# STORMWATER POLLUTION PREVENTION PLAN (SWPPP)

Prepared for:

# Germantown High School Classroom and PAC Additions

A Proposed Site Development Project

409 Calhoun Station PKWY Madison, MS 39110

Under Mississippi's
Construction Stormwater General NPDES Permit
Coverage Number MSR10

April 13, 2023

Prepared by:



### **SWPPP** Contents

- 1. Narrative Description of Controls
- 2. Large Construction Notice of Intent
- 3. Prime Contractor Certification Form
- 4. General Permit Conditions (Omitted form MDEQ Copy)
- 5. Weekly SWPPP Inspection Form
- 6. Notice of Termination (NOT) of Coverage
- 7. Construction Plans:

C105.1 - Phase 1 Erosion Control Plan (SWPPP)

C105.2 - Phase 2 Erosion Control Plan (SWPPP)

C503 - SWPPP Details & Notes

C504 - SWPPP Details

### **Narrative Description of Controls**

### **Project Description:**

The project proposes to expand upon the existing facilities at Germantown High School campus. The work will include a new performing arts center, classrooms, parking facilities, demolition of existing parking, grading and new utilities to serve the expansion.

The project will disturb approximately 19.5 acres of land and the construction will require an approved MDEQ erosion control plan and implementation.

### **Sanitary Sewer Facilities:**

Sewage from the new buildings will be collected via new underground gravity pipes and routed to an existing sewer manhole on site. Bear Creek owns and maintains the municipal gravity sewer utility system that receives sewer flow from the site.

### **Project Sequence:**

Erosion control perimeter elements (diversion ditches, construction entrance, brush barriers, wattle checks and silt fence) and the sedimentation basin shall be installed first. Then, soil disturbance activities will be limited to the area of active construction and the disturbed areas will be stabilized daily upon completion of earthwork as construction progresses. Work should be performed in an efficient manner to avoid leaving disturbed areas exposed to rainfall for longer than necessary.

### **Non-Structural Controls:**

Clearing and soil disturbance will be limited to the smallest area necessary to perform the required task. Soil stabilization/vegetative stabilization measures must be initiated whenever any clearing, grading, grubbing, excavating or other land disturbing activities have temporarily or permanently ceased on any portion of the site and will not resume for a period of fourteen (14) calendar days or more. The appropriate temporary or permanent vegetative practices shall be initiated immediately (no later than the next workday).

Care will be taken to avoid working in wet soils whenever possible. When work in wet soils is unavoidable, disturbed areas will be stabilized immediately to return the area to pre-disturbance conditions. Care will be taken to prevent tracking of soils onto roadways to the extent possible and cleaned daily should excessive amounts of soils be deposited on roadways. Soil stockpiles and side-cast materials will be located away from drainage ways to prevent exposure to concentrated flows. Side-cast materials from trenching activities will be replaced and stabilized at the end of each workday to reduce exposure to runoff. Areas of disturbed soils will be vegetated or otherwise stabilized to prevent erosion immediately upon completion of disturbance activities. Placement of mulch and/or use of erosion control blankets may be used in areas where higher velocity flows are anticipated or where more immediate stabilization is needed. Good housekeeping practices will be followed to prevent impacts to runoff from waste and/or hazardous materials associated with construction (See Housekeeping & Maintenance section below). Routine inspections will be conducted to ensure proper installation, operation, and maintenance of non-structural and structural controls (See Recordkeeping section below).

### **Structural Controls:**

Temporary silt fencing and/or wattles will be installed as shown on plans along the site perimeter to divert run-on away from disturbed areas and to intercept and detain runoff. Temporary erosion checks will be used as shown on the design plans to slow runoff and prevent erosive flow velocity. All temporary structural controls will require adequate inspection and maintenance to ensure they function properly until disturbed areas are satisfactorily stabilized, and all temporary structural controls will be removed following satisfactory stabilization. Rip-rap armoring or other appropriate permanent measures will be used to stabilize disturbed soils in channels, ditches and pipe outfalls.

### **Good Housekeeping & Maintenance:**

The project site will be kept in a neat and orderly condition during site activities. Fuels and other potentially hazardous chemicals will not be stored on site. Equipment fueling and routine maintenance will be performed at a designated location away from runoff. Major equipment repairs will be conducted off-site. Any leaks or spills will be immediately collected and properly disposed of. Waste materials including litter, construction debris, and potentially hazardous waste will be collected and disposed of properly. Appropriate waste receptacles and regular collection will be provided and maintained. Employees responsible for handling potentially hazardous materials will receive training as appropriate to ensure adequate knowledge of proper use, handling, storage, and disposal methods. All employees will receive training as appropriate to ensure familiarity with the applicable conditions of this SWPPP.

All temporary and sediment control measures at a minimum, must be designed, installed and maintained and any additional and/or alternative erosion and sediment controls will be installed where appropriate. The sediment basin will be cleaned out when the level of sediment reaches 1/3 to ½ height of control, and or when the capacity has been reduced by 50%. If any additional or alternative BMPs beyond what's shown on plans should become necessary, then the contractor shall install additional BMPs and the contractor should consult with the SWPPP designer/project engineer in seeking guidance as to which methods are appropriate.

### Roadway Track Out Prevention & House Keeping/Maintenance:

The contractor shall ensure vehicles are adequately cleaned prior to exiting the limits of disturbance to prevent track out. If the action of the stone construction exit does not satisfactorily prevent track out from traffic exiting the site, the contractor shall implement a wheel wash system at the construction exit. water from the wheel wash system shall be directed towards the construction exit sediment trap for treatment of the sediment laden water. the contractor shall also have an attendant stationed at the construction exit. the attendant shall have the authority to prohibit traffic from exiting the site if it appears that vehicles exiting the site will cause track out. it is ultimately the contractor's responsibility to ensure that traffic from the site will not cause track out from the project site. by submitting a bid on the project, the contractor affirms that adequate funds have been included to address these requirements.

### **Final Stabilization:**

The site will be considered to have reached final stabilization when rough grading/earth work operations are complete, buildings, pavements and utilities are installed, and approximately 70% of all disturbed soil areas have established grass cover. Refer to temporary and permanent seeding notes

(SWPPP Details & Notes) for project grass requirements. At such time contractor shall submit a request for termination to MDEQ.

### **Recordkeeping/Reporting:**

Upon commencement of construction the contractor shall begin stormwater inspections. Inspections shall be performed by persons familiar with stormwater management practices. All controls and outfalls/discharge points shall be inspected after rain events that produce discharge for a minimum of four inspections per month in accordance with ACT6, S-5.

Inspections will be documented using the designated inspection forms and any repairs or modifications required must be completed within 24 hours of discovery or as soon as conditions allow. Repairs, maintenance, and/or modifications will be recorded on the inspection forms accordingly. In the event significant modifications to this SWPPP are determined necessary, such modifications will be approved by the SWPPP designer/project engineer.

AI: 49366

Coverage # : MSR108946



Rec'd via email : 04/12/2023

### MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY (MDEQ) Large Construction Storm Water General Permit NPDES Permit MSR10

# LARGE CONSTRUCTION FORMS PACKAGE

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These standard forms are used to apply for permit coverage under the Large Construction Storm Water General Permit and for submittals and record keeping required by permit conditions after coverage has been granted. The forms are on our website at <a href="www.deq.state.ms.us/MDEQ.nsf/page/epd\_epdgeneral">www.deq.state.ms.us/MDEQ.nsf/page/epd\_epdgeneral</a>. Required information can be completed on screen, printed and signed.

Revised: 12/06/16



### 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. Eoverage 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

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

MSR10	
(NUMBER TO BE ASSIGNED BY STATE	1

APPLICANT IS THE:	☐ OWNER ☐	PRIME CONTRAC	TOR		
	OWNER CON	NTACT INFORMATI	ON		
OWNER CONTACT PERSON	I:				
OWNER COMPANY LEGAL					
OWNER STREET OR P.O. BO	OX:				
OWNER CITY:		STATE:		ZIP:	
OWNER PHONE #: ()_		OWNER EMAIL:			
		OR CONTACT INFO			
PRIME CONTRACTOR CON	TACT PERSON:				
PRIME CONTRACTOR COM					
PRIME CONTRACTOR STRI	EET OR P.O. BOX:				
PRIME CONTRACTOR CITY	/ <b>:</b>	STATE:		ZIP:	
PRIME CONTRACTOR PHO	NE #: ()	PRIME CONTRACTO	R EMAIL:		
	FACILITY	SITE INFORMATIO	N		
FACILITY SITE NAME:					
FACILITY SITE ADDRESS (I indicate the beginning of the proj	f the physical address is r	not available, please indicate		d road. For line	ar projects
STREET:		COUNTY:_			
FACILITY SITE TRIBAL LA					
LATITUDE: degrees		<del></del>			
LAT & LONG DATA SOURCE					
TOTAL ACREAGE THAT WI					
IS THIS PART OF A LARGEI	R COMMON PLAN OF	DEVELOPMENT?		YES 🗆	NO 🗆
IF YES, NAME OF LARGER ( AND PERMIT COVERA	COMMON PLAN OF I AGE NUMBER: MSR10	DEVELOPMENT:			
ESTIMATED CONSTRUCTION	ON PROJECT START	DATE:		YYYY-MM-DD	
ESTIMATED CONSTRUCTION	ON PROJECT END DA	TE:		VVVVVAAA	
				YYYY-MM-DD	
ESTIMATED CONSTRUCTION DESCRIPTION OF CONSTRUCTION OF	UCTION ACTIVITY: _				

NEAREST NAMED RECEIVING STREAM:		
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 M http://www.deq.state.ms.us/MDEQ.nsf/page/TWB_Total_Maximum_Daily_Load_Section)	YES□ DEQ's web site:	NO□
HAS A TMDL BEEN ESTABLISHED FOR THE RECEIVING STREAM SEGMENT?	YES□	$_{ m NO}\square$
ARE THERE RECREATIONAL STREAMS, PRIVATE/PUBLIC PONDS OR LAKES WITHIN ½ MILE DOWNSTREAM OF PROJECT BOUNDRY THAT MAY BE IMPACTED ACTIVITY?	YES□ BY THE CONS	NO□ TRUCTION
EXISTING DATA DESCRIBING THE SOIL (for linear projects please describe in SWPPP):		
WILL FLOCCULANTS BE USED TO TREAT TURBIDITY IN STORM WATER?	YES□	NO□
IF YES, INDICATE THE TYPE OF FLOCCULANT.  □ ANIONIC POLYACRYL □ OTHER	IMIDE (PAM)	
IF YES, DOES THE SWPPP DESCRIBE THE METHOD OF INTRODUCTION, THE LOCATION OF WHERE FLOCCULATED MATERIAL WILL SETTLE?	ATION OF INTRO YES □	ODUCTION NO □

<sup>&</sup>lt;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: $\Box$ AIR $\Box$ HAZARDOUS WASTE	□ PRETREATMEN	NT		
$\square$ WATER STATE OPERATING $\square$ 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 for		NO □ nents.)		
IF THE PROJECT REQUIRES A CORPS OF ENGINEER SECTION 404 PERMIT, PR DOCUMENTATION THAT:	OVIDE APPROPRIAT	ГЕ		
• The project has been approved by individual permit, or				
The work will be covered by a nationwide permit and NO NOTIFICATION to the Control of the C	Corps is required, or			
• The work will be covered by a nationwide or general permit and NOTIFICATION	to the Corps is require	d		
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 □ ater, 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 S	EWAGE		
Existing Municipal or Commercial System. Please attach plans and specifications f associated "Information Regarding Proposed Wastewater Projects" form or approve Hancock, Harrison, Jackson, Pearl River and Stone Counties. If the plans and specification of LCNOI submittal, MDEQ will accept written acknowledgement from official(s) r collection and treatment that the flows generated from the proposed project can and properly. The letter must include the estimated flow.	val from County Utility A ons can not be provided responsible for wastewa	Authority in d at the time iter		
☐ Collection and Treatment System will be Constructed. Please attach a copy of the copermit from MDEQ or indicate the date the application was submitted to MDEQ (I	over of the NPDES disc Date:	charge )		
☐ Individual Onsite Wastewater Disposal Systems for Subdivisions Less than 35 Lots. of General Acceptance from the Mississippi State Department of Health or certifica engineer that the platted lots should support individual onsite wastewater disposal states.	tion from a registered	f the Letter professional		
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 PROJE	ECT MUST COMPLY:	:		

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)

Date Signed

Printed Name<sup>1</sup>

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

### PRIME CONTRACTOR CERTIFICATION

### LARGE CONSTRUCTION GENERAL PERMIT

Coverage No. MSR10 \_\_\_ \_ \_ **County** 

(Fill in your Certificate of Coverage Number and County)



By completing and submitting this form to MDEQ, the prime contractor is certifying that (1) they have operational control over the erosion and sediment control specifications (including the ability to make modifications to such specifications) or (2) they have day-to-day operational control of those activities at the site necessary to ensure compliance with the SWPPP and applicable permit conditions.

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 permit. Notwithstanding any permit condition to the contrary, the coverage recipient and any person who causes pollution of waters of the state or places waste in a location where they are likely to cause pollution of any waters of the state shall remain responsible under applicable federal and state laws and regulations and applicable permits.

### PRIME CONTRACTOR INFORMATION

PRIME CONTRACTOR CONTACT PERSON:	PHONE NUMBER: ()
PRIME CONTRACTOR COMPANY:	
PRIME CONTRACTOR STREET (P.O. BOX):	
PRIME CONTRACTOR CITY:	STATE: ZIP:
E-MAIL ADDRESS:	
	R INFORMATION
OWNER CONTACT PERSON:	PHONE NUMBER: ()
OWNER COMPANY NAME:	
PROJEC	CT INFORMATION
PROJECT NAME:	
DESCRIPTION OF CONSTRUCTION ACTIVITY:	
PHYSICAL SITE ADDRESS (If the physical address is indicate the beginning of the project and identify all cour	not available indicate the nearest named road. For linear projects, nties the project traverses.)
STREET:	
	COUNTY:
permit. I further certify under penalty of law that this docume accordance with a system designed to assure that qualified per my inquiry of the person or persons who manage the system, or	Il comply with all the requirements in the above referenced general NPDES ent and all attachments were prepared under my direction or supervision in sonnel properly gathered and evaluated the information submitted. Based on r those persons directly responsible for gathering the information, the ef, true, accurate and complete. I am aware that there are significant sility of fine and imprisonment for knowing violations.
Prime Contractor Signature <sup>1</sup>	Date Signed
Printed Name <sup>1</sup>	Title

<sup>1</sup>This application shall be signed as follows:

- 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.

This Prime Contractors Certification form shall be submitted to:

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

Revised: 10/25/16

Keep a Copy Available at the Permitted Facility or Locally Available
Submit the Inspection Reports Only if Requested by the Mississippi Department of Environmental Quality (MDEQ)

# LARGE CONSTRUCTION GENERAL PERMIT SITE INSPECTION AND CERTIFICATION FORM COVERAGE NUMBER (MSR10 \_ \_ \_ \_ \_)



### **INSTRUCTIONS**

Results of construction storm water inspections required by ACT6 of this permit shall be recorded on this report form and kept with the Storm Water Pollution Prevention Plan (SWPPP) in accordance with the inspection documentation provisions of ACT9 of the this permit. Inspections shall be performed at least weekly for a minimum of four inspections per month. The coverage number must be listed at the top of all Inspection and Certification Forms.

	CO	VERAGE RECIPIENT II	NFORMATION		
OWNER/PRIME CONT	TRATOR NAME: Rich	ard Burge, Assistant S	Superintendent Mad	dison County Schools	
PROJECT NAME: GO	ermantown High Sch	nool Classroom and P.	AC additions		
PROJECT STREET AT	DRESS: 409 Calhou	n Station Parkway			- W
PROJECT CITY: Ma	dison	PROJE	CT COUNTY. Madis	on	
		DDRESS:			
				ZIP:	
				R: ()	
EMAIL ADDRESS:					
		NSPECTION DOCUMEN	NTATION		
DATE (mo/day/yr)	TIME (hr:min AM/PM)	ANY DEFICIENCIES? (CHECK IF YES)	ı	NSPECTOR(S)	
				and the second s	
		H			
Deficiencies Noted Duri	ng any Inspection (give	date(s); attach additional sh	eets if necessary):		
Corrective Action Taker	or Planned (give date(s)	): attach additional sheets if	necessary):		
	(5		,		
maintained, except for those	deficiencies noted above, in		r Pollution Prevention Plan	sediment controls have been impleme (SWPPP) and sound engineering pr	
I certify under penalty of law qualified personnel properly g information submitted is, to	that this document and all attac ather and evaluate the informa	chments were prepared under my attion submitted. Based on my inq d belief, true, accurate and comp	direction or supervision in ac uiry of the person or persons	ecordance with a system designed to a s responsible for gathering the inform e are significant penalties for submit	ation, the
Printed Name	K		Asst, G	apprintendent	

# **MAJOR MODIFICATION FORM** FOR LARGE CONSTRUCTION GENERAL PERMIT Coverage No. MSR10 \_\_ \_ \_ County \_\_\_\_



### 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.					
SWPPP details have been of	developed and are ready for M	DEQ review for subs	equent phases of an existing, covered project.		
"Footprint" identified in the	he original LCNOI is proposed	to be enlarged.			
This form must be signed by the current coverage recipient under Mississippi's Large Construction General Permit. A different developer of new phases of existing subdivisions must apply for separate permit coverage through the submittal of a new complete LCNOI package. Coverage recipients are authorized to discharge storm water associated with proposed expansions of existing subdivisions or subsequent phases, under the conditions of the General Permit, only upon receipt of written notification of approval by MDEQ. All other modifications, such as changes of erosion and sediment controls used, must be in accordance with ACT6, S-1 (6) and S-2 (7) of the General Permit.					
ALL INF	ORMATION MUST BE COM	•			
	COVERAGE REC	IPIENT INFORM	1ATION		
COVERAGE RECIPIENT CONTA	CT NAME:		TEL#()		
COMPANY NAME:					
STREET OR P.O. BOX:					
CITY:	STATE:	ZIP:	E-MAIL:		
	PROJECT	INFORMATION	V		
PROJECT NAME:					
CITY:					
ADDITIONAL ACREAGE TO BE			TAL PROJECT ACREAGE:		
with a system designed to assure inquiry of the person or persons	that qualified personnel prop who manage the system, or est of my knowledge and bel	erly gathered and e those persons directief, true, accurate a	d under my direction or supervision in accordance valuated the information submitted. Based on my stly responsible for gathering the information, the nd complete. I am aware that there are significant isonment for knowing violations.		
Signature (must be signed by cove	rage recipient)		Date		
Printed Name			Title		
Please submit this form to:	Chief, Environmental Permits Di MS Department of Environmenta P.O. Box 2261		tion Control		

Jackson, Mississippi 39225

Revised: 12/12/16

### **Environmental Permits for Industrial Facilities** Request for Transfer of Permit, General Permit Coverage and/or Name Change

Instructions: For Ownership Change-Complete all Items on Page 1 (except Item VIII) and Page 2 (reverse side). For Name Change Only-Complete Items I, II, V, VI, VII, VIII, and Page 2 (reverse side).

Note-This form should be submitted to MDEQ when a transferal date is finalized but prior to the actual transfer.

Item I.		Item II.	
Facility Name:		Responsible official after transfer or name change:	
Location: (Do Not Use P.O. Box)		Name:	
Street:		Title:	
City: State: <u>MS</u> Zip:		Mailing Address:	
County:		Street/P.O. Box:	
Telephone: ( )		City: State: Zip:	
		Telephone ()	
Item III.		Item IV.	
Previous Permittee <sup>1</sup> :		New Permittee <sup>1</sup> :	
Mailing Address:		Mailing Address:	
Street/P.O. Box:		Street/P.O. Box:	
City: State: Zip:		City: State: Zip:	
Telephone: ()		Telephone: ()	
Item V.		Item VI.	
Industrial Activity SIC Code:		Will Facility Operations Change? Yes No	_
Brief Description:		If yes, the appropriate applications and permits may require modificati	
		to change.	on prior
Item VII.		Item VIII.	
Will Facility Name Change? Yes No		Signature for Name Change	
If Yes, Provide New Name for Permit Coverage.		Print Name:	
New Name:		Authorized Signature <sup>2</sup> :	
		Title: Date:	
Item IX.  We the undersigned request transfer of permit(s) and	d/ar narmit aa	variance(a) listed on the healtside of this forms	
we the undersigned request transfer of permit(s) and	a/or permit co	verage(s) listed on the backside of this form.	
From:			
To:		Acquisition Date:	
Board it has the financial resources and operational expertise this document. By signature below, the previous permittee i	e and 3) agrees s requesting the y written notified	quirements of the permit(s), 2) the applicant can demonstrate to the to accept responsibility and liability for the permit(s) listed on the at the permit(s) and/or permit coverage(s) be transferred to the receation from the Office of Pollution Control (OPC). The OPC may be history of the recipient.	back of ipient.
Print New Permittee <sup>1</sup> Name		Print Previous Permittee <sup>1</sup> Name	
New Authorized Signature <sup>2</sup>		Previous Authorized Signature <sup>2</sup>	
Title I	Date	Title Date	
<sup>1</sup> A Permittee is a company or individual that has been issued an i <sup>2</sup> Authorized Signature must be owner or in the case of a corporat 11 Miss. Admin. Code Pt. 6. Ch. 1.		or coverage under a general permit.  officer as defined in Regulations 11 Miss. Admin. Code Pt. 2, Ch. 2. and	

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## Mississippi Department of Environmental Quality/Office of Pollution Control P.O. Box 2261 Jackson, Mississippi 39225

# (601) 961-5171

Item X. Storm Water	Item XI. Hazardous Waste ID Number
	Tem 21. Hazardous waste in ivallion
(Check One) A Storm Water Pollution Prevention Plan (SWPPP) is not required for the site.	EPA ID No
The recipient certifies that they have received a copy of the Office of Pollution Control approved SWPPP from the original owner.	(Check One) An EPA Hazardous Waste ID Number is not required for the site.
The recipient is submitting a new SWPPP, which is attached to this form.	The site's EPA ID Number is listed above and a Notification of Regulated Waste Activity Form is attached.
A copy of the SWPPP cannot be obtained from the original owner.	
Item XII. Permit(s) and/or 0	Coverage(s) to be Transferred
Permit Type:	Permit Type:
Permit/Coverage No.:	Permit/Coverage No.:
Permit Issuance Date:	Permit Issuance Date:
Date of General Permit Coverage:	Date of General Permit Coverage:
Permit Expiration Date:	Permit Expiration Date:
Permit Type:	Permit Type:
Permit/Coverage No.:	Permit/Coverage No.:
Permit Issuance Date:	Permit Issuance Date:
Date of General Permit Coverage:	Date of General Permit Coverage:
Permit Expiration Date:	Permit Expiration Date:
Permit Type:	Permit Type:
Permit/Coverage No.:	Permit/Coverage No.:
Permit Issuance Date:	Permit Issuance Date:
Date of General Permit Coverage:	Date of General Permit Coverage:
Permit Expiration Date:	Permit Expiration Date:
Permit Type:	OTHER INFORMATION:
Permit/Coverage No.:	
Permit Issuance Date:	
Date of General Permit Coverage:	
Permit Expiration Date:	
Page	1 2 of 2 DECEMBER 2016

# INSPECTION SUSPENSION FORM

# UNDER LARGE CONSTRUCTION STORM WATER GENERAL NPDES PERMIT MSR10



### **INSTRUCTIONS**

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 INFORMAT	ION
COVERAGE RECIPIENT CONTACT PERSON:		
COMPANY NAME:		
STREET OR P.O. BOX:		
CITY:	STATE:	ZIP:
PHONE # (INCLUDE AREA CODE):	E-MAIL:	
PROJ	ECT INFORMATION	
CONSTRUCTION STORM WATER GENERAL PERPROJECT NAME:		
CITY:		
I certify under penalty of law that this document and all a with a system designed to assure that qualified personnel inquiry of the person or persons who manage the system, information submitted is, to the best of my knowledge an penalties for submitting false information, including the pathat: land disturbing activities have ceased, no further months, the site is stable with no active erosion, and v	properly gathered and evaluated to or those persons directly responsi ad belief, true, accurate and complete possibility of fine and imprisonment r land disturbing activities are p	the information submitted. Based on my ble for gathering the information, the etc. I am aware that there are significant int for knowing violations. I further certify lanned for a period of at least six (6)
Signature (must be signed by coverage recipient)		Date Signed
Printed Name	Т	itle
Please submit this form to:  Chief, Environmental MS Department of En	Permits Division	on Control

P.O. Box 2261

Jackson, Mississippi 39225

Revised: 12/10/2016

# Request for Termination (RFT) of Coverage



# LARGE CONSTRUCTION GENERAL PERMIT Coverage No. MSR10 \_\_ \_ \_ County \_\_\_\_

(Fill in your Certificate of Coverage Number and County)

This form must be submitted within thirty (30) days of achieving final stabilization (see ACT10, S-1 of general permit). Failure to submit this form is a violation of permit conditions.

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).

(Please Print or Type)

## Project Name: Physical Site Street Address (if not available, indicate nearest named road): County: Coverage Recipient Company Name: Street Address / P.O. Box: Coverage Recipient Contact Name and Position: \_\_\_\_\_ Tel. #: (\_\_\_\_) Has another owner(s) or operator(s) assumed control over all areas of the site that have not reached final stabilization? RESIDENTIAL SUBDIVISIONS: YES. A copy of the Registration Form for Residential Lot Coverage for each lot or out parcel that has been sold and a site map, indicating which lots have been sold, are attached. NO. Coverage may not be terminated until all areas have reached final stabilization. COMMERCIAL DEVELOPMENT: YES. A copy of the site map, indicating which out-parcels have been sold, is attached. NO. Coverage may not be terminated until all areas have reached final stabilization. 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 fines and imprisonment for knowing violations. I understand that by submitting this Request for Termination and receiving written confirmation, I will no longer be authorized to discharge storm water associated with construction activity under this general permit. Discharging pollutants associated with construction activity to waters of the State without proper permit coverage is a violation of state law. I

also understand that the submittal of this Request for Termination does not release an owner or operator from liability for any violations of this permit or the Clean

Signature

<sup>1</sup>This application shall be signed according to the General Permit, ACT11, T-7 as follows:

- For a corporation, by a responsible corporate officer.
- For a partnership, by a general partner.

Water Act.

Authorized Name (Print)

- For a sole proprietorship, by the proprietor.
- For a municipal, state or other public facility, by principal executive officer, mayor, or ranking elected official.

After signing please mail to: Chief, Environmental Permits Division

MS Department of Environmental Quality, Office of Pollution Control

Telephone

P.O. Box 2261

Jackson, Mississippi 39225

Date Signed