

MSR10 8733

(NUMBER TO BE ASSIGNED BY STATE)

APPLICANT IS THE: ☒ OWNER ☐ PRIME CONTRACTOR

## OWNER CONTACT INFORMATION

OWNER CONTACT PERSON: Mr. Earl Warren  
OWNER COMPANY LEGAL NAME: Trivest Corporation  
OWNER STREET OR P.O. BOX: PO Box 767  
OWNER CITY: Olive Branch STATE: MS ZIP: 38654  
OWNER PHONE #: (662) 321-2589 OWNER EMAIL: jracs993@gmail.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: FAIRHAVEN PLANNED COMMERCIAL DEVELOPMENT, PHASE 1  
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: BUSINESS CENTER DRIVE  
CITY: Olive Branch STATE: MS COUNTY: DESOTO ZIP: 38654  
FACILITY SITE TRIBAL LAND ID (N/A If not applicable): NA  
LATITUDE: 34 degrees 55 minutes 46 seconds LONGITUDE: -89 degrees 47 minutes 50 seconds  
LAT & LONG DATA SOURCE (GPS (Please GPS Project Entrance/Start Point) or Map Interpolation): Google Earth  
TOTAL ACREAGE THAT WILL BE DISTURBED <sup>1</sup>: 13.13  
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: 2022-06-01  
YYYY-MM-DD  
ESTIMATED CONSTRUCTION PROJECT END DATE: 2022-12-23  
YYYY-MM-DD  
DESCRIPTION OF CONSTRUCTION ACTIVITY: Grade, Drain, Base, Pave, Gas, Sewer & Water  
PROPOSED DESCRIPTION OF PROPERTY USE AFTER CONSTRUCTION HAS BEEN COMPLETED:  
Commercial Subdivision  
SIC Code \_\_\_\_\_ NAICS Code \_\_\_\_\_



NEAREST NAMED RECEIVING STREAM: Camp 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 MDEQ's web site: [http://www.deq.state.ms.us/MDEQ.nsf/page/TWB\\_Total\\_Maximum\\_Daily\\_Load\\_Section](http://www.deq.state.ms.us/MDEQ.nsf/page/TWB_Total_Maximum_Daily_Load_Section)) YES ☒ NO ☐

HAS A TMDL BEEN ESTABLISHED FOR THE RECEIVING STREAM SEGMENT? YES ☒ NO ☐

ARE THERE RECREATIONAL STREAMS, PRIVATE/PUBLIC PONDS OR LAKES WITHIN ½ MILE DOWNSTREAM OF PROJECT BOUNDARY THAT MAY BE IMPACTED BY THE CONSTRUCTION ACTIVITY? YES ☐ NO ☒

EXISTING DATA DESCRIBING THE SOIL (for linear projects please describe in SWPPP):  
SOIL IS SANDY LOAM

WILL FLOCCULANTS BE USED TO TREAT TURBIDITY IN STORM WATER? YES ☐ NO ☒

IF YES, INDICATE THE TYPE OF FLOCCULANT. ☐ ANIONIC POLYACRYLAMIDE (PAM)  
☐ OTHER \_\_\_\_\_

IF YES, DOES THE SWPPP DESCRIBE THE METHOD OF INTRODUCTION, THE LOCATION OF INTRODUCTION AND THE LOCATION OF WHERE FLOCCULATED MATERIAL WILL SETTLE? YES ☐ NO ☐

<sup>1</sup> Acreage for subdivision development includes areas disturbed by construction of roads, utilities and drainage. Additionally, a housesite of at least 10,000 ft<sup>2</sup> 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 CONVEYANCE OF ANY KIND?** (If yes, contact the U.S. Army Corps of Engineers' Regulatory Branch for permitting requirements.)        YES ☐        NO ☒

**IF THE PROJECT REQUIRES A CORPS OF ENGINEER SECTION 404 PERMIT, PROVIDE APPROPRIATE DOCUMENTATION THAT:**

- 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

**IS A LAKE REQUIRING THE CONSTRUCTION OF A DAM BEING PROPOSED?**        YES ☐        NO ☒  
(If yes, provide appropriate approval documentation from MDEQ Office of Land and Water, Dam Safety.)

**IF THE PROJECT IS A SUBDIVISION OR A COMMERCIAL DEVELOPMENT, HOW WILL SANITARY SEWAGE BE DISPOSED?** Check one of the following and attach the pertinent documents.

- ☒ **Existing Municipal or Commercial System.** Please attach plans and specifications for the collection system and the associated "Information Regarding Proposed Wastewater Projects" form or approval from County Utility Authority in Hancock, Harrison, Jackson, Pearl River and Stone Counties. If the plans and specifications can not be provided at the time of LCNOI submittal, MDEQ will accept written acknowledgement from official(s) responsible for wastewater collection and treatment that the flows generated from the proposed project can and will be transported and treated properly. The letter must include the estimated flow.
- ☐ **Collection and Treatment System will be Constructed.** Please attach a copy of the cover of the NPDES discharge permit from MDEQ or indicate the date the application was submitted to MDEQ (Date: \_\_\_\_\_.)
- ☐ **Individual Onsite Wastewater Disposal Systems for Subdivisions Less than 35 Lots.** Please attach a copy of the Letter of General Acceptance from the Mississippi State Department of Health or certification from a registered professional engineer that the platted lots should support individual onsite wastewater disposal systems.
- ☐ **Individual Onsite Wastewater Disposal Systems for Subdivisions Greater than 35 Lots.** A determination of the feasibility of installing a central sewage collection and treatment system must be made by MDEQ. A copy of the response from MDEQ concerning the feasibility study must be attached. If a central collection and wastewater system is not feasible, then please attach a copy of the Letter of General Acceptance from the State Department of Health or certification from a registered professional engineer that the platted lots should support individual onsite wastewater disposal systems.

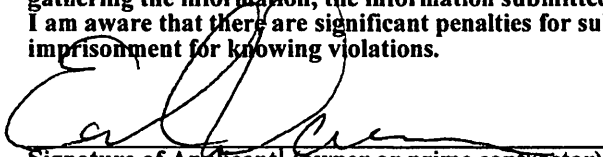
**INDICATE ANY LOCAL STORM WATER ORDINANCE WITH WHICH THE PROJECT MUST COMPLY:**

CITY OF OLIVE BRANCH, MS. STORMWATER PERMIT ATTACHED

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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<sup>1</sup> (owner or prime contractor)

**Earl Warren**

Printed Name<sup>1</sup>

**3/14/2022**

Date Signed

**President**

Title

<sup>1</sup>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

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



*City of Olive Branch  
Office of City Engineer*

*Certificate of Permit Coverage*

Under the City of Olive Branch Stormwater Controls and Management Practices Ordinance

Be it known

**TRIVEST CORPORATION**  
**FAIRHAVEN PLANNED COMMERCIAL DEVELOPMENT BUSINESS CENTER DR. PH 1 only**  
Applicant Name

having submitted an acceptable Small Municipal Separate Storm Sewer System Notice of Intent (MS4 NOI), is hereby granted this Certificate of Permit Coverage in order to discharge stormwater from small storm sewer systems owned and operated by:

City of Olive Branch

Receiving Streams: Nolehoe Creek

Permit No.: 220118

Date of Coverage: January 18, 2022

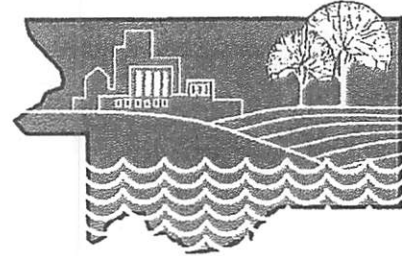
Date First Annual Report Due: January 18, 2023

Date Coverage Expires: Refer to Section 6-1-4 of Stormwater Ordinance

City Engineer  
City of Olive Branch

**DESOTO  
COUNTY  
REGIONAL  
UTILITY  
AUTHORITY**

**365 LOSHER STREET, STE.310  
HERNANDO, MS 38632  
PH. 662.298.2295**



January 19, 2022

Mr. John Crawley  
1050 County Road 36  
Thaxton, MS 38871

Re: DCRUA Permit – Fairhaven Planned Commercial Development, Phase 1

Dear Mr. Crawley:

Please find enclosed with this letter, the permit from the DeSoto County Regional Utility Authority for the referenced project. Please take a moment to review the permit. If any information regarding the proposed development is incorrect, please contact us at your earliest convenience.

**Please note that the enclosed permit covers the development as a whole but not the individual lots within the subdivision. Parties that desire to discharge wastewater within the subdivision boundaries are also required to file a permit application with the Authority in accordance with the Authority's Sewer Use Ordinance.**

Thank you for your cooperation during the permitting process. If you have any questions regarding this information, please contact me.

Sincerely,

**DESOTO COUNTY REGIONAL UTILITY AUTHORITY**

cc: Mr. Nick Manley - Butler-Snow  
Ms. Audrey Lewis, PE - EAI/WEI, LLC

# DESOTO COUNTY REGIONAL UTILITY AUTHORITY PERMIT

TO CONSTRUCT OR PROVIDE CERTAIN SEWER INFRASTRUCTURE OR  
WASTEWATER DISCHARGE LOCATED WITHIN THE AUTHORITY'S  
DISTRICT IN ACCORDANCE WITH THE COMPREHENSIVE SEWER USE  
ORDINANCE ENACTED AS OF AUGUST 22, 2004 IN DESOTO COUNTY,  
MISSISSIPPI

## LET IT BE KNOWN

THE DESOTO COUNTY REGIONAL UTILITY AUTHORITY AS AUTHORIZED BY  
AMENDMENT TO CHAPTER 1039 OF LOCAL AND PRIVATE LAW OF 1999 (HB. 1639)  
RESOLVE THAT

**Fairhaven Planned Commercial Development (Phase 1)**

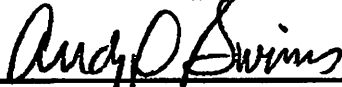
of

Section 11, Township 2 South, Range 6 West

HAS BEEN REVIEWED

for 4 commercial lots for an average flow not to exceed 37,600 gallons per day to be transported by sewer lines owned by the City of Olive Branch, thence to a series of sanitary sewer lines and the Short Fork WWTF owned by the DeSoto County Regional Utility Authority and has determined that these improvements do not conflict with the Authority's Regional Wastewater Plan. No other approvals or permissions are expressed or implied. This permit does not cover individual lots or sewer discharges within the subdivision. Individual lot owners must apply for a permit from the Authority prior to construction. All discharge and connections shall comply with and be subject to the Comprehensive Sewer Use Ordinance of the Authority.

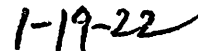
DESOTO COUNTY REGIONAL UTILITY AUTHORITY



Signature



Printed Name



Date

Permit No. DC00318

Permit Issued: January 19, 2022

Permit Expires: N/A

NON-TRANSFERABLE PERMIT  
RETAIL AGENT: OLIVE BRANCH



DESOTO COUNTY REGIONAL UTILITY AUTHORITY

PERMIT APPLICATION

(Multiple/Municipal/Commercial/Industrial)

The TRIVEST CORPORATION  
(Insert Name of Body Making Application, i.e., Individual, Corporation, Municipality, etc.)  
whose address is 10899 Hwy 178, Olive Branch, MS 38654  
(Street Name and Number) (City) (State) (Zip Code)  
Contact Person - Earl Warren  
Phone Number - 662-895-3766  
E-mail - \_\_\_\_\_

herewith submits for the consideration of the plans, specifications, and other necessary data prepared by:

Engineer or Firm - John Crawley, PE  
Mailing Address - 1050 County Road 34  
City, State, Zip - Thaxton, MS 38871  
E-mail address - jrcs993@gmail.com  
Phone Number - 662-321-2589

who is hereby authorized to represent the application in the engineering features of this project for the construction of Sanitary Sewer: Gravity / Pressure

(Clearly Describe: New System, Modification, Extension)

in or near the City of Olive Branch to serve Fairhaven Planned Commercial Phase I  
(City) (Subdivision, Plant, School, Other)  
with 4 proposed lots located at NE 1/4 Section 11, T2S, R6W  
(#) (Approx. Location i.e. Physical Address, Section-Township-Range, Lat/Long)

and herewith make application for the approval of this project.

Expected begin date of construction - Spring 2022  
Expected finish date of construction - Winter 2022

Upon construction, these facilities will be owned and maintained by: City of Olive Branch Public Works  
(Name of Utility Company, Owner, Developer, Municipality, etc.)

whose address is 10175 Hwy 178, Olive Branch, MS 38654  
(Street Name and Number) (City) (State) (Zip Code)

Is on-site wastewater treatment proposed to be used?

- ☐ Yes (Proceed with questions below)  
☒ No (Skip to General – Section I)

Method of treatment shall be:

- ☐ Collection System  
☐ Septic Tank with Leach Field  
☐ Individual Aerobic Treatment Unit  
☐ Individual Pump Station  
☐ Other: \_\_\_\_\_

Has approval from the MS Department of Health been obtained for the on-site wastewater treatment?

- ☐ Yes (A copy of the approval document from the Health Department must be attached to finalize application and receive permit)  
☐ No (Application cannot be finalized until the Health Department approval document is received)

Is a dry collection system proposed to be installed for future use?

- ☐ Yes (Proceed to General – Section I)  
☐ No (Skip to Attachments – Section III)

## I. GENERAL

- A. Ultimate population to be served by proposed system - 662  
B. Per capita discharge 37,550 gpcd ; Infiltration: 50 gpcd (Estimate if unknown)  
C. Area water supply: City of Olive Branch  
(Name and Address of Water Utility)

## II. GENERAL PROJECT DESIGN CRITERIA (Complete all applicable fields)

### A. Project Loading (at completion of construction)

1. Population served 662 Persons/Employees  
2. Commercial/Industrial Flow (Average/Peak) \_\_\_\_\_ / \_\_\_\_\_ gpd  
Domestic Flow (Average/Peak) 37,550 / 133,678 gpd  
Infiltration/Inflow (Average/Peak) 50 / 178 gpd  
← Total Flow (Average/Peak) 37,600 / 133,856 gpd  
3. Commercial/Industrial BOD<sub>5</sub> (Average/Peak) \_\_\_\_\_ / \_\_\_\_\_ gpd  
Domestic BOD<sub>5</sub> (Average/Peak) \_\_\_\_\_ / \_\_\_\_\_ gpd  
Total BOD<sub>5</sub> (Average/Peak) \_\_\_\_\_ / \_\_\_\_\_ gpd; \_\_\_\_\_ / \_\_\_\_\_ mg/L  
4. Total Suspended Solids (Average/Peak) \_\_\_\_\_ / \_\_\_\_\_ gpd;  
\_\_\_\_\_ / \_\_\_\_\_ mg/L  
5. NH<sub>3</sub>-N (Average/Peak) \_\_\_\_\_ / \_\_\_\_\_ gpd; \_\_\_\_\_ / \_\_\_\_\_ mg/L

B. Principal Industrial Wastes to be Treated (Attach a separate sheet if necessary):

Industry Name	Product	Flow (gpd)	Waste Characteristics

C. NPDES Permit Requirements for New Facility or Upgrade

Has an NPDES Permit application been sent to MDEQ? ☐ Yes ☐ No ☒ N/A

Has MDEQ issued the NPDES permit? ☐ Yes (Fill in information below) ☐ No ☒ N/A

Flow \_\_\_\_\_ MGD

BOD<sub>5</sub> \_\_\_\_\_ mg/L

\_\_\_\_\_ lb/day

Suspended Solids \_\_\_\_\_ mg/L

\_\_\_\_\_ lb/day

pH \_\_\_\_\_ units

Ammonia Nitrogen \_\_\_\_\_ mg/L

\_\_\_\_\_ lb/day

Fecal Coliform \_\_\_\_\_ per 100 mL

DO \_\_\_\_\_ mg/L

Residual Chlorine \_\_\_\_\_ mg/L

Other \_\_\_\_\_

D. Sewage Pumping Stations

Location/Number	Units Served	Pump Capacity (gpm)	Influent Flow (gpm)	
			Average	Peak
			43.6	155

III. **EXISTING SYSTEMS CONNECTION**

A. Existing Collection System

Facilities collecting sewage from the proposed project is owned by

City of Olive Branch Public Works

(Utility Company, Municipality, etc.)

**B. Certification from Existing Collection System Entity**

The official(s) responsible for the wastewater collection facilities denoted in Section III.A above, that will serve the project, do hereby certify that we agree to transport the wastewater flows generated from the proposed project. We also hereby certify that we have determined that our collection system(s) have the capacity available to transport the wastewater flows generated from the proposed project.

Signature: Andy Owens  
Title: City Engineer  
Entity Name: City of Olive Branch  
Date: 12-5-21

**C. Existing Treatment System**

1. Facilities treating sewage from the proposed project are owned by \_\_\_\_\_  
DeSoto County Regional Utility Authority  
(Utility Company, Municipality, etc.)
2. Type of treatment facility - Activated Sludge  
(Activated Sludge, Trickling Filter, etc.)
3. Current capacity of treatment facility - 8.0 MGD
4. Current influent flow to treatment facility - 6.0 MGD

**D. Certification from Existing Treatment System Entity**

The official(s) responsible for the wastewater treatment facilities denoted in Section III.C above, that will serve the project, do hereby certify that we agree to treat the wastewater flows generated from the proposed project. We also hereby certify that we have determined that our treatment system(s) have the capacity available to treat the wastewater flows generated from the proposed project.

Signature: Andy Owens  
Title: Chairman  
Entity Name: DeSoto County Regional Utility Authority  
Date: 1-19-2022

**IV. ATTACHMENTS - Please provide the following:**

1. Non-refundable Application Review Deposit, if applicable

**The following documents are preferred to be received by email in PDF format:**

2. Preliminary plat of subdivision/development to include Lot and Utility layout as a minimum to include easements, both existing and dedicated.
3. Vicinity Map. Scaled to fit 8 ½ x 11 sheet with project location clearly shown, identifying adjacent roads/streets relative to the project area.
4. Design plans. The following information shall be included on the first plan sheet or within the plan set:
  - a. The proposed name of the development, the name and address of the owner and developer, the name, address, seal and signature of the engineer.
  - b. A description that includes township, range, quarter section and tax lot numbers of the areas impacted by the development
  - c. Index of plan sheets
  - d. For multi-phase projects, an overall map showing the limits of each phase.
  - e. Detailed plans of the proposed development including roads, lots, utilities, drainage ways, grading, adjacent development and property owners. The plans should be referenced to Section, Township, and Range.

**Provide the following if a collection system (wet or dry) is proposed:**

5. Clear, readable plan and profile views of all proposed sanitary sewer lines. These plan and profile views shall include the following information, as a minimum:
  - a. Plan and profile views displayed with plan view over the profile view on a sheet illustrating pipe type and size.
  - b. Public and private lines and facilities clearly marked on both the plan and profile view.
  - c. Existing sanitary manholes labeled as to who owns said manholes and connecting pipeline system.
  - d. The distance from the nearest existing manhole where a new manhole structure is constructed over an existing line, or where a main line connection is made to a trunk line. A scaleable drawing will be sufficient for this item.
  - e. Existing and proposed utilities shown on plan view and utility crossings shown on the profile.
  - f. A plan view scale no smaller than 1"=50', and a profile view scale no smaller than 1"=50' horizontal and 1"=10' vertical. Architectural scales shall not be used.
  - g. North Arrow.

- h. Type of backfill.
  - i. All easements including the distance from the mainline to the easement line. A scaleable drawing will be sufficient for this item.
  - j. Drainage hazard areas and FEMA designated 100 year floodplains and floodways, if applicable.
  - k. The stationing of each new main line section beginning at 0+00 or other even station (e.g., 1+00, 10+00, etc.) at the downstream terminus. In phase developments, previous stationing may be continued.
6. The calculations for sizing of the sanitary system along with any maps of watershed boundaries with contours, population projection data and/or development build out projections along with all assumptions or other information used to determine flow amounts all to be submitted as a separate document.

**Provide the following if individual on-site wastewater treatment units are proposed:**

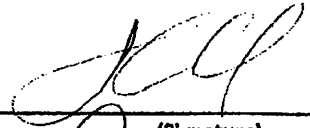
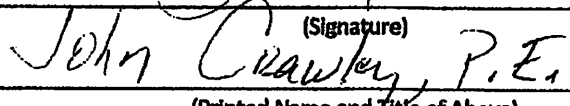
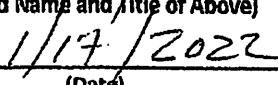
7. Approval letter for individual on-site wastewater treatment units from the MS Department of Health for all lots specified in this application.

The undersigned hereby states:

"I certify under penalty of law that this document and all attachments were prepared under my direction and supervision and in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person(s) who manage the system, or those directly responsible for gather information, the information 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" (40 C.F.R. 403.6(a)(2)(ii)).

In the event I discover that any information submitted was inaccurate and/or incomplete, I will immediately supplement this Application with the revised accurate and/or complete information. Further, I agree to indemnify and hold harmless the DeSoto County Regional Utility Authority for any damages and/or claims related to any inaccurate and/or incomplete information that I provide.

Application submitted by:

  
\_\_\_\_\_  
(Signature)  
  
\_\_\_\_\_  
(Printed Name and Title of Above)  
  
\_\_\_\_\_  
(Date)

**RETURN APPLICATION TO:**

Email (Preferred method): judymarshall@digitdesoto.com

Mailing address: DeSoto County Regional Utility Authority  
Attn: Permits  
365 Loshier Street, Suite, 310  
Hernando, MS 38632

**TO BE COMPLETED BY DCRUA**

Name of Retail Agent - Olive Branch

Approved Contract/Document from Retail Agent accepting user as customer received on:  
DATE - 12-15-2021

Application complete on: Date - 1-19-2022 By - asl

**C. EXISTING SEWAGE TREATMENT WORKS**

1. The facilities responsible for treatment of the sewage from this proposed project are owned by Desoto County Regional Utility Authority.  
(Utility Company, Municipality, etc.)
2. The OPC Permit Number for this wastewater facility is MS0062227.
3. The capacity for this wastewater treatment facility is 8.0 MGD.
4. The treatment type of this wastewater treatment facility is Activated Sludge.  
(Activated Sludge, Aerated Lagoon, etc.)
5. The present population served by the treatment facility is +/- 40,000.
6. The operator in charge will be Eddy Russell, who is a  
Class IV wastewater operator, holding certificate number WS4-00008361.

**D. CERTIFICATION FROM WASTEWATER TREATMENT ENTITY**

The official responsible for the wastewater treatment facility denoted in Section C. above, that will serve the proposed project, does hereby certify that we agree to treat the wastewater flows generated from the proposed project. We also hereby certify that we have determined that our treatment facility has the capacity available to treat properly the wastewater flows generated from the proposed project.

Audy D. Burns  
Signature

Chairman  
Title

DeSoto County Regional Utility Authority  
Entity

**E. PROPOSED PROJECT DETAILS**

1. The ultimate population to be served by this proposed project is \_\_\_\_\_.
2. The number of connections to be added are 4.
3. Per capita discharge 37,550 gpcd: Infiltration 50 gpcd. (Estimate, if unknown)
4. Area Served in Acres 11.2 Design Population Per Acre 59.1
5. The area water is supplied by City of Olive Branch Public Works Department

\_\_\_\_\_  
(Name and Address of Water Utility)





# State of Mississippi

TATE REEVES

Governor

## MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY

CHRIS WELLS, EXECUTIVE DIRECTOR

April 12, 2022

Mr. Earl Warren  
Trivest Corporation  
10899 Highway 178  
Olive Branch, MS 38654

Dear Mr. Warren:

Re: Fairhaven Planned Commercial Development Phase 1  
4 New Connections  
Olive Branch, Desoto County  
Project No. 80833-PLA20220001

Our technical review of the plans and specifications for the referenced wastewater collection project has been finalized and initial approval for construction is hereby given.

You are reminded that the owner is responsible for proper planning, design, construction, operation, maintenance, replacement, performance, and fiscal integrity of the project. The Department's approval of any document does not relieve the owner or any others of any liabilities or responsibilities. Department approval of any document is for administrative purposes only, and does not establish or convey any such liability or responsibility.

Please be reminded that it is the full responsibility of the owner to ensure all other approvals, permits, clearances, easements, agreements, etc., which may be required prior to or during construction of the project have been or will be obtained.

**No later than 60 days after the completion of the project, the owner must, through a letter signed by a professional engineer, certify to the department that the project has been constructed in accordance with submitted plans and specifications.** If any changes to the approved plans and specifications are made, "as-built" drawings with a list of all changes must also be submitted. We strongly encourage the submission of Final Plans and Specifications in an electronic file format such as PDF, TIFF on CD or DVD. Please note this is a change from the past procedure of requiring "hard-copy" plans. A signed and stamped cover letter should be included with any electronic files indicating that the plans and specifications submitted electronically were developed by a professional engineer who holds a valid certificate of registration as a professional engineer issued by the Mississippi State Board of Registration for Professional Engineers and Land Surveyors. **Final approval will not be granted until our office has received the engineer's certification of completeness and our office has finalized review of any significant changes to the initial plans.**

Should you have any questions, please contact me at (601) 961-5171.

OFFICE OF POLLUTION CONTROL

POST OFFICE BOX 2261 • JACKSON, MISSISSIPPI 39225-2261 • TEL: (601) 961-5171 • FAX: (601) 354-6612 • [www.mdeq.ms.gov](http://www.mdeq.ms.gov)

Facebook: [@mdeq.ms](https://www.facebook.com/mdeq.ms) • Twitter: [@MDEQ](https://twitter.com/MDEQ) • Instagram: [@MDEQ](https://www.instagram.com/MDEQ)

AN EQUAL OPPORTUNITY EMPLOYER

Sincerely,



Bradley R. Crain, P.E., BCEE  
Chief, Municipal & Private Facilities Branch  
Environmental Permits Division

cc: William F. Moody, P.E., BCEE, MSDH  
John Crawley, P.E.