AI #23839 Gn P20060001



Mississippi Department of Environmental Quality

Office of Pollution Control - Environmental Permits Division POST OFFICE BOX 10385 • JACKSON, MS 39289-0385

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www.deg.state.ms.us

NOTICE OF INTENT (NOID) FOR COVERAGE UNDER

5000

### DRY LITTER POULTRY CONCENTRATED ANIMAL FEEDING OPERATIONS

GENERAL NPDES PERMIT NUMBER MSG150364

(Number to be assigned by State)

# INSTRUCTIONS AND MUST BE THE OWNER AND OR OPERATOR OF THE PROPERTY ASSOCIABLE THE REGULATED ACTIVITY SAIL SUBMITUALS MUST INCLEDE THE FOLLOWING METRICAL MEMORIPHIST PLAN USGS OUAD MAP OR A COPY SHOWING THE SITE LOCATION A SITEDRAWING STORM WATER POLIUTION PREVENTION PLAN (SWPPP) HETHERE IS TO BE ONSURFICTION WORK FOTALING ONE ACREOR MORE USGS OF ADMINIS SUBMITTED MUST INTEND AT LEAST ONE WILLE BEYOND THE PROPERTY BOLD ARE SOME THE FACTOR IN AND MUST CLEAR AND STREW WILLS WITHIN SURFACE AND ADMINISTRATION AND STREW WILLS WITHIN ONE WITHIN ONE WILLS WITHIN ONE WITHIN ONE WILLS WITHIN ONE WI THE SITE DRAWING MUST SHOWSTHE PROPERTY BOUNDARIES AND MUST EXDICATE THE APPROXIMATE HOCATION OF FACILIEMS TING AND PROPESSED STREET URE (HOUSE) INCINERATOR THE AD BOX ON A APPLICATION FILLID, COMPOSITION WE AN ETCH THE SET DRAWING MUST INCIDE A COMPASS DIRECTION FOR A DEX SUBMIT AT LEAST 180D. AND PRIOR TO COMMENCEMENTO CONSTRUCTION OR PLANNED OPER MICHONS. ALL FORMS MUST BE SUBMITTED TO CHIEF INVERDMENT AT PERMITS DIVISION. MISSISSIPPI DEPARTMENT OF INVIRONMENTAL OF ALL TY, P.O. BOX 10385 JACKSON, MISSISSIPPI 39289-0285 ALL QUESTIONS MUST BE ANSWERED. FOR THIS APPEICATION FOR CONSIDERED. ALL QUESTIONS ON THIS FORM MUST BE ANSWERED IF AN HEMODIS NOT APPLY. ENTER IN A" (NOT APPEICABLE) TO SHOW THAT YOU CONSIDERED THE QUESTION.

#### I. GENERAL INFORMATION:

CONTACT AND FACILITY INFORMATION Name of Owner: Andy Shannon Shannow Portry Facility Name: Mailing Address: Street or P.O. Box: 4475 Wah Rd City: Lena State: MS Zip: 39094 Physical Site Address: (If the physical address is not available indicate the nearest named road or intersection.) Street (can not be a P.O. Box) Hwy 487 City: Lena State: US Zip: 39094 County: Leake Latitude (degrees/min/sec): Longitude (degrees/min/sec): Nearest named receiving stream: Bolucto Facility Telephone No. (Include Area Code): Facility Fax No. (Include Area Code): Facility Cell Phone No. (Include Area Code): 601 654 9311 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 New or expanding operations that will require construction activities disturbing one acre or more

## II. CONCENTRATED POULTRY FEEDING OPERATION CHARACTERISTICS:

TYPE AND AMOUNT OF CHICKENS Check all that apply and indicate the amounts  Boilers (SIC 0251): 146, 400  Layers (SIC 0252):  TOTAL AMOUNT:  Housed under roof Open confinement  TYPES OF DRY LITTER CONTAINMEN Check all that apply and indicate total days of storage ar		
Type of Storage	Total Number of Days	Total Capacity (tons)
Roofed Storage Shed	Total Number of Days	Total Capacity (tolls)
Concrete Pad		
☐ Impervious Soil Pad		
Other: Specify		
Are all poultry houses, that have been construct all occupied dwellings or commercial establishmall adjoining property lines? Yes  Are all incinerators at least 150 feet from the nealight commercial buildings not owned by the appropriate the second of these questions wavier must be completed by all affected proper Notary Public. A copy of the Dry Litter Buffer 2 http://www.deq.state.ms.us/MDEQ.nsf/page/epd or call (601) 961-5171.	No, attach wavier  arest residential or recreational aplicant?  Yes  s then attach a completed Poultr ty owners and notarized by a State of the State of Sta	area, all dwellings, and all No, attach wavier N/A  ry Buffer Zone Waiver. The ate of Mississippi appointed
CONTRACT INFOMATION		
s this facility a contract operation? Yes	☐ No	
f yes, what is the name and address of the integra	ator?	
Name: KUCK	Address: Mortor	

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.
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? Yes No
If yes, when was the nutrient management plan submitted? Date:
If no, when will the nutrient management plan be developed? Date: 42606
Is a nutrient management plan already being implemented for the facility?   Yes   No
The date of the last revision of the nutrient management plan.  Date: 40606
What is the estimated amount of litter generated per year? tons/year
Total acreage needed for land application:33&_
Total acreage available for land application: 222
Will a third party remove litter off site? Yes No
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:
all liter that is not applied to the litter:  land listed in this CNM will be transported
land listed in this CNM will be transported
off-site
NOTE * ALL G POULTRY HOUSES WILL BE

ATTACHMENTS

## III. CONSTRUCTION AND/OR OPERATION OF A POULTRY MORTALITY INCINERATOR Check this box if this section does not apply

以此处理的150分别的特殊15公元》以2015年150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分别的150分

NOTE: Coverage for construction and/or operation of live previously submitted approved said (ast. For all file please visit http://www.doc.state.ms.us/\file\file\file\file\file\file\file\file	is of incinerator that have approved stack tests on	
Careasses generaled at includes other than the one identifies of the chares is generated in the careasses generated materials such as leaves, trash, and construction debres.	on site are permitted for incineration. All other	
MANUFACTURER'S INFORMATION	TYPE OF INCINERATOR	
Manufacturer Name:	☐ Single chamber	
Model Number:		
Capacity (tons/hour):	Other, describe	
Total number of incinerators on site:  Please provide the manufacture date for each incinerator where installed on site in degrees, minutes, and seconds.		
Date(s): Latitude:	Longitude:	
	Longitude:	
	Longitude:	
FUEL TYPE AND INCINERATOR TEMPERATUR	RE RANGE	
Fuel Type:		
f fuel oil is burned, what is the sulfur content of the oil?	%	
ncinerator operating temperature range	°F	

# IV. CONSTRUCTION ACTIVITIES DISTURBING ONE ACRE OR MORE Check this box if this section does not apply

NOTE: If the project is resorting filling, or crossing a water conveyance of any land, contact the U.S. Army Corps of Engineers regulatory branch for possible permuting requirements. If the project requires a corps of Engineer's action 404 Format intovide appropriate decreated from the Corps that the project has been approved.

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

PROJECT INFORM	ATION
	be disturbed: 7.1 acres
Description of the cons	Construct to Portfry houses
Smooth 40	Construct 6 Porceny houses
Nearest named receivin	g stream: Bolucta
	treams, private/public ponds or lakes within ½ mile downstream of project boundary the construction activity?  Yes No
Soil Characteristics:	Sweatman Fine Sandy Loan
found under "SWPI Permit to Construct	ter Pollution Prevention Plan (SWPPP) that includes the minimum components PP Details" on pages 38 through 43 of the Multimedia General Pollution Control to Operate Air Emission Equipment and/or Manage Manure and Discharge Storm we with the National Pollution Discharge Elimination System.

#### V. CERTIFICATION

Note: This application stall be special according to the General Pormulpage 3 as follows:

• For a corporation, by a responsible corporate officer.

• For a partnership by a general partner.

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.

3/14/06

Signature of Responsible Official

Owner"

Title