

ENGINEERING DEPARTMENT

9200 Pigeon Roost Road, Olive Branch, MS 38654 662.892.9351 • www.obms.us

December 6, 2024

Mr. Joe Frank Lauderdale

Re: Property located on North side of Nail Road at the west end (west of Ross Road)

Dear Mr. Lauderdale,

The City of Olive Branch will provide water, gas and sewer services to the above development providing the developer designs and constructs the lines in accordance with our requirements.

Water is available off Nail Road. Sewer and Gas is available from West Sandidge Road.

Sincerely,

Andy D. Swims, P.E. City Engineer

AT: 74841

DEC 30 2024

MAJOR MODIFICATION FORM mental Quality FOR LARGE CONSTRUCTION GENERAL PERMIT Coverage No. MSR10 7 8 8 8 County DESOTO



INSTRUCTIONS

	A SALES AND THE SECOND
Coverage recipients shall notify the Mississippi Department of Environmental Quality at least 30 days in advance of (check all that apply). This form should be submitted with a modified Storm Water Pollution Prevention Plan (Stopographic map, Corps of Engineers Section 404 documentation and wastewater collection and treatment information.	Were, upuated USGS
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 Large Construction General Permit of new phases of existing subdivisions must apply for separate permit coverage through the submittal of a new concerage recipients are authorized to discharge storm water associated with proposed expansions of existing subphases, under the conditions of the General Permit, only upon receipt of written notification of approval by MDEQ such as changes of erosion and sediment controls used, must be in accordance with ACT6, S-1 (6) and S-2 (7) of the Controls used.	mplete LCNO1 package. odivisions or subsequent All other modifications,
ALL INFORMATION MUST BE COMPLETED (indicate "N/A" where not applicable)	
COVERAGE RECIPIENT INFORMATION	
COVERAGE RECIPIENT CONTACT NAME: Robert M. Bailey TEL# (90	1) 488-9803
COMPANY NAME: CIA LLC STREET OR P.O. BOX: 498 W. BANILLEAN ST.	*
STREET OR P.O. BOX: 498 W. BANILLEAN ST.	
CITY: New AUBAWY STATE: MS ZIP: 36652 E-MAIL: BAILOUREA	
PROJECT INFORMATION SAILEY MAN	T GROUP, CON
-PROJECT NAME: CIP LLC - 33, 65 Ac ADDITION ACLE	erge
CITY: OLIVE BAANCH	
CITY: OLISC BAANCES ADDITIONAL ACREAGE TO BE DISTURBED: 33.65 TOTAL PROJECT ACREAGE:	93,65 Ac
I certify under penalty of law that this document and all attachments were prepared under my direction or supwith a system designed to assure that qualified personnel properly gathered and evaluated the information suinquiry of the person or persons who manage the system, or those persons directly responsible for gathering information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware the penalties for submitting false information, including the possibility of fine and imprisonment for knowing violating.	pervision in accordance bmitted. Based on my ng the information, the nat there are significant tions.
Signature (must be signed by coverage recipient) Date	
Robert M. Bailey Prest	Wex
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	, : .

Revised: 12/12/16

