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 www.deq.state.ms.us

NOTICE OF INTENT (NOTIFIED FOR COVERAGE UNDER

MAY 18 2006

DRY LITTER POULTRY CONCENTRATED ANIMAL FEEDING OPERATIONS

GENERAL NPDES PERMIT NUMBER MSG150366

(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 OUAD 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: Odius Stringer III	
Facility Name: Stringer Farms	
Mailing Address:	
Street or P.O. Box: P.O. Box 290	
City: Seminary	State: MS Zip: 39479
Physical Site Address: (If the physical address is not avintersection.)	•
Street (can not be a P.O. Box) Myron Stringer Roa  City: Seminary	State: MS Zip: 39479
County: Covington	
Latitude (degrees/min/sec): N 31-36'-32"	
Longitude (degrees/min/sec): W 089-27'-9"	
Nearest named receiving stream: King Branch	
Facility Telephone No. (Include Area Code):	(601) 722-3259
Facility Fax No. (Include Area Code):	N/A
Facility Cell Phone No. (Include Area Code):	(601) 310-2794
Other Contact Phone Numbers (Include Area Code):	N/A
TYPES OF AC	CTIVITY
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 constr	ruction 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): 146,400  TOTAL AMOUNT: 146,400  Housed under roof Open confinement  TYPES OF DRY LITTER CONTAINMENT Check all that apply and indicate total days of storage and	Check any of the follow to control runoff and property of the constructed well and constructe	illage etland d		
Type of Storage	Total Number of Days	Total Capacity (tons)		
✓ Roofed Storage Shed	305	1,570		
Concrete Pad				
☐ Impervious Soil Pad				
Other: Specify				
Are all poultry houses, that have been constructed or enlarged after February 24, 1994, at least 600 feet from all occupied dwellings or commercial establishments not owned by the applicant and at least 150 feet from all adjoining property lines? Yes No, attach wavier  Are all incinerators at least 150 feet from the nearest residential or recreational area, all dwellings, and all light commercial buildings not owned by the applicant? Yes No, attach wavier  NOTE: If answered no to any of these questions then attach a completed Poultry Buffer Zone Waiver. The wavier must be completed by all affected property owners and notarized by a State of Mississippi appointed Notary Public. A copy of the Dry Litter Buffer Zone Waiver can be found at <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.				
Is this facility a contract operation?   ✓ Yes   No				
If yes, what is the name and address of the integrator?				
Name: Sanderson Farms Address: Laurel, MS				

☑	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.				
Ø	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.				
	TOWN THE ALL OF LAND AND ADDRESS OF THE ADDRESS OF				
	TRIENT MANAGEMENT PLAN wer the following				
Has	a nutrient management plan been developed?				
	If yes, when was the nutrient management plan submitted? Date: PRESENTLY				
	If no, when will the nutrient management plan be developed? Date: N/A				
Is a	nutrient management plan already being implemented for the facility?				
The	date of the last revision of the nutrient management plan. Date: N/A				
Wha	at is the estimated amount of litter generated per year? 1,570 tons/year				
Tota	al acreage needed for land application: 151 Acres				
Tota	al acreage available for land application: 39 Acres				
Will	a third party remove litter off site?				
	If yes, how much litter will be transferred to other persons per year? tons/year				
Ifno	t land applying, describe alternative use(s) of the litter:				

ATTACHMENTS

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

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 INFORM	ATION T	YPE OF INCINERATOR
Manufacturer Name:	Name: Single chamber	
Model Number:		Multiple chamber
Capacity (tons/hour):	city (tons/hour): Other, describe	
Total number of incinerators on site	2:	
Please provide the manufacture date where installed on site in degrees, n	e for each incinerator and inninutes, and seconds.  Latitude:  Latitude:  Latitude:	Longitude: Longitude: Longitude: Longitude: Longitude: Longitude: Longitude:
Please provide the manufacture date where installed on site in degrees, in Date(s):	e for each incinerator and inniutes, and seconds.  Latitude: Latitude: Latitude: Latitude: Latitude:	Longitude: Longitude: Longitude: Longitude: Longitude:
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# IV. CONSTRUCTION ACTIVITIES DISTURBING ONE ACRE OR MORE 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.

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.

PROJECT INFORMATION		
Total acreages that will be disturbed: 10.	6 Acres	
Description of the construction activity: size and needed egress and ingress road.	Excavation and fill needed to construct 6 chicken house pads 44' x 500' in	
Nearest named receiving stream: King Br Are there recreational streams, private/pu that may be impacted by the construction	ablic ponds or lakes within ½ mile downstream of project boundary	
Soil Characteristics: The soils are classified as RsB2. Ruston soils are fine sandy loam with 2 to 5 % slopes.		
found under "SWPPP Details" on pa Permit to Construct/Operate Air Em	vention Plan (SWPPP) that includes the minimum components ages 38 through 43 of the Multimedia General Pollution Control aission Equipment and/or Manage Manure and Discharge Storm and Pollution Discharge Elimination System.	

### V. 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.

Signature of Responsible Official

OWNER

Title