APR 27 2021

MSR10 8 4 2 1

(NUMBER TO BE ASSIGNED BY STATE)

APPLICANT IS THE:	R		
OWNER CONTACT INFORMATION			
OWNER CONTACT PERSON: LOACE SMITH			
OWNER COMPANY LEGAL NAME:			
OWNER STREET OR P.O. BOX: 4/89 G	ARDEN ROAD		
OWNER CITY: Southaven STATE: MS.	ZIP: 38672		
OWNER PHONE #: (901) 486.4995° OWNER EMAIL: Lance	@ XCGear. Com		
PRIME CONTRACTOR CONTACT INFORMATION			
PRIME CONTRACTOR CONTACT PERSON: Lance 5mit	-h		
PRIME CONTRACTOR COMPANY LEGAL NAME: TRI-FIRMA EXCAVATORS, LLC			
PRIME CONTRACTOR STREET OR P.O. BOX: 6585 Wallace L			
PRIME CONTRACTOR CITY: HODALAKE STATE: M5.	ZIP: 38637		
PRIME CONTRACTOR PHONE #: (PRIME CONTRACTOR EMAIL: Lange & TO FIRMO COM			
FACILITY SITE INFORMATION			
FACILITY SITE NAME: GRACE FARMS 5/D.			
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: Ranch Road CITY: Hermando STATE: ms. COUNTY: De			
FACILITY SITE TRIBAL LAND ID (N/A If not applicable):	See Co Code Cod From		
LATITUDE: 34 degrees 46 minutes 20 seconds LONGITUDE: 90 degrees	o minutes o seconds		
LAT & LONG DATA SOURCE (GPS (Please GPS Project Entrance/Start Point) or Map Interpolation): 695			
TOTAL ACREAGE THAT WILL BE DISTURBED 1: 6, 8 5	100		
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			
ESTIMATED CONSTRUCTION PROJECT START DATE:	2021-06-01 YYYY-MM-DD		
ESTIMATED CONSTRUCTION PROJECT END DATE:	2021-12-31 YYYY-MM-DD		
DESCRIPTION OF CONSTRUCTION ACTIVITY: Road utilities FOR	Residential SID.		
PROPOSED DESCRIPTION OF PROPERTY USE AFTER CONSTRUCTION HAS BEEN COMPLETED: Homes			
SIC Code 6 5 5 2 NAICS Code 2 3 7 2 1 0			

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NEAREST NAMED RECEIVING STREAM:	Cane Creek		
IS RECEIVING STREAM ON MISSISSIPPI'S 303(d) LIST OBODIES? (The 303(d) list of impaired waters and TMDL streathtp://www.deq.state.ms.us/MDEQ.nsf/page/TWB_Total_Maximu	m segments may be found on i	YES□ NO MDEQ's web site:	o⊠
HAS A TMDL BEEN ESTABLISHED FOR THE RECEIVING	G STREAM SEGMENT?	YES□ NO	ο¤
ARE THERE RECREATIONAL STREAMS, PRIVATE/PUB WITHIN % MILE DOWNSTREAM OF PROJECT BOUNDR ACTIVITY? みとだしん 己してしゃ しん たん E EXISTING DATA DESCRIBING THE SOIL (for linear proje	Y THAT MAY BE IMPACTE	D BY THE CONSTRUC	OU TION
WILL FLOCCULANTS BE USED TO TREAT TURBIDITY IF YES, INDICATE THE TYPE OF FLOCCULANT.	IN STORM WATER? ANIONIC POLYACRY OTHER		o □
IF YES, DOES THE SWPPP DESCRIBE THE METHOD OF AND THE LOCATION OF WHERE FLOCCULATED MATE	INTRODUCTION, THE LOC ERIAL WILL SETTLE?		TION

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

IS I CNOLEOD A FACILITY THAT WILL DECYMPE OTHER DEDIVITIES		
IS LCNOI FOR A FACILITY THAT WILL REQUIRE OTHER PERMITS?	YES □	мо Ж́.
IF YES, CHECK ALL THAT APPLY: ☐ AIR ☐ HAZARDOUS WASTE	□ PRETREATMEN	ΥT
\square water state operating \square individual npdes	□ OTHER:	
IS THE PROJECT REROUTING, FILLING OR CROSSING A WATER CONVEYANC OF ANY KIND? (If yes, contact the U.S. Army Corps of Engineers' Regulatory Branch for	E YES or permitting requirem	NO 区 ents.)
IF THE PROJECT REQUIRES A CORPS OF ENGINEER SECTION 404 PERMIT, PR DOCUMENTATION THAT:	OVIDE APPROPRIAT	ľ E
 The project has been approved by individual permit, or 		
 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	ì
IS A LAKE REQUIRING THE CONSTRUCTION OF A DAM BEING PROPOSED? (If yes, provide appropriate approval documentation from MDEQ Office of Land and Wa	YES □ ter, Dam Safety.)	νо ⊠́
IF THE PROJECT IS A SUBDIVISION OR A COMMERCIAL DEVELOPMENT, HOW BE DISPOSED? Check one of the following and attach the pertinent documents.	WILL SANITARY S	EWAGE
Existing Municipal or Commercial System. Please attach plans and specifications for associated "Information Regarding Proposed Wastewater Projects" form or approved Hancock, Harrison, Jackson, Pearl River and Stone Counties. If the plans and specification of LCNOI submittal, MDEQ will accept written acknowledgement from official(s) recollection and treatment that the flows generated from the proposed project can another properly. The letter must include the estimated flow.	al from County Utility A ons can not be provided	uthority in at the time
Collection and Treatment System will be Constructed. Please attach a copy of the copermit from MDEQ or indicate the date the application was submitted to MDEQ (D	over of the NPDES disci	harge)
Individual Onsite Wastewater Disposal Systems for Subdivisions Less than 35 Lots. of General Acceptance from the Mississippi State Department of Health or certificatengineer that the platted lots should support individual onsite wastewater disposal s		the Letter professional
Individual Onsite Wastewater Disposal Systems for Subdivisions Greater than 35 Lo feasibility of installing a central sewage collection and treatment system must be made response from MDEQ concerning the feasibility study must be attached. If a central is not feasible, then please attach a copy of the Letter of General Acceptance from the certification from a registered professional engineer that the platted lots should supply disposal systems.	de by MDEQ. A copy of collection and wastew	of the ater system
INDICATE ANY LOCAL STORM WATER ORDINANCE WITH WHICH THE PROJE	CT MUST COMPLY:	
DESOTO COUNTY STORM Water n	ED I WANCE	

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 Applicant (owner or prime contractor)

Date Signed

Printed Name

Tial

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: Lance Smith PHONE NUMBER: (90) 486 4995 PRIME CONTRACTOR COMPANY: TRI-FIRMA Excavators, LLC		
PRIME CONTRACTOR STREET (P.O. BOX): 6585 Wallace LANIE		
PRIME CONTRACTOR CITY: HOON LAKE STATE: MS ZIP: 38637 E-MAIL ADDRESS:		
OWNER INFORMATION		
OWNER CONTACT PERSON: Lance 5m 1th PHONE NUMBER: ()		
PROJECT INFORMATION		
PROJECT NAME: <u>Grace Farms</u> DESCRIPTION OF CONSTRUCTION ACTIVITY: <u>JO LOT RESIDENTIAL SID.</u>		
PHYSICAL SITE ADDRESS (If the physical address is not available indicate the nearest named road. For linear projects, indicate the beginning of the project and identify all counties the project traverses.) STREET: Ranch Road between Robinson Gin R.S. 51 CITY: Hernando COUNTY: Desoto		
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 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. Prime Contractor Signature Date Signed Title		

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.

This Prime Contractors Certification form shall be submitted to:

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