

MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY (MDEQ) Large Construction Storm Water General Permit NPDES Permit MSR10

LARGE CONSTRUCTION FORMS PACKAGE

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These standard forms are used to apply for permit coverage under the Large Construction Storm Water General Permit and for submittals and record keeping required by permit conditions after coverage has been granted. The forms are on our website at www.deq.state.ms.us/MDEQ.nsf/page/epd epdgeneral. Required information can be completed on screen, printed and signed.

Revised: 12/30/10

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AI: 88657

MSR109523





LARGE CONSTRUCTION NOTICE OF INTENT (LCNOI) FOR COVERAGE UNDER THE LARGE CONSTRUCTION STORM WATER GENERAL NPDES PERMIT MSR10 9523

(NUMBER TO BE ASSIGNED BY STATE)

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 several responsibility for compliance with the Large Construction Storm Water General Permit MSR10.

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

All OUESTIONS MUST BE ANSWERED (Answer "NA" if the question is not applicable)

APPLICANT IS THE:	OWNER PRIM	ME CONTRACTOR (Must check one or both)
	OWNER INFO	RMATION	
OWNER CONTACT PERSON:	Jonathan San	uford	· · · · · · · · · · · · · · · · · · ·
OWNER COMPANY NAME:	45 Farm		
OWNER STREET OR P.O. BO	x: PO Box 405		22122
OWNER CITY: Semino	iry	state: MS	ZIP: 39479
OWNER PHONE # (INCLUDE	AREA CODE): LOOL	319-1459	
	PRIME CONTRACTO	R INFORMATION	
PRIME CONTRACTOR CONT	0	1 1	150n
PRIME CONTRACTOR COM	\cap - i	AG	
PRIME CONTRACTOR STRE		Hus 49	North
PRIME CONTRACTOR CITY	Mount, Olive	STATE: M	S ZIP: 39/19
PRIME CONTRACTOR PHON		121 111	8309



LARGE CONSTRUCTION NOTICE OF INTENT (LCNOI) FOR COVERAGE UNDER THE LARGE CONSTRUCTION STORM WATER GENERAL NPDES PERMIT MSR10

(NUMBER TO BE ASSIGNED BY STATE)

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

APPLICANT IS THE: ✓ OWNER ☐ PRIME	CONTRACTOR (Mu	st check one or both)
OWNER INFORM	IATION	
OWNER CONTACT PERSON: JONOTHAN SANF	ord	
OWNER COMPANY NAME: 45 Farm		
OWNER STREET OR P.O. BOX: PO BOX 405		
OWNER CITY: Seminary	state: MS	ZIP: 39479
OWNER PHONE # (INCLUDE AREA CODE): 601 3	19-1459	
PRIME CONTRACTOR I	NFORMATION	
PRIME CONTRACTOR CONTACT PERSON: Brandon	Dickinson	
PRIME CONTRACTOR COMPANY: Ozacl Ag		-4 <u>-4 -4 -4 -4 -4 -4 -4 -4 -4 -4 -4 -4 -4 -</u>
PRIME CONTRACTOR STREET OR P.O. BOX:		
PRIME CONTRACTOR CITY: M+ O TWE	STATE:	ZIP: 39119
PRIME CONTRACTOR PHONE # (INCLUDE AREA CODE): _	4954 Hwy 49	North

PRIME CONTRACTOR CERTIFICATION

LARGE CONSTRUCTION GENERAL PERMIT

Coverage No. MSR10

County

(Fill in your Certificate of Coverage Number and County)



By completing and submitting this form to MDEQ, the prime contractor is certifying that (1) they have operational control over the erosion and sediment control specifications (including the ability to make modifications to such specifications) or (2) they have day-to-day operational control of those activities at the site necessary to ensure compliance with the SWPPP and applicable permit conditions.

The owner(s) of the property and the prime contractor associated with regulated construction activity on the property have joint and several responsibility for compliance with the permit. Notwithstanding any permit condition to the contrary, the coverage recipient and any person who causes pollution of waters of the state or places waste in a location where they are likely to cause pollution of any waters of the state shall remain responsible under applicable federal and state laws and regulations and applicable permits.

PRIME CONTRACTOR INFORMATION
PRIME CONTRACTOR CONTACT PERSON: Brondon Dickinson Phone Number: 66/517-8309 PRIME CONTRACTOR COMPANY: 02 a r & A G PRIME CONTRACTOR STREET (P.O. BOX): 4959 Huy 49 North PRIME CONTRACTOR CITY: Nount: 01 ve state: 45 zip: 39119
OWNER INFORMATION
OWNER CONTACT PERSON: Jonathan Sanford Phone Number: (601) 319 1459 OWNER COMPANY NAME: 45 Farms
PROJECT INFORMATION
PROJECT NAME: 45 Farms DESCRIPTION OF CONSTRUCTION ACTIVITY: Constructing 6 poultry houses
PHYSICAL SITE ADDRESS (If the physical address is not available indicate the nearest named road. For linear projects, indicate the beginning of the project and identify all counties the project traverses.) STREET: 665 MS 590
STREET: 665 MS 590 CITY: Seminary County: County
I certify that I am the prime contractor for this project and will comply with all the requirements in the above referenced general NPDES permit. I further 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 property 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. 2 - 4 - 2025 Prime Contractor Signature Date Signed Contract to 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.

This Prime Contractors Certification form shall be submitted to:

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

Jackson, Mississippi 39225

Revised: 12//16/10

PROJECT INFORMATION

PROJECT NAME: 45 Form		
TOTAL ACREAGE THAT WILL BE DISTURBED 1:		
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:		
associated roads a composter.	houses	with
PROPOSED DESCRIPTION OF PROPERTY USE AFTER CONSTRUCTION HAS BEEN standard industrial classification code (SIC) if known): To be an operating chicken form.	COMPLETE	D (include
PHYSICAL SITE ADDRESS (If the physical address is not available indicate the nearest na indicate the beginning of the project and identify all counties the project traverses.) STREET: 665 M5-590 CITY: Sevenary COUNTY: Covington		
CITY: Servinary COUNTY: Covington	ZII	: PALVOS
		-word
LATITUDE : degrees minutes seconds LONGITUDE: degrees		29479
	minutes	39479 seconds
LATITUDE : degrees minutes seconds LONGITUDE: degrees LAT & LONG DATA SOURCE (GPS (Please GPS Project Entrance/Start Point) or Map Interpolation): 3	minutes	39479 seconds 89.44890
LATITUDE : degrees minutes seconds LONGITUDE: degrees	minutes	39479 seconds 89.44890
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LATITUDE:degrees minutes seconds LONGITUDE:degrees LAT & LONG DATA SOURCE (GPS (Please GPS Project Entrance/Start Point) or Map Interpolation): 3 NEAREST NAMED RECEIVING STREAM:	minutes	39479 seconds 89.44890 NO NO NO NO

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 NO	
IF YES, CHECK ALL THAT APPLY: AIR HAZARDOUS WASTE	PRETREAT	MENT	
■ WATER STATE OPERATING ■ INDIVIDUAL NPDES	OTHER:	20 13 14	
IS THE PROJECT REROUTING, FILLING OR CROSSING A WATER CONVEYAND OF ANY KIND? (If yes, contact the U.S. Army Corps of Engineers' Regulatory Branch for permitting requirements.)		NO NO	
IF THE PROJECT REQUIRES A CORPS OF ENGINEER SECTION 404 PERMIT, PR DOCUMENTATION THAT:	OVIDE APPROPI	RIATE	
The project has been approved by individual permit, or			
The work will be covered by a nationwide permit and NO NOTIFICATION to the	Corps is required,	or	
The work will be covered by a nationwide or general permit and NOTIFICATION	to the Corps is req	uired	
IS A LAKE REQUIRING THE CONSTRUCTION OF A DAM BEING PROPOSED? (If yes, provide appropriate approval documentation from MDEQ Office of Land and Water, Dam Safety.)	YES	NO NO	
IF THE PROJECT IS A SUBDIVISION OR A COMMERCIAL DEVELOPMENT, HOW BE DISPOSED? Check one of the following and attach the pertinent documents.	V WILL SANITAF	RY SEWAGE	
Existing Municipal or Commercial System. Please attach plans and specifications f associated "Information Regarding Proposed Wastewater Projects" form or approved Hancock, Harrison, Jackson, Pearl River and Stone Counties. If the plans and specification of LCNOI submittal, MDEQ will accept written acknowledgement from official(s) a collection and treatment that the flows generated from the proposed project can approperly. The letter must include the estimated flow.	val from County Uti ons can not be proves pesponsible for was	lity Authority in vided at the time tewater	
Collection and Treatment System will be Constructed. Please attach a copy of the cover of the NPDES discharge permit from MDEQ or indicate the date the application was submitted to MDEQ (Date:)			
Individual Onsite Wastewater Disposal Systems for Subdivisions Less than 35 Lots. Please attach a copy of the Letter of General Acceptance from the Mississippi State Department of Health or certification from a registered professional engineer that the platted lots should support individual onsite wastewater disposal systems.			
Individual Onsite Wastewater Disposal Systems for Subdivisions Greater than 35 L feasibility of installing a central sewage collection and treatment system must be maresponse from MDEQ concerning the feasibility study must be attached. If a central is not feasible, then please attach a copy of the Letter of General Acceptance from the certification from a registered professional engineer that the platted lots should supdisposal systems.	ide by MDEQ. A call collection and wa he State Department	opy of the astewater system nt of Health or	
INDICATE ANY LOCAL STORM WATER ORDINANCE WITH WHICH THE PROJE	ECT MUST COMP	PLY:	

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 by prime contractor)	2.4.25
Signature of Applicant' (owner on prime contractor)	Date Signed
Jonathan Sanford	Owner
Printed Name'	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