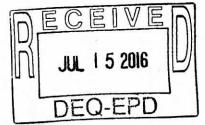
AI # 70176 Gnp20160002

OWNER CONTACT PERSON:





CONSTRUCTION NOTICE OF INTENT (CNOI) FOR COVERAGE UNDER CONSTRUCTION STORM WATER GENERAL NPDES PERMIT MSR10 1228

(NUMBER TO BE ASSIGNED BY STATE)

FILE AT LEAST 30 DAYS PRIOR TO THE COMMENCEMENT OF CONSTRUCTION; 15 DAYS IF A STORM WATER POLLUTION PREVENTION PLAN (SWPPP) IS ALREADY ON FILE. DISCHARGE OF STORM WATER FROM A CONSTRUCTION SITE WITHOUT WRITTEN NOTIFICATION OF COVERAGE IS A VIOLATION OF STATE LAW

INSTRUCTIONS

SUBMITTALS WITH THIS CNOI MUST INCLUDE: A USGS QUAD MAP (OR A COPY) SHOWING SITE LOCATION AND STORM WATER OUTFALLS AND STORM WATER POLLUTION PREVENTION PLAN (SWPPP). SEE CONSTRUCTION GENERAL PERMIT PART III.

ADDITIONAL SUBMITTALS MAY INCLUDE DOCUMENTATION OF SWPPP APPROVAL WITH LOCAL ORDINANCES (CONSTRUCTION GENERAL PERMIT PART III. B.); APPROPRIATE SECTION 404 DOCUMENTATION FROM CORPS OF ENGINEERS (IF REQUIRED); APPROPRIATE DOCUMENTATION FROM HEALTH DEPARTMENT AND/OR MDEQ/OPC FOR FUTURE DISPOSAL OF SANITARY SEWAGE AND SEWAGE COLLECTION SYSTEM; APPROPRIATE DOCUMENTATION FROM MDEQ/OFFICE OF LAND & WATER, FOR DAM CONSTRUCTION AND LOW FLOW REQUIREMENTS.

APPLICANT MUST BE OWNER OR PRIME CONTRACTOR. THE APPLICANT RECEIVES COVERAGE AND IS RESPONSIBLE FOR PERMIT COMPLIANCE. OWNER MAY APPLY AND AT A LATER DATE REQUIRE PRIME CONTRACTOR TO ASSUME PERMIT COMPLIANCE (SEE PRIME CONTRACTOR CERTIFICATION)..

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

IS APPLICANT THE OWNER OR PRIME CONTRACTOR? (CIRCLE ONE OR BOTH) OWNER INFORMATION

Justin Wooten

OWNER COMPANY NAME: 31 1000 [FA TQT/]
OWNER STREET (P.O. BOX): 150 Nazary La. OWNER CITY: 4 thage STATE: M5 ZIP: 39051 OWNER PHONE # (INCLUDE AREA CODE): (60) 678-8033
OWNER PHONE # (INCLUDE AREA CODE): (60) 678-8033
PRIME CONTRACTOR INFORMATION
PRIME CONTRACTOR CONTACT PERSON: WWW WY OWNLY
PRIME CONTRACTOR COMPANY:
PRIME CONTRACTOR STREET (P.O. BOX):
PRIME CONTRACTOR CITY:STATE:ZIP:
PRIME CONTRACTOR PHONE # (INCLUDE AREA CODE):

PROJECT INFORMATION

PROJECT NAME: J. Wooten Form		
DESCRIPTION OF CONSTRUCTION ACTIVITY: 6 Poultry houses (Broiler)		
Area will be Shaped and smothed to construct		
Broiles houses		
PROPOSED DESCRIPTION OF PROPERTY USE AFTER CONSTRUCTION HAS BEEN COMPLETED (INCLUDE STANDARD INDUSTRIAL CLASSIFICATION CODE (SIC) IF KNOWN):		
6. Portry houses (Broilers) SIC Code		
PHYSICAL SITE ADDRESS (IF NOT AVAILABLE INDICATE THE NEAREST NAMED ROAD - FOR LINEAR PROJECTS INDICATE BEGINNING OF PROJECT. IN ADDITION, IDENTIFY ALL COUNTIES THAT LINEAR PROJECT TRAVERSES.): STREET: 150 Nazary La. CITY: Lathage Ms., County: Leake ZIP: 39051		
NEAREST NAMED RECEIVING STREAM: Pollard Creek		
ARE THERE ANY WETLANDS, RECREATIONAL STREAMS, PRIVATE/PUBLIC PONDS OR LAKES WITHIN ½ MILE DOWNSTREAM OF PROJECT BOUNDRY?		
TOTAL ACREAGE THAT WILL BE DISTURBED¹:		
EST. START DATE: Sep 1 2016 EST. COMPLETION DATE: March 1, 2017		
TYPE SOIL ON SITE: Line SAndy Fran		

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

IS A LAKE REQUIR IF SO, PROVIDE AF DAM SAFETY.	ING THE CONSTRUCTIO PROPRIATE APPROVAL	N OF A DAM BEING PROPOSI DOCUMENTATION FROM MI	DO (Yes or No)? NO DEQ, OFFICE OF LAND AN	D WATER,
IF THE PROJECT I SANITARY SEWAG	S A SUBDIVISION, INDUST E BE DISPOSED? Circle or	FRIAL PARK OR LARGE APA e of the following and attach the	RTMENT COMPLEX HOW pertinent documents.	WILL
1. Existing Munic specifications f	<u>ipal or Commercial System.</u> or the collection system have	Please attach a copy of the letter been submitted and approved.	from MDEQ that the plans a	ind
2. Collection and permit from M	Treatment System will be Co DEQ or indicate the date the	onstructed. Please attach a copy of application was submitted to M	of the cover of the NPDES disc DEQ (Date:	charge)
of General Acc	eptance from the Mississippi	tems for Subdivisions Less than 3 State Department of Health or c t individual onsite wastewater dis	ertification from a registered	f the Letter professional
feasibility of in response from is not feasible,	stalling a central sewage coll MDEQ concerning the feasil then please attach a copy of to om a registered professional	tems for Subdivisions Greater the ection and treatment system mus pility study must be attached. If a the Letter of General Acceptance engineer that the platted lots sho	t be made by MDEQ. A copy a central collection and wasted from the State Department o	of the water system f Health or
IF THE PROJECT I		E, HOW WILL SANITARY SE		

STORM WATER POLLUTION PREVENTION PLAN (SWPPP) AND USGS QUAD MAP REQUIREMENT

	
ATTACH A CONSTRUCTION SWPPP THAT INCLUDES THE M OF THE CONSTRUCTION PERMIT.	INIMUM COMPONENTS FOUND IN PART III.C.
INDICATE ANY ASSOCIATION OR GENERIC SWPPP – ADDITIONAL AND SEDIMENT CONTROLS LOCATED ON THE PROJECT SITE MAP. FOR I PROVIDE DRAWINGS OF TYPICAL CONTROLS USED (SEE PERMIT):	INEAR PROJECTS (ROAD AND PIPELINE PROJECTS)
ATTACH A USGS QUAD MAP OR COPY OF QUAD MAP EXTENTHE SITE'S PROPERTY BOUNDRY OUTLINING THE SITE LOGOFFICE OF GEOLOGY: 601-961-5523).	IDING AT LEAST ONE-HALF OF A MILE BEYOND CATION. (QUAD MAPS CAN BE OBTAINED FROM THE
IF A COPY IS SUBMITTED PROVIDE THE NAME OF THE QUA	D MAP (FOUND IN UPPER RIGHT HAND CORNER OF MAP)
I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE W	ITH A SYSTEM DESIGNED TO ASSURE THAT
QUALIFIED PERSONNEL PROPERLY GATHERED AND EVALUATION MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGI	THE SYSTEM, OR THOSE PERSONS DIRECTLY
RESPONSIBLE FOR GATHERING THE INFORMATION, THE INF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE AND COMP	ORMATION SUBMITTED IS, TO THE BEST OF
SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMA AND IMPRISONMENT FOR KNOWING VIOLATIONS.	TION, INCLUDING THE POSSIBILITY OF FINE
ant Wooter	6/29/016 Date Signed
Signature (Must be signed by operator when different than owner)	Date Signed
Tustin Wooten Printed Name	OWNER
Printed Name	Title
¹ This application shall be signed according to the General Permit, Part - For a corporation, by a responsible corporate officer.	V.E., 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.

Duly Authorized Representative.

PRIME CONTRACTOR CERTIFICATION

The prime contractor, if different from original applicant, will take responsibility for permit compliance by filing this certification prior to the commencement of construction. This certification is unnecessary when the prime contractor has already completed, signed, and submitted pages 1, 2, 3 and 4 of the CNOI. By completing and submitting this certification to MDEQ, the prime contractor accepts full responsibility for permit compliance and meeting all permit conditions. Otherwise the initial applicant (applicant who filed pages 1, 2, 3 and 4 of the CNOI) is solely responsible for permit compliance. 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	IATIO	INFORM	ACTOR	CONTR	PRIME
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PRIME CONTRACTOR INFORMATION	
PRIME CONTRACTOR CONTACT PERSON: JUSTin Wooks PHONEN	NUMBER: 1001-1078-8033
PRIME CONTRACTOR COMPANY: J. Laboten Farms	
PRIME CONTRACTOR STREET (P.O. BOX): 4291 Risher Pol	
PRIME CONTRACTOR CITY: <u>Cartnage</u> STATE: <u>MS</u>	ZIP: 39051
OWNER INFORMATION	
OWNER CONTACT PERSON: Justin Woolen PHONE NUMBE	R: 601-678-8095
OWNER COMPANY NAME: J. Woolen Farms	
PROJECT INFORMATION	
construction storm water general permit coverage number: \mathbf{MSR}	10
	10
PROJECT NAME: Noven Farms	
DESCRIPTION OF CONSTRUCTION ACTIVITY: & acres area will be a	electred, shaped
and smoothed.	
PHYSICAL SITE ADDRESS (IF NOT AVAILABLE INDICATE THE NEAREST NAMED ROAD - FOR LINEAR BEGINNING OF PROJECT. IN ADDITION, IDENTIFY ALL COUNTIES THAT LINERAR PROJECT TRAVERSES	AR PROJECTS INDICATE
STREET: 150 Nazany Ln	.,,
CITY: <u>Carthage</u> , county: <u>Leake</u>	
I CERTIFY THAT I AM THE PRIME CONTRACTOR FOR THIS PROJECT AND WILL CONREQUIREMENTS IN THE ABOVE REFERENCED GENERAL NPDES PERMIT.	MPLY WITH ALL THE
I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PI EVALUATED THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WH THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUMY KNOWLEDGE AND BELIEF, TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGN SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KN	ROPERLY GATHERED AND O MANAGE THE SYSTEM, OR BMITTED IS, TO THE BEST OF
Prime Contractor Signature Date Signed	
,	
Tustin Wooten Owner Title	
This application shall be signed according to the General Permit, Part V.E., as follows: - For a corporation, by a responsible corporate officer.	

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.

Duly Authorized Representative.