

AI: 79009



MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY

# HYDROSTATIC TEST NOTICE OF INTENT (HTNOI)

## FOR COVERAGE UNDER MISSISSIPPI'S HYDROSTATIC TEST

### GENERAL PERMIT GENERAL PERMIT MSG13 0583

(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. Applicant must be the owner or operator. The coverage recipient is responsible for compliance with the conditions of the general permit.

Completed HTNOIs should be filed at least thirty (30) days prior to the commencement of regulated activity. Discharge of hydrostatic test water without written notification of coverage is a violation of state law.

If the company seeking coverage is a corporation, a limited liability company, a partnership, or a business trust, attach proof of its registration with the Mississippi Secretary of State and /or its Certificate of Good Standing. This registration or Certificate of Good Standing must be dated within twelve (12) months of the date of the submittal of this coverage form. Coverage will be issued in the company name as it is registered with the Mississippi Secretary of State.

IF REGULATED LAND DISTURBING ACTIVITIES ARE TO OCCUR, LIST ACRES DISTURBED: NA  
NOTE: If disturbing five (5) acres or more, a stormwater construction coverage is required.

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 submitted, provide the name of the quadrangle map that is found in upper right hand corner.

Additional submittals may include the following:

- Labeled site drawing noting the outfall(s) associated with hydrostatic test water discharge(s)
- List of chemical Additives,
- Appropriate Section 404 documentation from U.S. Army Corps of Engineers, or
- 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 one or both)

#### OWNER INFORMATION

OWNER CONTACT NAME & POSITION: Cale LeBlanc, Director Environmental, New Projects

OWNER EMAIL ADDRESS: Cale.Leb Blanc@bwpipelines.com

OWNER COMPANY NAME: Gulf South Pipeline Company, LLC

OWNER STREET (P.O. BOX): 9 Greenway Plaza, Suite 2800

OWNER CITY: Houston STATE: TX ZIP: 77406

OWNER PHONE # (INCLUDE AREA CODE): (225) 282-0389

*re-received via email 3.15.21*

OPERATOR INFORMATION

OPERATOR CONTACT NAME & POSITION: Cale LeBlanc, Director Environmental, New Projects
OPERATOR EMAIL: Cale.LebLANC@bwpipelines.com
OPERATOR COMPANY: Gulf South Pipeline Company, LLC
OPERATOR STREET (P.O. BOX): 9 Greenway Plaza, Suite 2800
OPERATOR CITY: Houston STATE: TX ZIP: 77406
OPERATOR PHONE # (INCLUDE AREA CODE): (225) 282-0389

FACILITY/PROJECT INFORMATION

FACILITY/PROJECT NAME: Index 381-24 Yazoo River Replacement Project PN 11732
PIPELINE, STORAGE TANK OR FLOWLINE BEING TESTED IS: [X] NEW [ ] USED
IF USED, LIST PRIOR MATERIAL SERVICE OF EQUIPMENT: N/A
PHYSICAL SITE ADDRESS (If not available, indicate nearest named road. Linear projects indicate beginning of project):
STREET: Interstate 61 and State Highway 3 CITY: Redwood
COUNTY: Warren ZIP: 39156
Facility site tribal land ID (NA if not applicable) N/A
TYPE OF TREATMENT (IF PROVIDED): Filtration and dechlorination (if necessary)
SIC Code 4922 NAICS Code 21120, 486210

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/or imprisonment for knowing violations.

3/15/2021

Signature (Must be signed by operator when different than owner)

Date Signed

Cale LeBlanc

Director Environmental, New Projects

Printed Name

Title

This application shall be signed according to ACT6, T-17 of the General Permit, 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, the mayor, or ranking elected official.

HTNOI forms must be submitted to: Chief, Environmental Permits Division
MS Dept of Environmental Quality, Office of Pollution Control
P.O. Box 2261
Jackson, Mississippi 39225