWPPP DESCRIBE THE METHOD OF INTRODUCTION, THE LOCAT AND THE LOCATION OF WHERE FLOCCULATED MATERIAL WILL SETTLE?	ION OF INTROI	DUCTION
IS A SDS SHEET INCLUDED FOR THE FLOCCULATE?	YES 🗆	NO
WILL THERE BE A 50 FT BUFFER BETWEEN THE PROJECT DISTURBANCE AND THE STATE?	WATERS OF TH YES 🗖	IE NO□
IF NOT, PROVIDE EQUIVALENT CONTROL MEASURES IN THE SWPPP.		

 $^{1}$ Acreage for subdivision development includes areas disturbed by construction of roads, utilities and drainage. Additionally, a housesite of at least 10,000 ft<sup>2</sup> per lot (entire lot, if smaller) shall be included in calculating acreage disturbed.

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D	OCUMENTATION OF COMPLIANCE WITH OTHER RE COVERAGE UNDER THIS PERMIT WILL NOT BE GRANTED UNT MDEQ PERMITS AND APPROVALS ARE SATISFACTOR	GULATION TIL ALL OTHER RILY ADDRESSE	NS/REQUIR required d	EMENTS
IS LC	NOI FOR A FACILITY THAT WILL REQUIRE OTHER PERMITS?		YES 🗆	NO 🗆
IF YE	ES, CHECK ALL THAT APPLY: $\Box$ AIR $\Box$ HAZARDOUS W.	ASTE [	<b>PRETREA</b>	ſMENT
	$\Box$ water state operating $\Box$ individual npdes	C	<b>OTHER:</b>	
	IE PROJECT REROUTING, FILLING OR CROSSING A WATER CO NY KIND? (If yes, contact the U.S. Army Corps of Engineers' Regulator		YES 🗆 permitting req	
IF TH DOCU	IE PROJECT REQUIRES A CORPS OF ENGINEER SECTION 404 PI MENTATION THAT:	ERMIT, PROV	IDE APPROF	PRIATE
-The v	project has been approved by individual permit, or work will be covered by a nationwide permit and NO NOTIFICATION t work will be covered by a nationwide or general permit and NOTIFICAT	o the Corps is FION to the C	required, or orps is required	d
	IE PROJECT REROUTING, FILLING OR CROSSING A STATE WAT ANY KIND? (If yes, please provide an antidegradation report.)	FER CONVEY	YANCE YES	NO
IS A I (If yes	LAKE REQUIRING THE CONSTRUCTION OF A DAM BEING PRO s, provide appropriate approval documentation from MDEQ Office of La	POSED? and and Water	YES □ r, Dam Safety.)	
IF TH BE DI	IE PROJECT IS A SUBDIVISION OR A COMMERCIAL DEVELOPM ISPOSED? Check one of the following and attach the pertinent documen	IENT, HOW V its.	VILL SANITA	RY SEWAGE
	Existing Municipal or Commercial System. Please attach plans and spe associated "Information Regarding Proposed Wastewater Projects" for Hancock, Harrison, Jackson, Pearl River and Stone Counties. If the plans and of LCNOI submittal, MDEQ will accept written acknowledgement from collection and treatment that the flows generated from the proposed pro properly. The letter must include the estimated flow.	m or approval d specification official(s) res	from County U s can not be pro ponsible for wa	tility Authority in ovided at the time istewater
	Collection and Treatment System will be Constructed. Please attach a copermit from MDEQ or indicate the date the application was submitted to	opy of the cove to MDEQ (Dat	er of the NPDE te:	S discharge)
	Individual Onsite Wastewater Disposal Systems for Subdivisions Less th of General Acceptance from the Mississippi State Department of Health engineer that the platted lots should support individual onsite wastewate	or certificatio	n from a regist	opy of the Letter tered professional
	Individual Onsite Wastewater Disposal Systems for Subdivisions Greate feasibility of installing a central sewage collection and treatment system response from MDEQ concerning the feasibility study must be attached is not feasible, then please attach a copy of the Letter of General Accept certification from a registered professional engineer that the platted lots disposal systems.	must be made . If a central c ance from the	by MDEQ. A collection and v State Departm	copy of the vastewater system ent of Health or
	CATE ANY LOCAL STORM WATER ORDINANCE (I.E. MS4)WITH	WHICH THE	PROJECT M	UST COMPLY:

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<sup>1</sup> (owner or prime contractor)

**Kevin Mullin** 

Printed Name<sup>1</sup>

**Date Signed** 

1

<sup>1</sup>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

Title

**Electronically:** 

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

Revised 3/23/22