AI: 73009

Rec'd via email: 12/17/2025



MAJOR MODIFICATION FORM FOR LARGE CONSTRUCTION GENERAL PERMIT

Coverage No. MSR10 7 6 0 5 County Madison

	IN	ISTRUCTIONS		
Coverage recipients shall notify the Mississippi E activities (check all that apply). This form shoul USGS topographic map, Corps of Engineers Section SWPPP details have been developed and "Footprint" identified in the original LC This form must be signed by the current coverage of new phases of existing subdivisions must appl Coverage recipients are authorized to discharge	d be submitt on 404 docum d are being s CNOI is prop ge recipient u yy for separa	ted with a modified Storm nentation and wastewater of ubmitted for MDEQ review posed to be changed. Inder Mississippi's Large of the permit coverage through	Water Pollution Preve collection and treatment w for subsequent phase Construction General th the submittal of a n	ention Plan (SWPPP), updated in the information, as appropriate. es of an existing project. Permit. A different developer ew complete LCNOI package.
phases, under the conditions of the General Perm	it, only upon	receipt of written notifica	tion of approval by M	DEQ. All other modifications,
such as changes of erosion and sediment controls	used, must c	be in accordance with ACI	6, S-1 (6) and S-2 (7) (i the General Fermit.
ALL INFORMATION	MUST BE	COMPLETED (indicate "N	//A" where not applica	able)
CURRENT	COVERA	AGE RECIPIENT INI	FORMATION	PROBLEM D
				TE#(601) 750-5111
COVERAGE RECIPIENT CONTACT NAME: Scott Gideon COMPANY NAME: Thornberry Development, LLC				
STREET OR P.O. BOX: 124 One Mad	ison Plaz	a Ste 1500		
CITY: Madison	27.47	MS 39	110 a	ideon2270@gmail.com
IS THE APPLICANT DIFFERENT FROM	THE CURR	ENT COVERAGE HOL	DER? YES	✓ NO
		ONSULTANT INFORMED by someone other than		
PREPARER/CONSULTANT CONTACT N	AME: Cla	y Cromwell	PHON	TE#(601) 415-7485
COMPANY NAME: Headwaters, Inc.				
STREET OR P.O. BOX: PO Box 100				
CITY: Madison	TATE: MS	S ZIP: 3911	E-MAIL: clay@I	neadwaters-inc.com
MAY MDEQ CORRESPOND DIRECTLY THE PROPOSED PROJECT / MODIFICAT	WITH THE			
	SITI	E INFORMATION		
PROJECT NAME: Thornberry Phase				
			NI/A	
CITY: Madison		TRIBAL LAND ID (N/A If		
Latitude / Longitude Collected at Project				
LATITUDE: 32 degrees minutes		LONGITUDE: 90		s seconds
LAT & LONG COLLECTION METHOD (e.g., GPS, M			
REDUCTION IN ACREAGE: ADDITIONAL ACREAGE TO BE DISTURBED: 50.82				
TOTAL PROJECT ACREAGE: 184.08		ESTIMATED CONS	TRUCTION END D	ATE: 12/01/2029

OF ANY KIND? (If yes,	OUTING, FILLING OR CROSSING A WATER CONVEYANG contact the U.S. Army Corps of Engineers' Regulatory Branch	ior pormand
IF THE PROJECT IS A BE DISPOSED? Check	SUBDIVISION OR A COMMERCIAL DEVELOPMENT, HO one of the following and attach the pertinent documents.	W WILL SANITARY SEWAGE
"Information Regardin Jackson, Pearl River and will accept written ack generated from the pro- flow.	Commercial System. Please attach plans and specifications for the c g Proposed Wastewater Projects" form or approval from County Util- Stone Counties. If the plans and specifications cannot be provided at nowledgement from official(s) responsible for wastewater collection posed project can and will be transported and treated properly. The	the time of LCNOI submittal, MDEQ n and treatment that the flows letter must include the estimated
MDEQ or indicate the	ent System will be Constructed. Please attach a copy of the cover of date the application was submitted to MDEQ (Date:	
Acceptance from the N platted lots should sup	tewater Disposal Systems for Subdivisions Less than 35 Lots. Please Mississippi State Department of Health or certification from a register port individual onsite wastewater disposal systems.	crea professional engineer and an
installing a central sev concerning the feasibi a copy of the Letter of engineer that the platte	stewater Disposal Systems for Subdivisions Greater than 35 Lots. A wage collection and treatment system must be made by MDEQ. A collity study must be attached. If a central collection and wastewater sy General Acceptance from the State Department of Health or certificed lots should support individual onsite wastewater disposal systems	s. opy of the response from MDEQ system is not feasible, then please attach cation from a registered professional s.
INDICATE ANY LOCA	AL STORM WATER ORDINANCE WITH WHICH THE PRO-	JECT MUST COMPLY:
Madison County ar	nd City of Gluckstadt	
NEAREST NAMED RI	CCEIVING STREAM: Bear Creek	
IS RECEIVING STREAT BODIES? (The 303(d) I	AM ON MISSISSIPPI'S 303(d) LIST OF IMPAIRED WATER ist of impaired waters and TMDL stream segments may be foun s://www.mdeq.ms.gov/water/surface-water/tmdl/	nd on YES NO
	STABLISHED FOR THE RECEIVING STREAM SEGMENT	? VES NO
with a system designed to inquiry of the person or p information submitted is, t	aw that this document and all attachments were prepared under my assure that qualified personnel properly gathered and evaluated the ersons who manage the system, or those persons directly respons to the best of my knowledge and belief, true, accurate and complete se information, including the possibility of fine and imprisonment for the possibility of the possibility of the angle of the possibility of the possibi	ne information submitted. Based on my sible for gathering the information, the e. I am aware that there are significant
Scott Gideon		anager
Printed Name	Title	
Please submit this form to:	Chief, Environmental Permits Division Office of Pollution Control MS Department of Environmental Quality P.O. Box 2261 Jackson, Mississippi 39225	
Electronically:	https://www.mdeq.ms.gov/construction-stormwater/	