AI #2353 GAP 20150001





HYDROSTATIC TEST NOTICE OF INTENT (HTNOI)

FOR COVERAGE UNDER MISSISSIPPI'S HYDROSTATIC TEST GENERAL PERMIT GENERAL PERMIT MSG13 0 4 5 9

(Number to be assigned by MDEQ)

INSTRUCTIONS

The Hydrostatic Test Notice of Intent (HTNOI) is for coverage under the Hydrostatic Test General Permit to discharge hydrostatic test water and storm water associated with land disturbing activities of one (1) acre or greater; or for land disturbing activities, which are part of a larger common plan of development or sale that are initially less than one (1) acre but will ultimately disturb one (1) or more acres. Applicant must be the owner or operator. The coverage recipient is responsible for compliance with the conditions of the general permit.

Completed ETNOIs should be filed at least thirty (30) days prior to the commencement of regulated activity. Discharge of hydrostatic test water or storial soller from regulated construction activities without written notification of coverage is a globation of state law.

A USGS quadrangle map or copy is a required submittal. The map shall extend at least one-half of a mile beyond the facility/project property boundary. In the case of linear pipeline projects the map shall extend at least one-half of a mile beyond the pipeline right-of-way. The site location and outfalls must be outlined and labeled. Quad maps can be obtained from the Office of Geology (601-961-5523). If a copy is suhmitted, provide the name of the quadrangle map that is found in upper right hand corner.

Additional submittals may include the following:

- A site-specific Storm Water Pollution Prevention Plan (SWPPP) developed in accordance with ACT8 of the General Permit, if the project includes regulated construction activity disturbing five (5) acres or more
- · A description of proposed water treatment additives as outlined in ACT4, S-4 of the General Permit
- Appropriate Section 404 documentation from U.S. Army Corps of Engineers
- Written authorization from the MDEQ, Office of Land and Water, if water withdrawal from surface waters or ground waters is to be used for the testing. For information call the Office of Land and Water at 601/961-5202

ALL REQUESTED INFORMATION MUST BE PROVIDED (Answer "NA" if not applicable)

APPLICANT IS THE:	✓ OWNER	OPERATOR	(Must check	k one or both)
	OW	NER INFORMATION		
OWNER CONTACT NAME &	POSITION: Toya	Campbell (Environme	ental Project Ma	nager)
OWNER COMPANY NAME:	Tennessee Gas Pip	peline Company		
OWNER STREET (P.O. BOX)	: 1001 Louisiana S	Street, Ste. 1465A		
OWNER CITY: Houston			STATE: Texas	ZIP: 77002
OWNER PHONE # (INCLUD)	E AREA CODE): 71	3-420-5622		

OPERATOR INFORMATION

OPERATOR CONTACT NAME & POS	SITION: Toya Campbell (En	vironmental Proje	ect Manager)
OPERATOR COMPANY: Tennessee	Gas Pipeline Company		
OPERATOR STREET (P.O. BOX): 10	01 Louisiana St., 1465A		
OPERATOR CITY: Houston		STATE: TX	ZIP: 77002
OPERATOR PHONE # (INCLUDE AR	EA CODE): 713-420-5622		
	FACILITY/PROJECT INFOR	MATION	
FACILITY/PROJECT NAME: Spike	Test 70 at 843-1B		SIC Code: 4 9 2 2
PIPELINE, STORAGE TANK OR FLO	OWLINE BEING TESTED IS:	NEW NEW	✓ USED
IF USED, LIST PRIOR MATERIAL SI	ERVICE OF EQUIPMENT: N	atural Gas Transp	ortation Pipeline
IF REGULATED LAND DISTURBING (NOTE: A construction SWPPP must be PHYSICAL SITE ADDRESS (If not available to the supplier of th	e attached with this HTNOI, if on a state of the state of	disturbing five (5) ac road. Linear project	eres or more).
STREET: 1165 Tennessee Gas Rd.,			
COUNTY: Humphreys		ZIP: 38754	
TYPE OF TREATMENT (IF PROVIDI	ED): Carbon filtration and fi	tration through h	ay bale energy dissipation
I certify under penalty of law that this document system designed to assure that qualified persons person or persons who manage the system, or the best of my knowledge and belief, true, accur information, including the possibility of fines and system of the possibility of the possibility of the possibility of fines and system of the possibility o	nel properly gathered and evaluated lose persons directly responsible for late and complete. I am aware that d/or imprisonment for knowing vio	the information subning the informathering the informathere are significant plations.	nitted. Based on my inquiry of the ation, the information submitted is,
Gina B. Dorsey			S Project Permitting
Printed Name		Title	3
 This application shall be signed according For a corporation, by a responsible co For a partnership, by a general partne For a sole proprietorship, by the prop For a municipal, state or other public 	rporate officer. er. rietor.		r ranking elected official.
HTNOI forms must be submitted to:	Chief, Environmental Permits MS Dept of Environmental Qu P.O. Box 2261		ution Control
	Jackson, Mississippi 39225		Revised: 06/0

OUTFALL INFORMATION

(To be submitted with HTNOI and Major Modification Forms)

INSTRUCTIONS:

- 1. For each outfall, complete the information in the table below (NOTE: Complete the last column of this form, only if it is being submitted with a Major Modification Form).
- 2. All outfalls must be spotted and labeled on a USGS quadrangle map.

OUTALL NO.	LATITUDE ¹ (deg/mln/sec)	LONGITUDE ¹ (deg/mln/sec)	SOURCE OF FILL WATER	NEAREST REC	ONN	MDEQ 3(D) T? 3	н	AS DL? ³	EST. TOTAL DISCHARGE (MIL GAL)	TA PIPE FLOV	US OF NK, LINE, VLINE TC.	EXPECTED TEST DATE(S) (mm/dd/yr)	INDICATE WHETHER OUTFALL IS NEW OF EXISTING
001		90°27'26.44"Y	Sixmile Lake	Sixmile Lake		1		1	4		-	09/1/2015	
002													
003													
004													
005													
006													
007													
008													
009													
010													
011													
012													

Revised: 06/01/11

¹ List the latitude and longitude of its location to the nearest 15 seconds.

² Name of the nearest named receiving stream as listed on a USGS Quad Map.

³ MDEQ's 303(d) List of Impaired Water Bodies and approved TMDLs can be found at: http://www.deq.state.ms.us/MDEQ.nsf/page/TWB_Total_Maximum_Daily_Load_Section