

AI # 24337



MISSISSIPPI DEPARTMENT OF
ENVIRONMENTAL QUALITY

SEP 14 2017

MDEQ

WET DECK LOG SPRAY WITH RECIRCULATION GENERAL PERMIT RE-COVERAGE FORM

FOR COVERAGE UNDER MISSISSIPPI'S REISSUED
WET DECK LOG SPRAY WITH RECIRCULATION GENERAL PERMIT MSG17
GENERAL NPDES COVERAGE NO. MSG17 0 0 1 8

INSTRUCTIONS

The submittal of this form is required to receive coverage under the reissued Wet Deck Log Spray with Recirculation General Permit. This form must be completed and returned to the address printed at the bottom of page 2 within 30 days of the date of the Letter of Instruction for Re-Coverage. For expanding facilities, please also complete Recoverage Form Addendum.

The signatory of this form must be the owner or operator who is the current coverage recipient (rather than the plant/site manager or environmental consultant). The coverage recipient is responsible for permit compliance.

If the facility is out of business or no longer a regulated facility, please request termination of coverage by completing the Request for Termination (RFT) Form found in the Wet Deck Log Spray with Recirculation General Permit. Facilities that continue to discharge wastewater without applicable permit coverage are in violation of state law.

Do not submit this form if submitting a "Request for Termination" (RFT).

ALL INFORMATION MUST BE COMPLETED (Enter "NA" if not applicable).

The Certificate of Coverage should be mailed to: ☒ owner/operator ☐ facility (please check one)

Are there any ongoing or proposed construction activities which involve the Wet Deck Log Spray Recirculation System (Please specify): N/A - No construction activities are currently ongoing or proposed.

COVERAGE RECIPIENT INFORMATION

CONTACT NAME & POSITION: Craig Pharr, President

COMPANY NAME: Marietta Wood Supply, Inc.

STREET OR P.O. BOX: P.O. Box 225

CITY: Marietta STATE: Mississippi ZIP: 38856

PHONE NUMBER (INCLUDE AREA CODE): (662) 728-9874

FACILITY INFORMATION

FACILITY NAME: Marietta Wood Supply, Inc.

CONTACT NAME & POSITION: Craig Pharr, President

CONTACT PHONE NUMBER (INCLUDE AREA CODE): (662) 728-9874

PRIMARY STANDARD INDUSTRIAL CLASSIFICATION (SIC) CODE & DESCRIPTION OF INDUSTRIAL ACTIVITY:

2 4 2 1 Sawmill Operations

PHYSICAL SITE ADDRESS: STREET: 349 Highway 371

CITY: Marietta COUNTY: Prentiss ZIP: 38856

PROVIDE THE COORDINATES OF THE PLANT ENTRANCE:

LATITUDE: 34 degrees 30 minutes 43 seconds LONGITUDE: 88 degrees 28 minutes 12 seconds

WET DECK LOG SPRAY RECIRCULATION SYSTEM INFORMATION

HOW MANY OUTFALLS/RELEASE POINTS ARE ELIGIBLE FOR COVERAGE? 2

GEOGRAPHIC POSITION FOR OUTFALL(S) FROM WET DECK LOG SPRAY RECIRCULATION POND(S) (IF THE APPLICANT HAS MORE THAN ONE OUTFALL/ RELEASE POINT ELIGIBLE FOR COVERAGE, PLEASE USE THE SPACE TO THE RIGHT.):

LATITUDE: 34 degrees 30 minutes 45 seconds Outfall 2: LATITUDE: 34 degrees 30 minutes 39 seconds

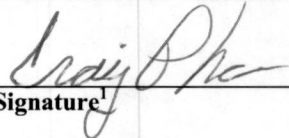
LONGITUDE: 88 degrees 28 minutes 13 seconds LONGITUDE: 88 degrees 28 minutes 15 seconds

RECEIVING STREAM(S) (IF MORE THAN ONE OUTFALL IS COVERED, INDICATE THE RESPECTIVE RECEIVING STREAM FOR EACH OUTFALL.):

Both outfalls drain to Young's Creek.

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 fines and imprisonment for knowing violations.

I further certify that I understand when coverage is terminated the facility is no longer authorized to discharge storm water associated with industrial activity under this general permit. I understand that discharging pollutants in storm water associated with industrial activity to waters of the state without NPDES coverage is in violation of state law.


Signature

Craig Pharr

Printed Name¹

9-11-17
Date

President

Title

¹This form 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.

After signing please mail to:

Chief, Environmental Permits Division,
MS Department of Environmental Quality, Office of Pollution Control
P.O. Box 2261
Jackson, Mississippi 39225

F0008

2017056536

Fee: \$ 25



DELBERT HOSEMANN
Secretary of State

P.O. BOX 136
JACKSON, MS 39205-0136

Business ID: 619293
Filed: 02/21/2017 09:52 AM
C. Delbert Hosemann, Jr.
Secretary of State

TELEPHONE: (601) 359-1633

2017 Corporate Annual Report

Business Information

Business ID: 619293

Business Name: MARIETTA WOOD SUPPLY,
INC.

State of Incorporation: MS

Business Email: maryiln@jonesandjonescpa.com

Phone: (***)***-****

FEIN: **-*****

Principal Address: 383 HWY 371
MARIETTA, MS 38856

Registered Agent

Name: Tucker, Daniel K

Address: 109 North College Street;PO Box 430
Booneville, MS 38829

Officers

Title/Name:

Address:

Director:

President: Craig Pharr

383 Hwy 371
Marietta, MS 38856

☒

Vice President:

☐

Secretary: Felicia Pharr

PO Box225
Marietta, MS 38856

☒

Treasurer: Felicia Pharr

PO Box225
Marietta, MS 38856

☒

Stocks

<i>Class:</i>	<i>Authorized:</i>	<i>Series:</i>	<i>Issued:</i>
Common	0		0
Common	0		0
Common	200	1	117

NAICS Code/Nature of Business

321920 - Wood Container and Pallet Manufacturing

321920 - Wood Container and Pallet Manufacturing

321920 - Wood Container and Pallet Manufacturing

Signature

By entering my name in the space provided, I certify that I am authorized to file this document on behalf of this entity, have examined the document and, to the best of my knowledge and belief, it is true, correct and complete as of this day ***02/21/2017***.

Name:

Craig Pharr
President

Address:

383 Hwy 371
MARIETTA, MS 38856

Officers List

Name:

Craig Pharr
Director, President

Felicia Pharr
Director, Secretary, Treasurer

Address:

383 Hwy 371
Marietta, MS 38856

PO Box225
Marietta, MS 38856

Corporate Office:

P.O. Box 356 (282 Third Ave)
Sherman, MS 38869
Office: (662) 840-5945
Fax: (662) 840-5965

Other Offices:

Jackson, MS
Ocean Springs, MS
Established in 2002
www.envirocomp.net

September 6, 2017

Krystal Rudolph, P.E., BCEE
Chief, Environmental Permits Division
Environmental Permits Division
Mississippi Department of Environmental Quality
P.O. Box 2261
Jackson, MS 39225

Re: Wet Deck Log Spray General Permit Re-Coverage Form
Marietta Wood Supply, Inc.
Ref. No. MSG170018
Marietta, Mississippi
Prentiss County

RECEIVED

SEP 14 2017

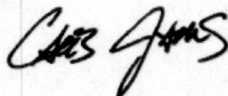
Dept. of Environmental Quality

Dear Ms. Rudolph:

Pursuant to your letter, we understand that the Wet Deck Log Spray General Permit for Industrial Activities (MSG17) was reissued on July 31, 2017. Marietta Wood Supply, Inc. (Marietta) is providing a completed Wet Deck Log Spray with Recirculation General Permit Re-Coverage Form as Attachment I. In addition, Proof of Registration with the Mississippi Secretary of State is provided as Attachment II. Per the instructions provided for re-coverage, expanding facilities are further required to submit a Re-coverage Form Addendum. No expansion activities are currently ongoing or proposed; therefore, Marietta has not completed the Re-coverage Form Addendum.

If you have any questions concerning the attached information, please feel free to contact me at (662) 840-5945 or Lisa Pharr of Marietta at (662) 728-9874.

Sincerely,



Caleb James
Project Manager

Attachments: Attachment I – Wet Deck General Permit Re-coverage Form
Attachment II – Proof of Registration