# 1: 7770

#### **MAJOR MODIFICATION FORM** FOR INDUSTRIAL STORMWATER GENERAL PERMIT Coverage No. MSR00 108240 **County** Madison



### INSTRUCTIONS

Coverage recipients shall notify the Mississippi Department of Environmental Quality at least 30 days in advance of the following activities (check all that apply). This form should be submitted with a modified Storm Water Pollution Prevention Plan (SWPPP), updated USGS topographic map, Corps of Engineers Section 404 documentation and wastewater collection and treatment information, as appropriate.

Facility operations are proposed to change.

"Footprint" identified in the original ISNOI is proposed to be enlarged.

Stormwater Quality BMPs are proposed to be modified.

This form must be signed by the current coverage recipient under Mississippi's Industrial Stormwater General Permit, an attached SWPPP must be included, and documentation of the changes compared to the previous approved SWPPP are attached.

Coverage recipients are authorized to discharge storm water associated with proposed new operations, additional areas of activity, or modified BMPs, under the conditions of the General Permit, only upon receipt of written notification of approval by MDEQ. All other modifications must be in accordance with ACT9, S-1 (6) and S-2 (7) of the General Permit.

ALL INFORMATION MUST BE COMPLETED (indicate "N/A" where not applicable)

### **COVERAGE RECIPIENT INFORMATION**

COVERAGE RECIPIENT CONTACT NAME: <u>Charles King</u> COMPANY NAME: The Conlan Company STREET OR P.O. BOX: 1800 Parkway Place - Suite 1010			TEL # (770) 423-8033
CITY: Marietta	STATE: GA	ZIP: 30067	E-MAIL:
	PROJECT	INFORMATION	Ň
PROJECT NAME: The Pine Project NAME: CITY: Canton	oject		

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 (must be signed by coverage recipient)

Charles King

Printed Name

Date 7/12/2021 Sr. Vice President Date

Please submit this form to:

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



## **INSPECTION SUSPENSION FORM**

### UNDER LARGE CONSTRUCTION STORM WATER GENERAL NPDES PERMIT MSR10



Coverage recipients under Mississippi's Large Construction Storm Water General Permit may temporarily suspend required weekly inspections of erosion and sediment controls and monthly record keeping by submission of this form. Inspections may be suspended only when land disturbing activities have ceased, no further land disturbing activities are planned for a period of at least six (6) months, the site is stable with no active erosion, and vegetative cover has been established (see ACT9, S-1). The coverage recipient is responsible for all permit conditions during the suspension period and nothing in this condition shall limit the rights of MDEQ to take enforcement or other actions against the coverage recipient. Once land disturbing activities resume MDEQ must be notified and all inspections and record keeping required by the permit must also resume. Color photographs, representative of the construction site, must be submitted with this inspection form.

## **COVERAGE RECIPIENT INFORMATION**

COVERAGE RECIPIENT CONTACT PERSON: Charles K	ing				
COMPANY NAME: The Conlan Company					
STREET OR P.O. BOX: 1800 Parkway Place					
CITY: Marietta	STATE: <u>GA</u>	ZIP: 30067			
PHONE # (INCLUDE AREA CODE): 770-423-8005	E-MAIL: cking@	conlancompany.com			

## PROJECT INFORMATION

CONSTRUCTION STORM WATER GENERAL PERMIT COVERAGE NUMBER:		MSR10	8	2	4	0	
PROJECT NAME: Project Pine							
CITY: Canton	COUNTY: Madison						

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. I further certify that: land disturbing activities have ceased, no further land disturbing activities are planned for a period of at least six (6) months, the site is stable with no active erosion, and vegetative cover has been established.

Signature (must be signed by coverage recipient)

Charles King Printed Name 7/12/2021 Date Signed Sr. Vice President Title

Please submit this form to:

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