SIMPLIFYING THE COMPLEX

December 11, 2023

RECENT 2023 DEC 11 2023 DEPL of Environmental Available

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

Re: Application for Certificate of Coverage under the Mississippi UST Groundwater Remediation General Permit Cefco No. 518 144 North Hills Street Meridian, Lauderdale County, Mississippi 39305 MGPTF No. 3880

To Whom It May Concern:

Enclosed is an "Underground Storage Tank Groundwater Remediation Notice of Intent (USTNOI)", for the above-referenced facility, along with other attachments required to apply for a Certificate of Coverage under the Mississippi UST Groundwater Remediation General Permit. One copy has also been submitted to Mr. John Traweek, UST Project Manager.

Thank you for your assistance. If you have any questions or need additional information, please do not hesitate to contact me at (601) 956-8233.

Sincerely, PPM Consultants, Inc.

any

Jacob Pongetti, RP Project Manager

Attachments: Attachment A, Proof of Good Standing Attachment B, Site Location Map Attachment C, POTW Notification and Approval Form Attachment D, Contiguous Landowner Notifications Attachment E, Water Treatment Chemicals List AI: 25429

Coverage #: MSG120282



ECEIV

MDEQ

UNDERGROUND STORAGE TANK GROUNDWATER REMEDIATION NOTICE OF INTENT (USTNOI)

For Coverage under Mississippi's Underground Storage Tank (UST) Groundwater Remediation General Permit General Permit MSG12

INSTRUCTIONS

Applicant must be the owner or operator of the remediation system. To avoid unnecessary delays, please be sure that the USTNOI is signed in accordance with Activity (ACT) 9, T-7, page 19 of the General Permit. The owner or operator that receives coverage is responsible for permit compliance. File at least 30 days prior to proposed discharge.

Required Submittals with the USTNOI Include:

- 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
- A USGS quadrangle map or copy extending at least one-half of a mile beyond the site's property boundary. The site location and outfalls must be outlined or highlighted. Quad maps can be obtained from the Office of Geology at 601-961-5523. If a copy is submitted, provide the name of the quadrangle map that is found in upper right hand corner.
- A letter of approval or denial from an available POTW or Wastewater Authority (see permit Activity (ACT) 4, S-6, page 7 and 11 Miss. Admin. Code Pt. 6, Ch. 1.).
- Certified-return receipts from contiguous landowner notifications (not required if the remediation system was operating under a previous permit or coverage see permit Activity 4, S-7, page 8.)
- A list of water treatment chemicals proposed to be used. Please submit the following information for each specific chemical: name and composition of the additive, discharge concentration, dosage addition rates, frequency of use, EPA registration (if applicable), and aquatic species toxicological data. ALL INFORMATION REQUESTS MUST BE ANSWERED (answer "NA" if not applicable)

THE APPLICANT IS OWNER OPERATOR

OWNER INFORMATION

Owner Contact Name: Terry Harrah			
Owner Company Legal Name: Fikes Wholesale, Inc.			
Owner Street or P.O. Box: P.O. Box 1287			
Owner City: Temple	State: <u>TX</u> Zip: <u>76503</u>		
Owner Phone #: (254) 791-0009 Owner Email: tharrah@cefcostores.com			

OPERATOR INFORMATION (if different than owner)

Operator Contact Name: Jacob Pongetti				
Operator Company Legal Name: PPM Consultants, Inc.				
Operator Street (P.O. Box): 289 Commerce Park Drive, Suite D				
Operator City: Ridgeland State: MS Zip: 39157				
Operator Phone #: (601)956-8233 Operator Email: jacob.pongetti@ppmco.com				

FACILITY INFORMATION

Site Name: Cefco #518			
Mississippi Groundwater Protection Trust Fund Identification Number: 3880			
Physical Site Address (if not available indicate the nearest named road)			
Street: 144 North Hills Street	City: Meridian		
County: Lauderdale	Zip: <u>39503</u>		
Latitude: <u>32</u> degrees <u>24</u> minutes <u>49</u> seconds Longitude:	88 degrees 40 minutes 35 seconds		
Method Used to Determine Lat. & Long. (GPS (Please GPS Facility Entr	rance) or Map Interpolation): <u>Google Earth Pro</u>		

WASTEWATER DISCHARGE INFORMATION

Where is the remediated groundwater proposed to be discharged? 🗌 State Waters 🗹 Collection/Treatment System
Name of Nearest Receiving Stream: N/A
Name of Publicly Owned Treatment Works or Wastewater Authority: Meridian POTW
Proposed rate of flow (MGD): 0.0072
POTW contact, title and telephone number: <u>David M. Hodge, Public Works Director</u>
(601) 485-1920
Is treatment provided at any outfall? If so, describe: Dual Phase Vacuum Extraction System (DPVE)
with a liquid ring pump, air water separator, and oil/water separator.

CERTIFICATION

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 face information, including the possibility of fine and imprisonment for knowing violations.

Signature¹ (Must be signed by operator when different than owner)

Jacob Pongetti

Printed Name¹

12/11/2023

Date Signed

Project Manager

Title

¹This application shall be signed according to the General Permit, Activity 9, T-7, page 19, 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, the mayor, or ranking elected official.

USTNOI forms must be submitted to:

Chief, Environmental Permits Division MS Dept of Environmental Quality, Office of Pollution Control P.O. Box 10385 Jackson, Mississippi 39289-0385

ATTACHMENTS

ATTACHMENT A

PROOF OF GOOD STANDING

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This is not an official certificate of good standing.

Name History		
Name		Name Type
PPM CONSULTANTS, INC.		Legal
Business Information		
Business Type:	Profit Corporation	
Business ID:	690594	
Status:	Good Standing	
Effective Date:	12/29/1994	
State of Incorporation:	LA	
Principal Office Address:	5555 Bankhead Highway Birmingham, AL 35210	
Registered Agent		
Name		
Cogency Global Inc. 248 E. Capitol Street, Suite 840 Jackson, MS 39201		
Officers & Directors		
Name	Title	
Keith Pyron 30704 Sergeant E.I. Boots Thomas Drive Spanish Fort, AL 36527	Director, President	
Michael D McCown 5555 Bankhead Highway Birmingham, AL 35210	Director, Vice President	
Charles Plummer 1600 Lamy Lane Monroe, LA 71201	Director, Treasurer	
L. Todd Perry 1600 Lamy Lane Monroe, LA 71201	Secretary	

https://corp.sos.ms.gov/corpconv/portal/c/ExecuteWorkflow.aspx?workflowid=g12dbd558-fa5d-49a1-a869-ad8b9db198db&FilingId=d41f7c5c-1afb-4ae8-b20c-e4ea33500cec

ATTACHMENT B

SITE LOCATION MAP



ATTACHMENT C

POTW NOTIFICATION AND APPROVAL FORM

POTW OR WASTEWATER AUTHORITY NOTIFICATION AND APPROVAL FORM

POTW or Wastewater Authority notification and approval request to discharge remediated groundwater associated with a leaking Underground Storage Tank (UST) - see Activity 4, S-6, page 7.

APPLICANT (please print or type)

PPM Consultants, Inc.	[name of applicant] is applying for coverage			
under Mississippi's Underground Storage Tank Ground	dwater Remediation General Permit [copy			
attached). Cefco 518 - Fikes Wholesale, Inc	[name of applicant] is proposing to			
discharge remediated groundwater, associated with a leaking underground petroleum storage tank, from a				
site located at 144 North Hills Street				
Meridian, Lauderdale County, Mississippi	[complete address with county].			
Approximately 0.0072 [proposed	l volume in MGD] of treated groundwater will be			
discharged to City of Meridian, Meridian POTW	[name of local POTW or			
Authority]. The treated groundwater will be discharged in accordance with the conditions, requirements				
and limitations of Mississippi's Underground Storage Tank Groundwater Remediation General Permit.				

POTW or WASTEWATER AUTHORITY

The Mississippi Department of Environmental Quality (MDEQ) must receive approval from the local POTW or Wastewater Authority in order for the applicant to obtain coverage under Mississippi's Underground Storage Tank Groundwater Remediation General Permit. Coverage is required prior to discharging remediated groundwater to a POTW or Wastewater Authority. If you have any questions, please contact the Environmental Permits Division at 601/961-5171.

I certify that I am a duly authorized representative of this POTW (or Authority) and directly responsible for managing daily operations. I am familiar with the requirements of the above referenced General Permit and acknowledge that, by signing this form, I am providing MDEQ with written approval of this proposed discharge to our treatment works.

POTW (or Authority) Authorized Signature

David M. Hodge Printed Name 12/8/2023 Date Signed

Title

Public Works Director

601-485-1920 Daytime Telephone

March 2022

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ATTACHMENT D

CONTIGUOUS LANDOWNER NOTIFICATIONS

CONTIGUOUS LANDOWNER NOTIFICATION OF CORRECTIVE

ACTION AND SUBSEQUENT DISCHARGE OF TREATED GROUNDWATER DUE TO LEAKING

UNDERGROUND STORAGE TANK(S)

(see Activity 4, S-7 of the USTGP.)

Underground storage tanks located at <u>Cefco #518 (144 North Hills Street, Meridian, Lauderdale</u> <u>County, Mississippi)</u> [street address with city and county] have been determined to have released motor fuel. In order to protect the environment and public health a cleanup process must be started. The cleanup involves bringing a trailer contained groundwater treatment system to the site, pumping out the contaminated groundwater, treating it and discharging the treated water into the city wastewater sewer to be further treated or, in rare cases, to State waters. The recovered fuel is disposed at an offsite permitted facility. The average time a unit is on site is thirty-five months.

PPM Consultants, Inc.	[applicant's name]
289 Commerce Park Drive, Suite D, Ridgeland, Mississippi 39157	[address]
(601)956-8233 [phone number] is proposing to begin the cleanup process and	d discharge treated
groundwater to the Meridian POTW	[name of
receiving stream or Publicly Owned Treatment Works or Wastewater Authority]. This	notification is to
provide you with an opportunity to comment to the Mississippi Department of Environ	mental Quality Permit
Board before the Board makes a final decision regarding the matter. No discharge of the	eated groundwater
will occur unless the Board grants coverage of this activity under the General Permit for	or Underground
Storage Tank Groundwater Remediation. This notice has been sent to you by Certified	Mail - Return
Receipt Requested. If you have no comments regarding this proposed facility, no respo	onse is necessary and
the permitting process will continue. If you have any comments, they must be received	l by the Mississippi
Department of Environmental Quality within 10 days of receipt of this correspondence	. The Department of
Environmental Quality is limited in its review of this project to those environment	tal issues in which
statutory authority has been given. If you have any questions you may contact the W	Vater I Permitting
Branch of MDEQ at (601) 961-5171. Comments are to be mailed to the following add	ress:

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

March 2022

			U.S. Postal Service
DER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY		CERTIFIED MAIL® RECEIPT
mplete items 1, 2, and 3.	A. Signature	125	Domestic Mail Only
int your name and address on the reverse that we can return the card to you.	X DA	~	For delivery information, visit our website at www.usps.com*.
tach this card to the back of the mailpiece, on the front if space permits.	B. Received by (Printed Name) C. Date c	51	Certified Mail Fee
on the front if space permits.	D. Is delivery address different from item 1?	E	\$ \$4.00
6.4	If YES, enter delivery address below:	ги	Extra Services & Fees (check box, edd fee as appropriate) □Return Receipt (hardcopy) Beturn Receipt (hardcorpy) Beturn Receipt (hardcorpy) Postmark
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203 North Hills Drive			Adult Signature Required Adult Signature Restricted Delivery
Meridian, Mississippi 39305		970	Postage \$1.38
	3. Service Type Priority Mail E	БП	Total Postage and Fees
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	Insured Mail Insured Mail Restricted Delivery Signature Con Restricted Delivery		PS Form 3800, April 2015 PSN 7530-02-000-8047 See Reverse for Instructions
orm 3811, July 2015 PSN 7530-02-000-9053	(over \$500) Domestic Return	P304	
			rd.S. Postal Service™
NDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	m	
Complete items 1, 2, and 3.	A. Signature	75	Domestic Mail Only
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o that we can return the card to you. ttach this card to the back of the mailpiece,	B. Received by (printed Name) PUIC, Date	25	Certified Mail Fee
r on the front if space permits.	B. Received by (Pfinted Name) C. Date	E	Extra Services & Fees (check box, add fee as appropriate)
rticle Addressed to:	D. Is delivery address different from item 1?	In i	Return Receipt (hardcopy) Return Receipt (electronic) Service State Sta
	/If YES, enter delivery address below:		Certified Mail Restricted Delivery \$Hin Adult Stynature Required \$
	NOV 0.9 2023		Adult Signature Restricted Delivery \$
Mississippi Power Company		976	Postage \$1.38 \$ 11/03/2023
P.O. Box 4079 Gulfport, Mississippi 39502		ñ	Total Postage and Fees
Sumport, imississippi 37302	3. Service Type	F	Sent TO MISSISSIPPI POWER CO.
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9590 9402 7165 1251 2052 09	Certified Mail® Delivery Delivery Signature Cor		City, State, ZIP+4*
ticle Number (Transfer from service label)	Collect on Delivery Collect on Delivery Sestricted Delivery Insured Mail		PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instruction
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orm 3811, July 2020 PSN 7530-02-000-9053	Domestic Return	Rece	_{eipt} S. Postal Service [™]
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that we can return the card to you.	LAND AND LAND	LU I	For delivery information, visit our website at www.usps.com ⁵ .
ach this card to the back of the mailpiece, on the front if space permits.	B. Received by (Printed Name) C. Date of	69	Certified Mail Fee
cle Addressed to:	D. Is delivery address different from item 1?	1	\$ \$3,55 12
	If YES, enter delivery address below:		Extra Services & Fees (check box, add fee as appropriate) Return Receipt (hardcopy)
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512 22 nd Avenue			Adult Signature Required Adult Signature Restricted Delivery
- Meridian, Mississippi 39301	61	20	Postage \$1,38 \$ \$1,02,0002
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ATTACHMENT E WATER TREATMENT CHEMICALS LIST

NO CHEMICALS WILL BE REQUIRED