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Mississippi Department of Environmental Quality Office of Pollution Control – Environmental Permits Division POST OFFICE BOX 2261 • JACKSON, MS 39225-2261 TEL: (601) 961-5171 • FAX: (601) 354-6612

www.deq.state.ms.us

DRY LITTER POULTRY ANIMAL FEEDING OPERATIONS
NOTICE OF INTENT (DLPNOI)
FOR COVERAGE UNDER
MULTIMEDIA GENERAL POLLUTION CONTROL PERMIT NO. MSG20 P 3 2 |
(Number to be assigned by State)

APPLICANT MUST BE THE OWNER AND/OR OPERATOR OF THE PROPERTY ASSOCIATED WITH THE REGULATED ACTIVITY. ALL SUBMITTALS MUST INCLUDE THE FOLLOWING:

ALL SUBMITTALS WITH THIS DLPNOI MUST INCLUDE:

- A CURRENT NUTRIENT MANAGEMENT PLAN (SEE SECTION II)
- A USGS QUAD MAP OR A COPY SHOWING THE SITE LOCATION
- A SITE DRAWING

ADDITIONAL SUBMITTALS MAY INCLUDE THE FOLLOWING IF APPLICABLE:

- APPROPRIATE SECTION 404 DOCUMENTATION (WETLANDS)
- A STORM WATER POLLUTION PREVENTION PLAN (SWPPP), IF THERE IS TO BE CONSTRUCTION WORK TOTALING ONE ACRE OR MORE
- CONTIGUOUS LAND OWNER NOTIFICATION(S) AS IDENTIFIED IN CONDITION S-2, ACT2
 OF THE DRY LITTER POULTRY ANIMAL FEEDING OPERATIONS MULTIMEDIA GENERAL
 POLLUTION CONTROL PERMIT NO. MSG20.

USGS QUAD MAPS SUBMITTED MUST EXTEND AT LEAST ONE MILE BEYOND THE PROPERTY BOUNDARIES OF THE FACILITY AND MUST CLEARLY SHOW ALL SPRINGS AND SURFACE WATER BODIES IN THE AREA, PLUS ALL DRINKING WATER WELLS WITHIN 1/4 MILE OF THE FACILITY. ADDITIONALLY, ALL PUBLIC DRINKING WELLS WITHIN ONE MILE OF THE FACILITY MUST BE IDENTIFIED.

THE SITE DRAWING MUST SHOW THE PROPERTY BOUNDARIES AND MUST INDICATE THE APPROXIMATE LOCATION OF EACH EXISTING AND PROPOSED STRUCTURE (HOUSE, INCINERATOR, DEAD BOX, LAND APPLICATION FIELD, COMPOSTING AREA, LITTER STORAGE STRUCTURE, ETC). THE SITE DRAWING MUST INCLUDE A COMPASS DIRECTION HEADER.

SUBMIT AT LEAST 180 DAYS PRIOR TO COMMENCEMENT OF CONSTRUCTION OR PLANNED OPERATIONS. ALL FORMS MUST BE SUBMITTED TO: CHIEF, ENVIRONMENTAL PERMITS DIVISION, MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY, P.O. BOX 2261, JACKSON, MISSISSIPPI 39225-2261.

ALL QUESTIONS MUST BE ANSWERED. FOR THIS APPLICATION TO BE CONSIDERED, ALL QUESTIONS ON THIS FORM MUST BE ANSWERED. IF AN ITEM DOES NOT APPLY, ENTER "N/A" (NOT APPLICABLE) TO SHOW THAT YOU CONSIDERED THE QUESTION.

I. GENERAL INFORMATION:

CONTACT AND FACILITY INFORMATION

Name of Owner: HAI NGUYEN				
Facility Name: HOA HUYNH FARM LLC				
Mailing Address:				
Street or P.O. Box: 393 STEWART ROAD				
City: CARTHAGE State: MS Zip: 39051				
Physical Address: (If the physical address is not available indicate the nearest named road or intersection.)				
Street (can not be a P.O. Box) 393 STEWART WAD				
City: CARTHAGE State: MS Zip: 39051				
County: LEAKE				
Latitude (degrees/min/sec): 89° 29′ 57, 18″10				
Longitude (degrees/min/sec): 32° 45′ 1,88″ N				
Nearest named receiving stream:				
Facility Telephone No. (Include Area Code): (601) 267-6331				
Facility Fax No. (Include Area Code):				
Facility Cell Phone No. (Include Area Code): (609) 350 - 4423				
Other Contact Phone Numbers (Include Area Code):				
TYPES OF ACTIVITY				
Check all that apply:				
Existing dry litter poultry operation that is not proposing an increase in the number of houses				
Construction and/or operation of an incinerator				
New or expanding operations that will require construction activities disturbing one acre or more				

II. DRY LITTER POULTRY FEEDING OPERATION CHARACTERISTICS:

TYPE AND AMOUNT OF CHICKENS Check all that apply and indicate the amounts Broilers (SIC 0251): 270,000 Layers (SIC 0252): 70,000 Housed under roof Open confinement TYPES OF DRY LITTER CONTAINMENT, SCheck all that apply and indicate total days of storage and the stor	Check any of the following control runoff from your Buffers Setbacks Conservation to Constructed well Infiltration fiel Grass filter Terrace STORAGE, AND CAPACE	etland d		
Type of Storage	Total Number of Days	Total Capacity (tons)		
Roofed Storage Shed	365	446		
Concrete Pad				
Impervious Soil Pad				
Other: Specify				
Are all poultry houses, that have been constructed or enlarged after February 24, 1994, at least 600 feet from all occupied dwellings or commercial establishments not owned by the applicant and at least 150 feet from all adjoining property lines? Are all incinerators at least 150 feet from the nearest residential or recreational area, all dwellings, and all light commercial buildings not owned by the applicant? Yes No, attach wavier NOTE: If answered no to any of these questions then attach a completed Poultry Buffer Zone Waiver. The wavier must be completed by all affected property owners and notarized by a State of Mississippi appointed Notary Public. A copy of the Dry Litter Poultry Buffer Zone Waiver can be found in the Dry Litter Poultry Forms Package or by calling (601) 961-5171 or at http://www.deq.state.ms.us/MDEQ.nsf/page/epd_AgriculturalBranchEPD?OpenDocument				
CONTRACT INFORMATION				
Is this facility a contract operation?				
If yes, what is the name and address of the integrator?				
Name: Typon food inc	Address: 305 Cleve	Rand St. Forest, MS 39074		

II. DRY LITTER POULTRY FEEDING OPERATION CHARACTERISTICS (continued):

ATTACHMENTS				
Attach a USGS quad map or a copy that extends at least one mile beyond the property boundaries of the facility and clearly show all springs and surface water bodies in the area, plus all drinking water wells within ¼ mile of the facility. Additionally, all public drinking wells within one mile of the facility must be identified. Quad maps can be obtained from MDEQ Office of Geology at (601) 961-5523.				
Attach a site drawing showing the property boundaries and must indicate the approximate location of each existing and proposed structure (house, incinerator, dead box, land application field, composting area, etc). The site drawing must include a compass direction header.				
NUTRIENT MANAGEMENT PLAN Answer the following				
My most current and up to date nutrient management plan was developed on				
I understand that my nutrient management plan identified above expires five years from the date it was developed and that an updated nutrient management plan must be submitted to MDEQ prior to its expiration date.				
The expiration date of my current plan is				
Is a nutrient management plan already being implemented for the facility?				
What is the estimated amount of litter generated per year? tons/year				
Total acreage needed for land application:				
Total acreage available for land application:				
Will a third party remove litter off site? ✓ Yes No				
If yes, how much litter will be transferred to other persons per year?tons/year				
If not land applying, describe alternative use(s) of the litter:				

	INCINERATOR					
	Yes, there will be mortality incineration equipment located at the facility. This page must be completed.					
ಠ	No, there will be no poultry mortality incineration equipment located at the facility. If at a future date you wish to construct and/or operate poultry mortality incineration equipment, you must submit an updated DLPNOI by completing Sections III and V. Constructing and operating poultry mortality incineration equipment without a modified coverage or issuance of individual permits is a <u>violation</u> of state law.					
have ple or	ve previously submitted approved stack test. For ease visit http://www.deq.state.ms.us/MDEO.nsf.call (601) 961-5171.	a list bage/ identi casse:	ified in this DLPNOF are not permitted for the generated on site are permitted for incineration.			
MA	ANUFACTURER'S INFORMATION		TYPE OF INCINERATOR			
Ma	nufacturer Name:		Single Chamber			
Mo	del Number:		Multiple Chamber			
Cap	pacity (tons/hour):		Other, describe			
T	OTAL NUMBER OF INCINERATORS AND	THI	EIR DATES OF CONSTRUCTION			
To	otal number of incinerators on site:					
Please provide the manufacture date for each incine coordinates where installed on site in degrees, minu Date(s): Latitude Latitude Latitude		utes, e: e: e:				
FUI	EL TYPE AND INCINERATOR TEMPERA	TURI	E RANGE			
Fuel	1 Type:					
If fu	el oil is burned, what is the sulfur content of the	oil?	%			
Incir	nerator operating temperature range		°F			

III. CONSTRUCTION AND/OR OPERATION OF A POULTRY MORTALITY

IV.	CONSTRUCTION ACTIVITIES DISTURDING ONE ACRE OR MORE				
	Yes, there will be new construction activities disturbing one or more acres of land. This page must be completed.				
d	No, there will be no new construction activities disturbing one or more acres of land. If at a future date you wish to engage in construction activities disturbing one or more acres of land, you must submit an updated DLPNOI by completing Sections IV and V. Engaging in construction activities that disturb one or more acres of land without a modified coverage or issuance of an individual permit is a <u>violation</u> of state law.				
IS	OCUMENTATION OF COMPLIANCE WITH OTHER REGULATIONS/REQUIREMENTS THE PROJECT REROUTING, FILLING OR CROSSING A WATER CONVEYANCE OF ANY KIND es or No)? (If yes, contact the U.S. Army Corps of Engineers' Regulatory Branch for permitting requirements).				
IF DC	THE PROJECT REQUIRES A CORPS OF ENGINEER SECTION 404 PERMIT, PROVIDE APPROPRIATE OCUMENTATION WITH THIS DLPNOI THAT:				
	 •The project has been approved by individual permit, or • The work will be covered by a nationwide permit and <u>NO NOTIFICATION</u> to the Corps is required, or • The work will be covered by a nationwide or general permit and NOTIFICATION to the Corps is required 				
IN	DICATE ANY LOCAL STORM WATER ORDINANCE WITH WHICH THE PROJECT MUST COMPLY:				
PR	OJECT INFORMATION				
To	tal acreages that will be disturbed:				
	scription of the construction activity:				
Nea	arest named receiving stream:				
	there recreational streams, private/public ponds or lakes within ½ mile downstream of project boundary t may be impacted by the construction activity?				
Soi	l Characteristics:				
	Attach a Storm Water Pollution Prevention Plan (SWPPP) that includes the minimum components found under ACT 8, Conditions T-3 through T-10 of the Multimedia General Pollution Control Permit to Manage Litter From a Dry Litter Poultry Operation and/or Construct/Operate Air Emission Equipment and/or Discharge Storm Water in Accordance with the National Pollution Discharge Elimination System.				

V. CERTIFICATION

Note: This application shall be signed according to Conditions T-17 and T-18 found in ACT 6 of the Dry Litter Poultry Animal Feeding Operations Multimedia General Pollution Control Permit No. MSG20.

- For a corporation, by a responsible corporate officer.
- For a partnership, by a general partner.
- For a sole proprietorship, by the proprietor.

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.			
High	10/16/10		
Signature of Responsible Official	Date		
HAI NGUYEN	Owner		
Printed Name	Title		