## MSR10 2 4 1 3 (NUMBER TO BE ASSIGNED BY STATE)

APPLICANT IS THE:	TOR				
OWNER CONTACT INFORMATIO	DN				
OWNER CONTACT PERSON: John C. Taylor					
OWNER COMPANY LEGAL NAME: Mississippi Dept. Of Transportat	tion				
OWNER STREET OR P.O. BOX: P.O.Box. 1850					
OWNER CITY: Jackson STATE: Ms	ZIP. 39215				
OWNER PHONE #: (601 ) 359-7250 OWNER EMAIL: JTaylo	or@mdot.ms.gov				
PRIME CONTRACTOR CONTACT INFOR					
PRIME CONTRACTOR CONTACT PERSON:					
PRIME CONTRACTOR COMPANY LEGAL NAME:					
PRIME CONTRACTOR STREET OR P.O. BOX:					
PRIME CONTRACTOR CITY:STATE:	7IP.				
PRIME CONTRACTOR PHONE #: ( PRIME CONTRACTOR					
FACILITY SITE INFORMATION					
FACILITY SITE NAME: MDOT Tate and Tunica 103330/302000/303000					
FACILITY SITE ADDRESS (If the physical address is not available, please indicate the nearest named road. For linear projects indicate the beginning of the project and identify all counties the project traverses.)  STREET: SR 3					
CITY: Savage STATE: MS COUNTY: Tat	e and Tunica ZIP: 38665				
FACILITY SITE TRIBAL LAND ID (N/A If not applicable): N/A					
LATITUDE: 34 degrees 37 minutes 47 seconds LONGITUDE: 90 degr	es 19 minutes 36 seconds				
LAT & LONG DATA SOURCE (GPS (Please GPS Project Entrance/Start Point) or Map Interpo					
TOTAL ACREAGE THAT WILL BE DISTURBED 1: 27 AC	nation).				
IS THIS PART OF A LARGER COMMON PLAN OF DEVELOPMENT?	YES□ NO ☑				
IF YES, NAME OF LARGER COMMON PLAN OF DEVELOPMENT:  AND PERMIT COVERAGE NUMBER: MSR10	TES LING W				
ESTIMATED CONSTRUCTION PROJECT START DATE:	2021-07-22				
ESTIMATED CONSTRUCTION PROJECT END DATE:	YYYY-MM-DD 2024-07-22 YYYY-MM-DD				
DESCRIPTION OF CONSTRUCTION ACTIVITY: Bridge Replacement	1111-MM-DD				
PROPOSED DESCRIPTION OF PROPERTY USE AFTER CONSTRUCTION HAS BEEN COMPLETED: Highway Use					
SIC Code 1 6 1 1 NAICS Code 2 3 7 3 1 0	The second second second				

NEAREST NAMED RECEIVING STREAM: Coldwater R	iver; Unnamed steam thence	into Arkabutla	Creek
IS RECEIVING STREAM ON MISSISSIPPI'S 303(d) LIST BODIES? (The 303(d) list of impaired waters and TMDL strenttp://www.deq.state.ms.us/MDEQ.nsf/page/TWB_Total_Maxim	am comments may be found on I	YES☑ MDEQ's web site:	NO□
HAS A TMDL BEEN ESTABLISHED FOR THE RECEIVE	NG STREAM SEGMENT?	YES	NO□
ARE THERE RECREATIONAL STREAMS, PRIVATE/PU WITHIN ½ MILE DOWNSTREAM OF PROJECT BOUND ACTIVITY?	BLIC PONDS OR LAKES RY THAT MAY BE IMPACTE	YES Z D BY THE CONS	NO□ TRUCTION
EXISTING DATA DESCRIBING THE SOIL (for linear project, CH, ML, SP, SP-ML	ects please describe in SWPPP)	•	
WILL FLOCCULANTS BE USED TO TREAT TURBIDITY	IN STORM WATER?	YES□	NOZ
IF YES, INDICATE THE TYPE OF FLOCCULANT.	□ ANIONIC POLYACRY □ OTHER	LIMIDE (PAM)	
IF YES, DOES THE SWPPP DESCRIBE THE METHOD OF AND THE LOCATION OF WHERE FLOCCULATED MAT	INTRODUCTION, THE LOC	ATION OF INTR	ODUCTION NO

<sup>&</sup>lt;sup>1</sup>Acreage for subdivision development includes areas disturbed by construction of roads, utilities and drainage. Additionally, a housesite of at least 10,000 ft<sup>2</sup> 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

IS LC	NOI FOR A FACILITY THAT WILL REQUIRE OTHER	R PERMITS?	yes 🗆	NO 🗹		
IF YE	S, CHECK ALL THAT APPLY: 🗆 AIR 🗀 HAZ	ARDOUS WASTE	□ PRETREATMENT	•		
	☐ WATER STATE OPERATING ☐ INDIVIDU	AL NPDES	□ OTHER:			
IS THE PROJECT REROUTING, FILLING OR CROSSING A WATER CONVEYANCE  YES NO OF ANY KIND? (If yes, contact the U.S. Army Corps of Engineers' Regulatory Branch for permitting requirements.)						
IF THE PROJECT REQUIRES A CORPS OF ENGINEER SECTION 404 PERMIT, PROVIDE APPROPRI DOCUMENTATION THAT:  Corps intent to approve GP 46				;		
The project has been approved by individual permit, or		coverage is included.				
The work will be covered by a nationwide permit and NO NOTIFICATION to the Corps is required, or						
The work will be covered by a nationwide or general permit and NOTIFICATION to the Corps is required						
IS A LAKE REQUIRING THE CONSTRUCTION OF A DAM BEING PROPOSED?  (If yes, provide appropriate approval documentation from MDEQ Office of Land and Water, Dam Safety.)						
IF THE PROJECT IS A SUBDIVISION OR A COMMERCIAL DEVELOPMENT, HOW WILL SANITARY SEWAGE BE DISPOSED? Check one of the following and attach the pertinent documents.						
Existing Municipal or Commercial System. Please attach plans and specifications for the collection system and the associated "Information Regarding Proposed Wastewater Projects" form or approval from County Utility Authority in Hancock, Harrison, Jackson, Pearl River and Stone Counties. If the plans and specifications can not be provided at the time of LCNOI submittal, MDEQ will accept written acknowledgement from official(s) responsible for wastewater collection and treatment that the flows generated from the proposed project can and will be transported and treated properly. The letter must include the estimated flow.						
	Collection and Treatment System will be Constructed. Please attach a copy of the cover of the NPDES discharge permit from MDEQ or indicate the date the application was submitted to MDEQ (Date:					
i i	Individual Onsite Wastewater Disposal Systems for Subdivisions Greater than 35 Lots. A determination of the feasibility of installing a central sewage collection and treatment system must be made by MDEQ. A copy of the response from MDEQ concerning the feasibility study must be attached. If a central collection and wastewater system is not feasible, then please attach a copy of the Letter of General Acceptance from the State Department of Health or certification from a registered professional engineer that the platted lots should support individual onsite wastewater disposal systems.					
INDIC	ATE ANY LOCAL STORM WATER ORDINANCE WIT	H WHICH THE PROJEC	CT MUST COMPLY:			
				<del></del>		

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.

www.

4-14-2021

Signature of Applicant<sup>1</sup> (owner or prime contractor)

Date Signed

Scot Ehrgott

**Assistant Chief Engineer - Preconstruction** 

Title

Printed Name<sup>1</sup>

<sup>1</sup>This 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