A: 63335

MSR10 9 6 43

(NUMBER TO BE ASSIGNED BY STATE)

| APPLICANT IS THE: | OWNE | R PRIME CONTRA | ACTOR | e o e n we |
|---|----------------------|-------------------------------------|------------------------|---------------------------|
| | OWNER | CONTACT INFORMA | | EGEIVE |
| OWNER CONTACT PERSON | . Hien Nguyen | | | AUG 2 0 2025 |
| OWNER COMPANY LEGAL | NAME: Henry | Le Farm LLC | ПП | |
| OWNER STREET OR P.O. BO | | | | MDEO |
| OWNER CITY: Preston | | STATE: Missis | ssippi | ZIP: 39354 |
| OWNER PHONE #: (678) | 77-0769 | OWNER EMAIL: | | |
| IF NOI WAS PREPARED BY SO | | R CONTACT INFORM | ATION U | |
| | | | | |
| COMPANY LEGAL NAME: | | | | |
| STREET OR P.O. BOX: | | | | |
| CITY: | | | ZIP: | |
| PHONE # () | | EMAIL: | | |
| PRIME CONTRACTOR C | ONTACT INF | ORMATION | | |
| | | • | | |
| PRIME CONTRACTOR CON PRIME CONTRACTOR COM | | | | |
| | | | | |
| PRIME CONTRACTOR STRI | | | | |
| PRIME CONTRACTOR CITY | | | | |
| PRIME CONTRACTOR PHO | NE #: () | PRIME CONTRACT | TOR EMAIL: | |
| | FACIL | ITY SITE INFORMATI | ION | |
| FACILITY SITE NAME: He | nry Le Farm Li | LC | | |
| FACILITY SITE ADDRESS (I indicate the beginning of the proj | f the physical addre | ess is not available, please indi | cate the nearest named | road. For linear projects |
| CITY: Newton | STATE: N | Mississippi COUNT | Y: Newton | ZIP: 39345 |
| FACILITY SITE TRIBAL LA | ND ID (N/A If not | applicable): N/A | | |
| LATITUDE: 32 degrees 21 | _ minutes sec | onds LONGITUDE: 89 | | |
| LAT & LONG DATA SOURC | E (GPS (Please GPS P | roject Entrance/Start Point) or Map | Interpolation): GIS Ma | apping |
| TOTAL ACREAGE THAT W | ILL BE DISTURE | ED 1: Over 14 | | |
| | | | | |
| | | | | |
| | | | | |

| 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: Build pads for 8 Broiler Houses, compo | st shed, loadout, | access. |
| PROPOSED DESCRIPTION OF PROPERTY USE AFTER CONSTRUCTION HAS BEEN OF Grow 4.8 pound broiler chickens for meat production. | COMPLETED: | |
| SIC Code: 0 2 5 1 NAICS Code 1 1 2 3 2 0 | | |
| | | |
| NEAREST NAMED RECEIVING STREAM: Dry Branch and intermittent tributary of Dunag IS RECEIVING STREAM ON MISSISSIPPI'S 303(d) LIST OF IMPAIRED WATER | gin & Potterchitto | Creek |
| BODIES? (The 303(d) list of impaired waters and TMDL stream segments may be found on M http://www.deq.state.ms.us/MDEQ.nsf/page/TWB_Total_Maximum_Daily_Load_Section) | | |
| HAS A TMDL BEEN ESTABLISHED FOR THE RECEIVING STREAM SEGMENT? | YES✓ | NC |
| FOR WHICH POLLUTANT: Organic Enrichment / Low Dissolved Oxygen, Unionized Ammoni | ia | |
| ARE THERE RECREATIONAL STREAMS, PRIVATE/PUBLIC PONDS OR LAKES WITHIN ½ MILE DOWNSTREAM OF PROJECT BOUNDRY THAT MAY BE IMPACTED ACTIVITY? | YES BY THE CONST | NO V TRUCTION |
| EXISTING DATA DESCRIBING THE SOIL (for linear projects please describe in SWPPP): ScD3 - Shubuta clay loam, | | |
| WILL FLOCCULANTS BE USED TO TREAT TURBIDITY IN STORM WATER? | YES | NO 🗸 |
| IF YES, INDICATE THE TYPE OF FLOCCULANT. ANIONIC POLYACRYL OTHER | IMIDE (PAM) | _ |
| IF YES, DOES THE SWPPP DESCRIBE THE METHOD OF INTRODUCTION, THE LOCATION OF WHERE FLOCCULATED MATERIAL WILL SETTLE? | ATION OF INTRO | ODUCTION |
| IS A SDS SHEET INCLUDED FOR THE FLOCCULATE? | YES | NO |
| WILL THERE BE A 50 FT BUFFER BETWEEN THE PROJECT DISTURBANCE AND TH STATE? | E WATERS OF T | NT NT |
| 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 |
|--|---|--------------------------------|
| IF YES, CHECK ALL THAT APPLY: AIR HAZARDOUS WASTE | PRETREATMENT | ш |
| WATER STATE OPERATING INDIVIDUAL NPDES | OTHER: DLPAFO |) |
| IS THE PROJECT REROUTING, FILLING OR CROSSING A WATER CONVEYANC OF ANY KIND? (If yes, contact the U.S. Army Corps of Engineers' Regulatory Branch for | | NO ts.) |
| IF THE PROJECT REQUIRES A CORPS OF ENGINEER SECTION 404 PERMIT, PRODOCUMENTATION THAT: | OVIDE APPROPRIATE | |
| -The project has been approved by individual permit, or -The work will be covered by a nationwide permit and NO NOTIFICATION to the Corps -The work will be covered by a nationwide or general permit and NOTIFICATION to the | is required, or Corps is required | |
| IS THE PROJECT REROUTING, FILLING OR CROSSING A STATE WATER CONV OF ANY KIND? (If yes, please provide an antidegradation report.) | EYANCE 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 Wa | YES ter, Dam Safety.) | 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 SANITARY SEV | WAGE |
| Existing Municipal or Commercial System. Please attach plans and specifications for associated "Information Regarding Proposed Wastewater Projects" form or approve Hancock, Harrison, Jackson, Pearl River and Stone Counties. If the plans and specification of LCNOI submittal, MDEQ will accept written acknowledgement from official(s) recollection and treatment that the flows generated from the proposed project can and properly. The letter must include the estimated flow. | al from County Utility Autons can not be provided a esponsible for wastewate | thority in it the time r |
| Collection and Treatment System will be Constructed. Please attach a copy of the copermit from MDEQ or indicate the date the application was submitted to MDEQ (D | over of the NPDES dischar | rge) |
| Individual Onsite Wastewater Disposal Systems for Subdivisions Less than 35 Lots. of General Acceptance from the Mississippi State Department of Health or certifica engineer that the platted lots should support individual onsite wastewater disposal s | tion from a registered pr | he Letter ofessional |
| Individual Onsite Wastewater Disposal Systems for Subdivisions Greater than 35 L feasibility of installing a central sewage collection and treatment system must be ma response from MDEQ concerning the feasibility study must be attached. If a centra 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 sup disposal systems. | de by MDEQ. A copy of Il collection and wastewat he State Department of H | the ter system lealth or |
| INDICATE ANY LOCAL STORM WATER ORDINANCE (I.E. MS4)WITH WHICH TI | HE PROJECT MUST CO | OMPLY: |
| | | |
| | | |

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 Appleant (owner or prime contractor)

Date Signed

Hien Nguyen (Henry Le Farm)

Owner

Printed Name¹

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