MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY

LARGE CONSTRUCTION GENERAL PERMIT
FOR LAND DISTURBING ACTIVITIES OF FIVE (5) OR MORE ACRES

RE-COVERAGE FORM

FOR COVERAGE UNDER MISSISSIPPI'S REISSUED
LARGE CONSTRUCTION STORM WATER GENERAL PERMIT MSRI0
GENERAL NPDES COVERAGE NO. MSRI0 8541

INSTRUCTIONS

The submittal of this form is required to receive coverage under the reissued Large Construction General Permit. This form must be completed and returned to the address printed at the bottom of the back page of this form by April 30, 2022.

The signatory of this form must be the owner or operator (prime contractor) who is the current coverage recipient (rather than the project manager or environmental consultant).

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.

Permits will be issued in the company name as it is registered with the Mississippi Secretary of State.

Amendments to the Storm Water Pollution Prevention Plan (SWPPP) are required to be attached if the plan is not current or is ineffective in controlling storm water pollutants. SWPPP amendments with the sole intent of incorporating new permit conditions do not need to be submitted to MDEQ for review and/or approval.

If the project is complete and final stabilization has been achieved, please request termination of coverage by completing the Request for Termination (RFT) Form found in the Large Construction Forms Package. Projects that continue to discharge storm water associated with construction activity without applicable permit coverage are in violation of state law.

Do not submit this form if submitting a Request for Termination (RFT) Form.

ALL INFORMATION REQUESTS MUST BE ANSWERED (Answer “NA” if not applicable)

COVERAGE RECIPIENT INFORMATION

CONTACT NAME & POSITION: Lynn Posey, Executive Director

COMPANY LEGAL NAME: Mississippi Department of Wildlife, Fisheries, and Parks

STREET OR P.O. BOX: 1505 Eastover Drive

CITY: Jackson STATE: MS ZIP: 39211

PHONE NUMBER: (601) 432-2400 E-MAIL:

RECEIVED
MAR 21 2022
Dept. of Environmental Quality
Executive Director

Date Signed: 3/14/22

The above named person, or the left named storm water control, has been authorized by Resolution No. SWPP-601 to receive any application for a Storm Water Control Permit, and to issue the SWPP for this project.

I am aware of the significant changes in the required SWPP Control Permit and certify the SWPP for this project.

The above named person has been authorized to receive any application for a Storm Water Control Permit, and to issue the SWPP for this project.

I certify under penalty of perjury that the information contained in this application is correct and complete. I am aware that there are significant penalties for submitting false or incomplete information.

I certify under penalty of perjury that the information contained in this application is correct and complete. I am aware that there are significant penalties for submitting false or incomplete information.

The above named person has been authorized by Resolution No. SWPP-601 to receive any application for a Storm Water Control Permit, and to issue the SWPP for this project.

I certify under penalty of perjury that the information contained in this application is correct and complete. I am aware that there are significant penalties for submitting false or incomplete information.

I certify under penalty of perjury that the information contained in this application is correct and complete. I am aware that there are significant penalties for submitting false or incomplete information.

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