AI 2831



Mississippi Department of Environmental Quality

Office of Pollution Control – Environmental Permits Division POST OFFICE BOX 10385 • JACKSON, MS 39289-0385 TEL: (601) 961-5171 • FAX: (601) 354-6612

NOTICE OF INTENT (NOI) FOR COVERAGE UNDER

DRY LITTER POULTRY CONCENTRATED ANIMAL FEEDING OPERATIONS

GENERAL NPDES PERMIT NUMBER MSG150357

(Number to be assigned by State)

### INSTRUCTIONS

APPLICANT MUST BE THE OWNER AND/OR OPERATOR OF THE PROPERTY ASSOCIATED WITH THE REGULATED ACTIVITY. ALL SUBMITTALS MUST INCLUDE THE FOLLOWING:

- A NUTRIENT MANAGEMENT PLAN
- A USGS QUAD MAP OR A COPY SHOWING THE SITE LOCATION
- A SITE DRAWING
- A STORM WATER POLLUTION PREVENTION PLAN (SWPPP), IF THERE IS TO BE CONSTRUCTION WORK TOTALING ONE ACRE OR MORE.

USGS QUAD MAPS SUBMITTED MUST EXTEND AT LEAST ONE MILE BEYOND THE PROPERTY BOUNDARIES OF THE FACILITY AND MUST CLEARLY SHOW ALL SPRINGS AND SURFACE WATER BODIES IN THE AREA, PLUS ALL DRINKING WATER WELLS WITHIN 1/4 MILE OF THE FACILITY. ADDITIONALLY, ALL PUBLIC DRINKING WELLS WITHIN ONE MILE OF THE FACILITY MUST BE IDENTIFIED.

THE SITE DRAWING MUST SHOW THE PROPERTY BOUNDARIES AND MUST INDICATE THE APPROXIMATE LOCATION OF EACH EXISTING AND PROPOSED STRUCTURE (HOUSE, INCINERATOR, DEAD BOX, LAND APPLICATION FIELD, COMPOSTING AREA, ETC). THE SITE DRAWING MUST INCLUDE A COMPASS DIRECTION HEADER.

SUBMIT AT LEAST 180 DAYS PRIOR TO COMMENCEMENT OF CONSTRUCTION OR PLANNED OPERATIONS. ALL FORMS MUST BE SUBMITTED TO: CHIEF, ENVIRONMENTAL PERMITS DIVISION, MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY, P.O. BOX 10385, JACKSON, MISSISSIPPI 39289-0385.

ALL QUESTIONS MUST BE ANSWERED. FOR THIS APPLICATION TO BE CONSIDERED, ALL QUESTIONS ON THIS FORM MUST BE ANSWERED. IF AN ITEM DOES NOT APPLY, ENTER "N/A" (NOT APPLICABLE) TO SHOW THAT YOU CONSIDERED THE QUESTION.

## I. GENERAL INFORMATION:

### CONTACT AND FACILITY INFORMATION

Name of Owner: Frances and Billy Joe McD	Oonald			
Facility Name: Back Forty Farms				
Mailing Address:				
Street or P.O. Box:1108 McDonald Drive	e			
City: Terry	State:	MS	Zip: _39170	
Physical Site Address: (If the physical address is not avaintersection.)	ilable indicate	the nearest r	named road or	
Street (can not be a P.O. Box) Same as al	bove			
City:	State:	Z	ip:	
County:	_			
Latitude (degrees/min/sec): 32.036831267				
Longitude (degrees/min/sec):90.2634061136				
Nearest named receiving stream: H	ickory Creek			
Facility Telephone No. (Include Area Code):	601-89	2-1274		
Facility Fax No. (Include Area Code):				
Facility Cell Phone No. (Include Area Code):				
Other Contact Phone Numbers (Include Area Code):				
TYPES OF ACTIVITY				
Check all that apply:				
☐ New dry litter poultry operation				
☐ Proposed dry litter poultry operation				
Construction and/or operation of an incinerator				
X New or expanding operations that will require construction activities disturbing one acre or more				

## II. CONCENTRATED POULTRY FEEDING OPERATION CHARACTERISTICS:

	Check any of the following BMPs that will be to control runoff and protect water quality  Boilers (SIC 0251):	
Type of Storage	Total Number of Days	Total Capacity (tons)
X Roofed Storage Shed	180	362
Concrete Pad		
☐ Impervious Soil Pad		
Other: Specify		
Are all poultry houses, that have been constructe all occupied dwellings or commercial establishm all adjoining property lines? X Yes  Are all incinerators at least 150 feet from the near light commercial buildings not owned by the app  NOTE: If answered no to any of these questions wavier must be completed by all affected propert Notary Public. A copy of the Dry Litter Buffer Zehttp://www.deq.state.ms.us/MDEQ.nsf/page/epd or call (601) 961-5171.	ents not owned by the application. No, attach wavier  rest residential or recreational licant? Yes  then attach a completed Pour yowners and notarized by a sone Waiver can be found at	ant and at least 150 feet from I area, all dwellings, and all No, attach wavier Itry Buffer Zone Waiver. The State of Mississippi appointed
CONTRACT INFOMATION  Is this facility a contract operation? X Yes  If yes, what is the name and address of the integra  Name: Sanderson Farms	No ator?  Address: P.O. Box 506, H	Jorlohumat MC 20092

### ATTACHMENTS

- X Attach an USGS quad map or copy that extends at least one mile beyond the property boundaries of the facility and clearly show all springs and surface water bodies in the area, plus all drinking water wells within ¼ mile of the facility. Additionally, all public drinking wells within one mile of the facility must be identified. Quad maps can be obtained from MDEQ Office of Geology at (601) 961-5523.
- X Attach a site drawing showing the property boundaries and must indicate the approximate location of each existing and proposed structure (house, incinerator, dead box, land application field, composting area, etc). The site drawing must include a compass direction header.

NUTRIENT MANAGEMENT PLAN Answer the following
Has a nutrient management plan been developed? X Yes   No
If yes, when was the nutrient management plan submitted? Date: 9/10/2003
If no, when will the nutrient management plan be developed? Date:
Is a nutrient management plan already being implemented for the facility? X Yes   No
The date of the last revision of the nutrient management plan. Date:3/29/2006
What is the estimated amount of litter generated per year?tons/year
Total acreage needed for land application: 167.0
Total acreage available for land application: 273.7
Will a third party remove litter off site?
If yes, how much litter will be transferred to other persons per year? tons/year
If not land applying, describe alternative use(s) of the litter:

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

X Check this box if this section does not apply

**NOTE**: Coverage for construction and/or operation of poultry mortality incinerators is for incinerators that have previously submitted approved stack test. For a list of incinerators that have approved stack tests on file please visit <a href="http://www.deq.state.ms.us/MDEQ.nsf/page/epd\_AgriculturalBranchEPD?OpenDocument">http://www.deq.state.ms.us/MDEQ.nsf/page/epd\_AgriculturalBranchEPD?OpenDocument</a> or call (601) 961-5171.

Carcasses generated at facilities other than the one identified in this NOI are not permitted for incineration under this coverage. Only chicken carcasses generated on site are permitted for incineration. All other materials such as leaves, trash, and construction debris, are strictly forbidden.

MANUFACTURER'S INFORMATI	ION TY	TYPE OF INCINERATOR	
Manufacturer Name:	0	☐ Single chamber ☐ Multiple chamber ☐ Other, describe	
Model Number:			
Capacity (tons/hour):			
T-1-1 1 C'			
Please provide the manufacture date for where installed on site in degrees, minu Date(s):	r each incinerator and in utes, and seconds. Latitude: Latitude: Latitude:	Longitude: Longitude: Longitude:	
Where installed on site in degrees, minuted to the state of the state	r each incinerator and in ates, and seconds.  Latitude: Latitude: Latitude: Latitude: Latitude:	Longitude: Longitude: Longitude:	
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# Check this box if this section does not apply NOTE: If the project is rerouting, filling, or crossing a water conveyance of any kind, contact the U.S. Army Corps of Engineers regulatory branch for possible permitting requirements. If the project requires a

NOTE: If the project is rerouting, filling, or crossing a water conveyance of any kind, contact the U.S. Army Corps of Engineers regulatory branch for possible permitting requirements. If the project requires a Corps of Engineer Section 404 Permit, provide appropriate documentation from the Corps that the project has been approved.

Indicate any local storm water ordinance with which the project must comply and submit any documentation of approval.

IV. CONSTRUCTION ACTIVITIES DISTURBING ONE ACRE OR MORE

PROJECT INFORMATION
Total acreages that will be disturbed: 3.6 acres
Description of the construction activity: Construct two 44' x 500' poultry houses
Nearest named receiving stream: Hickory Creek
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 X No
Soil Characteristics: Columbus Silt Loam, 0 to 2 percent slopes
X Attach a Storm Water Pollution Prevention Plan (SWPPP) that includes the minimum components found under "SWPPP Details" on pages 38 through 43 of the Multimedia General Pollution Control Permit to Construct/Operate Air Emission Equipment and/or Manage Manure and Discharge Storm Water in Accordance with the National Pollution Discharge Elimination System.

### IV. CERTIFICATION

Note: This application shall be signed according to the General Permit, page 3, as follows:

- · For a corporation, by a responsible corporate officer.
- · For a partnership, by a general partner.
- · For a sole proprietorship, by the proprietor.

I certify that to the best of my knowledge and belief formed after reasonable inquiry, the statements and information in this application are true, complete, and accurate, and that as a responsible official, my signature shall constitute an agreement that the applicant assumes the responsibility for any alteration, additions, or changes in operation that may be necessary to achieve and maintain compliance with all applicable Rules and Regulations. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Bin no Wengl	3-31-06
Signature of Responsible Official	Date
Owner	
Title	

### Terry Quadrangle

Date: 3/30/2006

Customer(s): FRANCES M MCDONALD

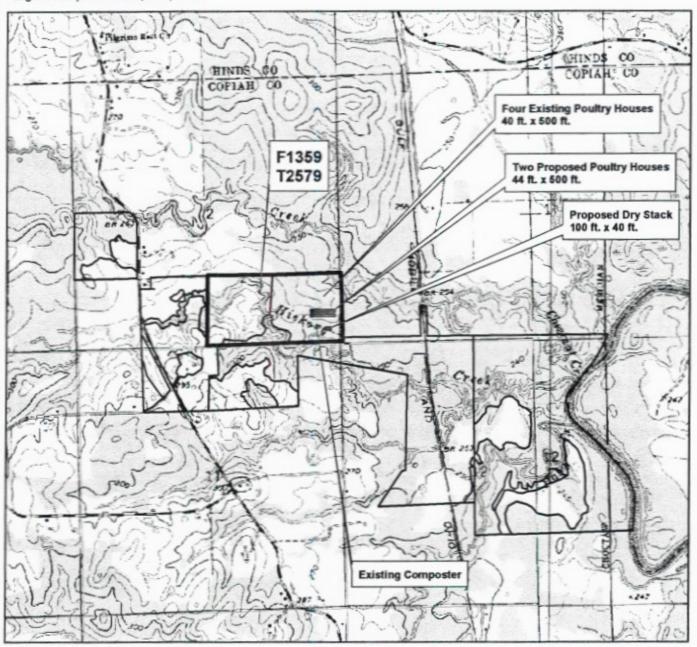
District COPIAH COUNTY SOIL & WATER CONSERVATION DISTRICT

Field Office: HAZLEHURST SERVICE CENTER

Agency: NRCS

Assisted By: Michael A Dedeaux State and County: MS, COPIAH

Legal Description: Sec. 2, T2N, R1W





- Proposed Practice
- Planned Land Units
- Section Lines
- Trac Boundaries

Image: New Aerial Photo





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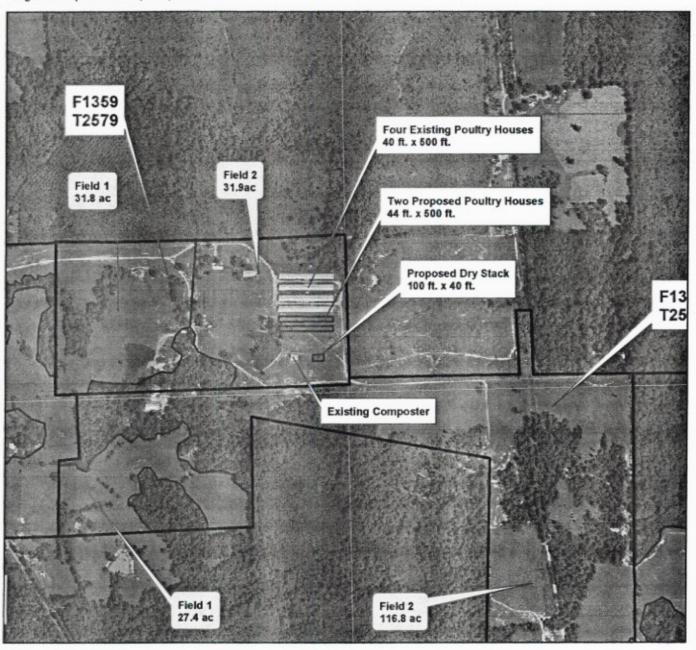
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### Legend

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- Proposed Practice
  - Planned Land Units
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