At. 85247



DRY LITTER POULTRY ANIMAL FEEDING OPERATION GENERAL PERMIT NOTICE OF INTENT (DLPNOI)



COVERAGE NUMBER: MSG20 5 . For re-coverage, the coverage number must be completed for your specific project or this form will be considered incomplete and returned. The coverage number can be found at the bottom left corner of your previous Certificate of Coverage or in the subject heading of the Letter of Instruction for Recoverage.

I. GENERAL INFORMATION			
A. CONTACT AND FACILITY INFORMATION			
Name of Owner: Terry Kelly 0CT 5 2023			
Facility Name: TtA Paultry			
Mailing Address:			
Street or P.O. Box: 2833 Purvis to Columbia Rd			
City: WWW State: MS Zip: 39455			
Physical Site Address:			
Street (can not be a P.O. Box) 257 Rogers Rd			
City: COLUMBICI State: WS zip: 39429			
County: Marion			
(For new facilities) Latitude (degrees/min/sec): 30° 21′ 21.3" Longitude: -89° 54′ 5.4"			
(For new facilities) Nearest named receiving stream: Dry Creek, Pierce Creek			
Facility Telephone No. (Include Area Code):			
Facility Fax No. (Include Area Code):			
Contact Cell Phone No. (Include Area Code): (UUI) - U74-4923			
Other Contact Phone Numbers (Include Area Code): (LU2) 832-3757			
Contact Email: terry kelly 70 Oicloud. com			
B. ACTIVITY TYPE (Check all that apply)			
Existing operation NOT proposing expansion. Number of existing houses:			
Existing operation of an incinerator(s). Number of existing incinerator(s): New or expanding operation. Number of proposed houses: Number of proposed incinerators:			

II. DRY LITTER POULTRY FEEDING OPERATION CHARACTERISTICS

A. TYPE AND AMOUNT OF CH	ICKENS
For Existing Facilities: Has the facility changed the number of	houses or animal type (ie. broilers or layers)?
☐ No ☐ Yes – Identify Changes	s: was the same and
For New Facilities: Check type and indicate amount	
☐ Broiler (SIC 0251):	Pullet/Breeder (0252):
B. CONTRACT INFORMATION	
Is this facility a contract operation?	□ No ■ Yes-Integrator Name: Wayne Sanderson
C. TYPE OF DRY LITTER STOP	RAGE AND CAPACITY
For Existing Facilities: Has the facility changed the litter storage	ge type or the capacity?
☐ No ☐ Yes – Identify Changes	S:
For New Facilities: List type of dry litter storage and capac	ity (tons): IN NOUSE litter Sturage, 400 tons per house
D. <u>NUTRIENT MANAGEMENT</u>	PLAN
If you do not have a current Compreher current then complete the dates below:	nsive Nutrient Management Plan then one must be submitted, if your CNMP is CONTACTED NFCS
Development Date:	Expiration Date:
	ent plan (CNMP) identified above expires five years from the date it was developed lan must be submitted to MDEQ prior to its expiration date.

III. CONSTRUCTION AND/OR OPERATION OF A POULTRY MORTALITY INCINERATOR

construct and/or operate poultry r completing Sections IA, III and Γ	incineration equipment located at the fa mortality incineration equipment, you m V. Constructing and operating poultry individual permits is a <u>violation</u> of stat	nust submit an updated DLPNOI by mortality incineration equipment without a			
Yes, there is mortality incineration equipment located at the facility. Complete section below:					
MORTALITY INCINERATIO	N EQUIPMENT				
For Existing Facilities: Has the facility changed the number of	or type of incinerators, or the fuel type	burned?			
☐ No ☐ Yes – Identify Chang	ges:				
For New Facilities: Manufacturer Name:	Model Number:				
Capacity (tons/hour):	Fuel Type:				
 For a partnership, by a general For a sole proprietorship, by the 	partner: ie proprietor.				
 For a corporation, by a respons For a partnership, by a general 	sible corporate officer. partner.				
was developed and that an updexpiration date. I certify under penalty of law that supervision in accordance with a the information submitted. Based directly responsible for gathering belief, true, accurate and complet	t this document and all attachments were system designed to assure that qualified on my inquiry of the person or persons the information, the information submit	d personnel properly gathered and evaluated s who manage the system, or those persons litted is, to the best of my knowledge and penalties for submitting false information,			
understand when coverage is tern	ontinues as described in the original not ninated I am no longer authorized to op er permit coverage is in violation of stat	perate activities identified under this general			
Tung Kalp					
Signature of Responsible Office	cial	Date			
Terry Kelly Printed Name		<u>OWNTY</u> Title			

Contiguous Landowner Notification of a Dry Litter Poultry Animal Feeding Operation Facility

(See ACT 2, Condition S-2)

CERTIFIED MAIL NO.:	Date mailed:	
Company Name as Identified by MDEQ (please print)		
located at	MS	sickenship
Physical Street Address, City is proposing to construct and operate a Dry Litter Poultry Animal Feeding Op	State peration (County (to construct and operate
poultry/chicken house(s)). This poultry facility has existing house(s); t	the applic	cant proposes to build new
house(s). If permitted, the operation of the poultry house(s) will involve the r	managem	nent of dry animal waste and may
involve the operation of an incinerator. The operation shall NOT have a dis-	charge of	f process wastewater or
contaminated stormwater. The Natural Resource Conservation Service (NRC	CS) will d	evelop a Comprehensive Nutrient
Management Plan (CNMP) to address the management of the animal waste.	The CNN	MP will become an enforceable part
of the permit along with other conditions which will allow the facility to open	rate withi	in all state and federal environmental
laws and regulations. The permit can be found at the following link:		

This letter is to provide you notification of the proposed project and to provide you an opportunity to comment regarding environmental concerns about the project. MDEQ only has legal authority to consider environmental issues specified in the applicable laws and regulations. MDEQ does not have legal authority to consider matters outside of its jurisdiction; thus, comments regarding zoning or other non-environmental related comments should be directed to the local zoning and planning authorities.

If you do not have environmental comments regarding the proposed project, then no response is necessary and the permitting process will continue. If you have environmental comments regarding the proposed project, please notify MDEQ in writing within thirty (30) days from the postmarked date of this notification or by the end of the MDEQ 10-day online notification period, whichever is later. The online notification of the project can be found at the following link: https://www.mdeq.ms.gov/ensearch/general-permit-notice-of-intents. When making written comment, please reference the proposed project using the information above and provide your contact phone number and address. If you would like to request records or discuss concerns that you have regarding this project, please feel free to contact MDEQ at (601) 961-5171. Comments are to be mailed to the following address:

Chief, Environmental Permits Division Mississippi Department of Environmental Quality P. O. Box 2261 Jackson, Mississippi 39225-2261