MSR ₁₀		
ATOILI	 	

(NUMBER TO BE ASSIGNED BY STATE)

APPLICANT IS THE:	□ OWNER 🂢 P	PRIME CONTRACTOR	
	OWNER CONTA	ACT INFORMATION	
	L NAME:		
OWNER STREET OR P.O. I	OUX:	STATE:	ZIP:
OWNER CITY:	OV	WNER EMAIL:	
		CONTACT INFORMATION	~
PRIME CONTRACTOR CO	NTACT PERSON:	ichelle Stephens	Consta Tuc
PRIME CONTRACTOR CO	MPANY LEGAL NAME:	Stephens Construction	+ contiet The
PRIME CONTRACTOR ST			2/00/19
PRIME CONTRACTOR CIT	ry: Luverne	STATE:	ZIP: 200 4 7
PRIME CONTRACTOR PH	ONE #: (334) 335-38/JE	RIME CONTRACTOR EMAIL: S	tephense coolagnan
	FACILITY SI	TE INFORMATION	
		Ravel Resultacing	
FACILITY SITE ADDRESS indicate the beginning of the pro-	(If the physical address is not roject and identify all counties	available, please indicate the nearest nan the project traverses.)	ned road. For linear projects
STREET: CITY: Luni Co	oves Rd Stackpil	county: Tunica	ZIP:
,	ARID ID (B)/A IC 4 cmmline	blah	
LATITUDE: 34 degrees	$\frac{8}{\text{minutes}}$ seconds	LONGITUDE: 90 degrees 33 min	autes <u>seconds</u>
LAT & LONG DATA SOUR	CE (GPS (Please GPS Project Ent	rance/Start Point) or Map Interpolation):	e attached
TOTAL ACREAGE THAT	WILL BE DISTURBED 1:_	10	7.74
IS THIS PART OF A LARG	ER COMMON PLAN OF D	DEVELOPMENT?	YES□ NO 🖺
IF YES, NAME OF LARGE AND PERMIT COVE	R COMMON PLAN OF DE RAGE NUMBER: MSR10_		2000 000
ESTIMATED CONSTRUCT	ΓΙΟΝ PROJECT START DA	ATE:	YYYY-MM-DD
ESTIMATED CONSTRUCT			2021 5 3
		braveling an existing	
PROPOSED DESCRIPTIO	N OF PROPERTY USE AF	TER CONSTRUCTION HAS BEEN C	OMPLETED:
SIC Code	NAICS Code		

NEAREST NAMED RECEIVING STREAM:	Mississippi River
IS RECEIVING STREAM ON MISSISSIPPI'S 30	103(d) LIST OF IMPAIRED WATER 1 TMDL stream segments may be found on MDEQ's web site: 1 Total Maximum Daily Load Section)
HAS A TMDL BEEN ESTABLISHED FOR THE	
ARE THERE RECREATIONAL STREAMS, PR WITHIN ½ MILE DOWNSTREAM OF PROJEC ACTIVITY?	RIVATE/PUBLIC PONDS OR LAKES YES NO CT BOUNDRY THAT MAY BE IMPACTED BY THE CONSTRUCTION
EXISTING DATA DESCRIBING THE SOIL (for	or linear projects please describe in SWPPP):
WILL FLOCCULANTS BE USED TO TREAT T	TURBIDITY IN STORM WATER? YES□ NÒ♥
IF YES, INDICATE THE TYPE OF FLOCCULA	ANT. ANIONIC POLYACRYLIMIDE (PAM) OTHER
IF YES, DOES THE SWPPP DESCRIBE THE MAND THE LOCATION OF WHERE FLOCCUL	METHOD OF INTRODUCTION, THE LOCATION OF INTRODUCTION LATED MATERIAL WILL SETTLE? YES □ NO□

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

		IDEQ PERMITS A			
IS LCN	OI FOR A FACILITY	THAT WILL	REQUIRE O	THER PERMITS?	YES NO 🗆
IF YES	S, CHECK ALL THAT	APPLY:	AIR □	HAZARDOUS WASTE	□ PRETREATMENT
	☐ WATER STATE C			VIDUAL NPDES	□ OTHER: USACE
IS THI OF AN	E PROJECT REROUT YY KIND? (If yes, cont	ING, FILLING act the U.S. Ar	G OR CROSS my Corps of]	ING A WATER CONVEYAN Engineers' Regulatory Branch	ICE YES ▼ NO □ for permitting requirements.)
IF TH	E PROJECT REQUIR	ES A CORPS (OF ENGINER	ER SECTION 404 PERMIT, P	PROVIDE APPROPRIATE
6	The project has been a	pproved by ind	ividual permi	t, or	
-	The work will be cover	ed by a nation	vide permit a	nd NO NOTIFICATION to the	e Corps is required, or
•	The work will be cover	ed by a nation	wide or gener	al permit and NOTIFICATIO	N to the Corps is required
(If ves	, provide appropriate a	ipproval docun	ientation iron	DAM BEING PROPOSED? n MDEQ Office of Land and V	YES ☐ NO Water, Dam Safety.)
BE DI	SPOSED? Check one	of the following	and attach ti	le per tillent documents.	OW WILL SANITARY SEWAGE
	associated "Information Hancock, Harrison, Jack of LCNOI submittal, I collection and treatme properly. The letter n	on Regarding P son, Pearl River MDEQ will acc nt that the flow nust include the	and Stone Cou ept written ac s generated f	nties. If the plans and specific knowledgement from official(s rom the proposed project can sw.	and wanted
	permit from MDEQ o	r indicate the d	ate the applic	ation was submitted to MIDE	e cover of the NPDES discharge (Date:)
	of General Acceptanc engineer that the plat	e from the Miss ted lots should	support indiv	idual onsite wastewater dispos	
	feasibility of installing response from MDEC is not feasible, then pl certification from a redisposal systems.	a central sewa concerning th ease attach a congistered profes	ge collection e feasibility st opy of the Let ssional engine	and treatment system must be udy must be attached. If a cer ter of General Acceptance from that the platted lots should seem that the platted lots should seem to be a seem of the seem of	5 Lots. A determination of the made by MDEQ. A copy of the ntral collection and wastewater system the State Department of Health or support individual onsite wastewater
INDI	CATE ANY LOCAL S	STORM WATE	ER ORDINAN	NCE WITH WHICH THE PRO	OJECT MUST COMPLY:

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 Applicant¹ (owner or prime contractor)

Date Signed

Printed Name1

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

PRIME CONTRACTOR CERTIFICATION

LARGE CONSTRUCTION GENERAL PERMIT

Coverage No. MSR10

County

(Fill in your Certificate of Coverage Number and County)



By completing and submitting this form to MDEQ, the prime contractor is certifying that (1) they have operational control over the erosion and sediment control specifications (including the ability to make modifications to such specifications) or (2) they have day-to-day operational control of those activities at the site necessary to ensure compliance with the SWPPP and applicable permit conditions.

The owner(s) of the property and the prime contractor associated with regulated construction activity on the property have joint and severable responsibility for compliance with the permit. 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

PRIME CONTRACTOR CONTACT PERSON: Michel	6 Stephons PHONE NUMBER: 335-380		
PRIME CONTRACTOR COMPANY: Stephens (unstruction o Concrete INC		
PRIME CONTRACTOR STREET (P.O. BOX): 99 K	Ag Mart Dr		
PRIME CONTRACTOR CITY: WERRY	STATE: AL ZIP: 34049		
E-MAIL ADDRESS:			
OWNER IN	FORMATION		
OWNER CONTACT PERSON: Michelle Stop	LINS PHONE NUMBER: 354 335-3800		
OWNER COMPANY NAME:			
PROJECT INFORMATION			
PROJECT NAME: 49200 Levele Graw	el Resuppacing		
Regnavely an existing	I wer that already graveld		
PHYSICAL SITE ADDRESS (If the physical address is not avaindicate the beginning of the project and identify all counties th	ilable indicate the nearest named road. For linear projects,		
STREET: GRAVES Rd Stockpiled			
CITY:COUN	ry: Tunica		
I certify that I am the prime contractor for this project and will comply with all the requirements in the above referenced general NPDES permit. I further 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 talse information, including the possibility of fine and imprisonment for knowing violations.			
Prime Contractor Signature	Date Signed		
Printed Name	Title		
¹ This application shall be signed as follows:	This Prime Contractors Certification form shall be submitted to:		

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.

Chief, Environmental Permits Division

MS Department of Environmental Quality, Office of Pollution Control

P.O. Box 2261

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