41:81489 MSR10 8 493)

(NUMBER TO BE ASSIGNED BY STATE)

| APPLICANT IS THE: | | | | |
|--|--|--|--|--|
| OWNER CONTACT INFORMATION | | | | |
| OWNER CONTACT PERSON: Gene Williams | | | | |
| OWNER COMPANY LEGAL NAME: HMW Logistics 20 LLC | | | | |
| OWNER STREET OR P.O. BOX: 50 Security Drive | | | | |
| OWNER CITY: Jackson STATE: Tennessee ZIP: 38305 | | | | |
| OWNER PHONE #: (731-)664-6300 OWNER EMAIL: gwilliams@hmcompany.com | | | | |
| PREPARER CONTACT INFORMATION | | | | |
| IF NOI WAS PREPARED BY SOMEONE OTHER THAN THE APPLICANT | | | | |
| CONTACT PERSON: Shane Cochran PE | | | | |
| COMPANY LEGAL NAME: Shane Cochran PE | | | | |
| STREET OR P.O. BOX: 113 Belews Chapel Rd | | | | |
| CITY: Bradford STATE: Tennessee ZIP: 38316 | | | | |
| PHONE # ()731-571-1504 EMAIL: scochran@hmcompany.com | | | | |
| PRIME CONTRACTOR CONTACT INFORMATION | | | | |
| PRIME CONTRACTOR CONTACT PERSON: | | | | |
| PRIME CONTRACTOR COMPANY LEGAL NAME: | | | | |
| PRIME CONTRACTOR STREET OR P.O. BOX: | | | | |
| PRIME CONTRACTOR CITY:STATE:ZIP: | | | | |
| PRIME CONTRACTOR PHONE #: (PRIME CONTRACTOR EMAIL: | | | | |
| FACILITY SITE INFORMATION | | | | |
| FACILITY SITE NAME: HMW Logistics 20 LLC | | | | |
| 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: 300' NW of intersection of Wingo and Cayce | | | | |
| CITY: Byhailia STATE: Mississippi COUNTY: Marshall ZIP: 38611 | | | | |
| FACILITY SITE TRIBAL LAND ID (N/A If not applicable): N/A | | | | |
| LATITUDE: 34 degrees 58 minutes 45 seconds LONGITUDE: 89 degrees 37 minutes 23 seconds | | | | |
| LAT & LONG DATA SOURCE (GPS (Please GPS Project Entrance/Start Point) or Map Interpolation): Google Earth | | | | |
| TOTAL ACREAGE THAT WILL BE DISTURBED 1: 37.1 | | | | |
| | | | | |
| | | | | |

| 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: | 2022-05-15 YYYY-MM-DD | |
| ESTIMATED CONSTRUCTION PROJECT END DATE: | 2023-05-15 <u>YYYY-MM-DD</u> | |
| DESCRIPTION OF CONSTRUCTION ACTIVITY: Construction of a Warehouse, associated parking, and storm | water management ponds | |
| PROPOSED DESCRIPTION OF PROPERTY USE AFTER CONSTRUCTION HAS BEEN Warehouse, ultimate storage usage to be determined | COMPLETED: | |
| | | |
| SIC Code: 4 2 2 5 NAICS Code 4 9 3 1 1 0 | | |
| | | |
| NEAREST NAMED RECEIVING STREAM: Nonconnah Creek | | |
| IS RECEIVING STREAM ON MISSISSIPPI'S 303(d) LIST OF IMPAIRED WATER BODIES? (The 303(d) list of impaired waters and TMDL stream segments may be found on Mhttp://www.deq.state.ms.us/MDEQ.nsf/page/TWB_Total_Maximum_Daily_Load_Section) | YES \(\sqrt{\text{IDEQ's web site:}} \) | Nd |
| HAS A TMDL BEEN ESTABLISHED FOR THE RECEIVING STREAM SEGMENT? | YES 🗸 | NC |
| FOR WHICH POLLUTANT: SEDIMENT / SILTATION | | |
| ARE THERE RECREATIONAL STREAMS, PRIVATE/PUBLIC PONDS OR LAKES WITHIN ½ MILE DOWNSTREAM OF PROJECT BOUNDRY THAT MAY BE IMPACTE ACTIVITY? | YES D BY THE CONST | NO V RUCTION |
| EXISTING DATA DESCRIBING THE SOIL (for linear projects please describe in SWPPP): SILT LOAMS WITH K FACTORS RANGING FROM 0.43 TO 0.49, HSG D, C/D OR B/D | | |
| WILL FLOCCULANTS BE USED TO TREAT TURBIDITY IN STORM WATER? | YES | NO |
| IF YES, INDICATE THE TYPE OF FLOCCULANT. ANIONIC POLYACRYI OTHER | LIMIDE (PAM) | |
| IF YES, DOES THE SWPPP DESCRIBE THE METHOD OF INTRODUCTION, THE LOC AND THE LOCATION OF WHERE FLOCCULATED MATERIAL WILL SETTLE? | ATION OF INTRO | DUCTION |
| IS A SDS SHEET INCLUDED FOR THE FLOCCULATE? | YES | Nd |
| WILL THERE BE A 50 FT BUFFER BETWEEN THE PROJECT DISTURBANCE AND THE STATE? | HE WATERS OF T | Nd 🔨 |
| IF NOT, PROVIDE EQUIVALENT CONTROL MEASURES IN THE SWPPP. | | |

 $^{^{1}}$ Acreage for subdivision development includes areas disturbed by construction of roads, utilities and drainage. Additionally, a housesite of at least 10,000 $\rm ft^{2}$ 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 LCNOI FOR A FACILITY THAT WILL REQUIRE OTHER PERMITS? | YES | NO |
|--|---|----------------------------------|
| IF YES, CHECK ALL THAT APPLY: AIR HAZARDOUS WASTE | PRETREATMENT | |
| WATER STATE OPERATING 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 f | CE YES or permitting requiremen | NO√ nts.) |
| IF THE PROJECT REQUIRES A CORPS OF ENGINEER SECTION 404 PERMIT, PR DOCUMENTATION THAT: | OVIDE APPROPRIATE | : |
| -The project has been approved by individual permit, or -The work will be covered by a nationwide permit and NO NOTIFICATION to the Corps -The work will be covered by a nationwide or general permit and NOTIFICATION to the | is required, or Corps is required | |
| IS THE PROJECT REROUTING, FILLING OR CROSSING A STATE WATER CONVOF ANY KIND? (If yes, please provide an antidegradation report.) | EYANCE YES | NO 🗸 |
| 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 tter, Dam Safety. | NO 🗸 |
| IF THE PROJECT IS A SUBDIVISION OR A COMMERCIAL DEVELOPMENT, HOW BE DISPOSED? Check one of the following and attach the pertinent documents. | V WILL SANITARY SE | WAGE |
| Existing Municipal or Commercial System. Please attach plans and specifications if associated "Information Regarding Proposed Wastewater Projects" form or appro Hancock, Harrison, Jackson, Pearl River and Stone Counties. If the plans and specificati of LCNOI submittal, MDEQ will accept written acknowledgement from official(s) collection and treatment that the flows generated from the proposed project can an properly. The letter must include the estimated flow. | val from County Utility Autons can not be provided a responsible for wastewate | thority in at the time er |
| Collection and Treatment System will be Constructed. Please attach a copy of the c permit from MDEQ or indicate the date the application was submitted to MDEQ (I | over of the NPDES discha Date: | arge) |
| 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 | ition from a registered pr | he Letter ofessional |
| Individual Onsite Wastewater Disposal Systems for Subdivisions Greater than 35 I feasibility of installing a central sewage collection and treatment system must be mare 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 supdisposal systems. | ade by MDEQ. A copy of al collection and wastewa he State Department of H | f the ter system lealth or |
| INDICATE ANY LOCAL STORM WATER ORDINANCE (I.E. MS4)WITH WHICH T | HE PROJECT MUST CO | OMPLY: |
| none | | |
| | | |
| 1 | | |

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 befiel, true, accurate and complete. I am awaye that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

ture of Applicant (owner or prime contractor)

1/22 SP. YILE RESIDENT

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

Electronically:

https://www.mdeg.ms.gov/construction-stormwater/

Revised 3/23/22



LARGE CONSTRUCTION NOTICE OF INTENT (LCNOI) FOR COVERAGE UNDER THE LARGE CONSTRUCTION STORM WATER GENERAL NPDES PERMIT

INSTRUCTIONS

The Large Construction Notice of Intent (LCNOI) is for coverage under the Large Construction General Permit for land disturbing activities of five (5) acres or greater; or for land disturbing activities, which are part of a larger common plan of development or sale that are initially less than five (5) acres but will ultimately disturb five (5) or more acres. Applicant must be the owner or operator. For construction activities, the operator is typically the prime contractor. 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 Large Construction Storm Water General Permit MSR10.

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

Completed LCNOIs should be filed at least thirty (30) days prior to the commencement of construction. Discharge of storm water from large construction activities without written notification of coverage is a violation of state law.

Submittals with this LCNOI must include:

- · A site-specific Storm Water Pollution Prevention Plan (SWPPP) developed in accordance with ACT5 of the General Permit
- · A detailed site-specific scaled drawing showing the property layout and the features outlined in ACT5 of the General Permit
- A United States Geological Survey (USGS) quadrangle map or photocopy, extending at least one-half mile beyond the facility property boundaries with the site location and outfalls outlined or highlighted. The name of the quadrangle map must be shown on all copies. Quadrangle maps can be obtained from the MDEQ, Office of Geology at 601-961-5523.

Additional submittals may include the following, if applicable:

- Appropriate Section 404 documentation from U.S. Army Corps of Engineers
- Appropriate documentation concerning future disposal of sanitary sewage and sewage collection system construction
- Appropriate documentation from the MDEQ Office of Land & Water concerning dam construction and low flow requirements
- · Approval from County Utility Authority in Hancock, Harrison, Jackson, Pearl River and Stone Counties
- · Antidegradation report for disturbance within Waters of the State

ALL QUESTIONS MUST BE ANSWERED (Answer "NA" if the question is not applicable)