



# INDUSTRIAL STORMWATER NOTICE OF INTENT (ISNOI)

### FOR COVERAGE UNDER THE INDUSTRIAL STORMWATER GENERAL NPDES PERMIT MSR00

(NUMBER TO BE ASSIGNED BY STATE)

#### INSTRUCTIONS

Applicant must be the owner or operator (i.e., legal entity that controls the facility's operation, or the plant/site manager, not the environmental consultant). The owner or operator that receives coverage is responsible for permit compliance. File at least 60 days prior to the commencement of the regulated industrial activity.

Submittals with this ISNOI must include a Storm Water Pollution Prevention Plan (SWPPP) with the minimum components found in ACTs 5-8 of the Industrial Stormwater General Permit. In addition, a United States Geological Survey (USGS) quadrangle map (or a copy) showing site location and extending at least 1/2 mile beyond the site's property boundary is required. If a copy is submitted, provide the name of the quadrangle map that is found in the upper right hand corner. Maps can be obtained from the MDEQ, Office of Geology at 601-961-5523.

ALL FORM BLANKS MUST BE COMPLETED (enter "NA" if not applicable)

THE APPLICANT IS:	OWNER	■ OPERATOR (PLEASE CHECK ONE OR BOTH)

OWNER INFORMATION

Owner Contact Name: Phillip Crossley Position: Facility Manager

Owner Company Name: Waste Pro of Mississippi

Owner Street (P.O. Box): 5255 West Sandidge Road

Owner City: Olive Branch State: MS Zip: 38654

Owner Phone Number: 662-895-9705 Owner Email: pcrossleywasteprousa.com

OPERATOR INFORMATION (if different than owner)

Operator Contact Name: Not Applicable

Operator Company Name: Not Applicable

Operator Street (P.O. Box): Not Applicable

Operator City: Not Applicable

Operator Phone Number: Not Applicable

Operator Email: Not Applicable



### **FACILITY INFORMATION**

Facility Name: Waste Pro/Columbus Hauling Facility				
Nature of Business (Include 4-digit Standard Industrial Classification Code (SIC) and description):  SIC Code: 4 2 1 2 Local Trucking without storage				
Receiving Stream: Onsite lake (former gravel pit)				
Is receiving stream on MDEQ's 303(d) List?	☐ Yes ■ No			
Has a TMDL been established for the receiving stream segment?	☐ Yes ☐ No			
Physical Site Address:				
Street: 1600 12th Avenue South City: Columbus	· · · · · · · · · · · · · · · · · · ·			
County: Lowndes Zip: 39701				
Latitude: 33 degrees 29 minutes 02 seconds Longitude: 88 degrees 24 minut	es 50 seconds			
Method Used to Determine Lat & Long (GPS of plant entrance) or Map Interpolation):				
Attach a copy of any existing laboratory data for each storm water outfall. If multiple sampling has been performed, provide a summary for each parameter, including sampling dates and the minimum, average and maximum values.				
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## DOCUMENTATION OF COMPLIANCE WITH OTHER REGULATIONS/REQUIREMENTS

Is this notice for a facility that will require other permits?	■ No			
If yes, check which one(s):  Air,  Hazardous Waste,  Pretreatment,  Individual NPDES, or list Other(s):	☐ Water State Operating,			
How will sanitary sewage be collected and treated? City of Columbus POTW				
Indicate any local storm water ordinance with which the facility must comply approval.	y and submit any documentation of			
none				
Is treatment of storm water provided at any outfall?	■ No			
If yes, please describe:				
CERTIFICATION				
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! (Wust be signed by operator when different than owner)	Mar 6, 202/ ate Signed)			
Signature (Trust be signed by operator when different than owner)	ate Signed/			
Jeffrey H. Papasan	Regional Landfill Manager			
	itle			
<ul> <li>This application shall be signed according to the General Permit, ACT 16, T-9, as follows:</li> <li>For a corporation, by a responsible corporate officer.</li> <li>For a partnership, by a general partner.</li> <li>For a sole proprietorship, by the proprietor.</li> <li>For a municipal, state or other public facility, by principal executive officer, the proprietor.</li> </ul>				

After signing please mail to:

Chief, Environmental Permits Division

MS Department of Environmental Quality, Office of Pollution Control

P.O. Box 2261 Jackson, MS 39225





May 12, 2021 NS 16325.000.002 surveyors

environmental

landscap: architect:

Ms. Krystal Rudolph, PE Chief, Environmental Permits Division Mississippi Department of Environmental Quality-Office of Pollution Control Post Office Box 2261 Jackson, Mississippi 38671

REFERENCE:

INDUSTRIAL NOTICE OF INTENT AND

STORMWATER POLLUTION PREVENTION PLAN WASTE PRO COLUMBUS HAULING FACILITY

COLUMBUS, MISSISSIPPI

Dear Ms. Rudolph:

Enclosed please find one signed original of the Industrial Notice of Intent (INOI) form and Stormwater Pollution Prevention Plan (SWPPP) for the Waste Pro-Columbus Hauling Facility, Columbus, Lowndes County, Mississippi. This SWPPP incorporates best management practices for this facility based on our visual observation at the Facility and the requirements as stipulated in the Industrial Stormwater General Permit. Please have Mississippi Department of Environmental Quality personnel contact me directly at <a href="mailto:greg.taylor@neel-schaffer.com">greg.taylor@neel-schaffer.com</a> or 601-503-0464 with any concerns associated with this submittal.

Sincerely,

NEEL-SCHAFFER, INC.

B. Gregory Taylor, RPG

Enclosures

CC. Mr. Jeffrey H. Papasan, Regional Landfill Manager, Waste Pro USA



MDEQ