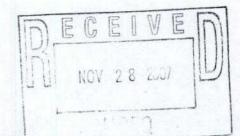
AT#36327 Conpa0070001





# MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY (MDEQ) LARGE CONSTRUCTION NOTICE OF INTENT (LCNOI)

FOR COVERAGE UNDER THE LARGE CONSTRUCTION STORM WATER GENERAL NPDES PERMIT MSR10 49 1 6

(NUMBER TO BE ASSIGNED BY STATE)

#### INSTRUCTIONS

The Large Construction Notice of Intent (LCNOI) is for coverage under the Large Construction Storm Water General Permit for land disturbing activities of five (5) acres or greater; or for land disturbing activities that are part of a larger common plan of development or sale that will disturb five (5) or more acres. Applicant must be owner or operator. For construction activities; the operator is typically the prime contractor. The owner(s) of the property and the prime contractor associated with regulated construction activity on the property have joint and several responsibility for compliance with the Large Construction Storm Water General Permit MSR10.

File at least thirty (30) days prior to the commencement of construction, fifteen (15) days if a Storm Water Pollution Prevention Plan (SWPPP) is already on file. Discharge of storm water from a "large" construction site without written notification of coverage is a violation of state law.

Submittals with this LCNOI must include:

- A Storm Water Pollution Prevention Plan as described in the Large Construction Storm Water General Permit
- A USGS quad map or a copy showing site location.

Additional submittals may include the following if applicable:

- Appropriate Section 404 documentation
  - Appropriate sanitary sewage collection and disposal documentation.
- Appropriate dam construction and low flow requirement documentation

ALL INFOMATION MUST BE COMPLETED ut "NA" if the not applicable)

#### IS APPLICANT THE OWNER OR PRIME CONTRACTOR? (CIRCLE ONE OR BOTH)

# OWNER INFORMATION OWNER CONTACT PERSON: Michael Long OWNER COMPANY NAME: Home Construction Plus, LLC OWNER STREET OR P.O. BOX: 26 Bent Brook Drive OWNER CITY: Purvis STATE: MS ZIP: 39402 OWNER PHONE # (INCLUDE AREA CODE): (601) 794-5858

#### PRIME CONTRACTOR INFORMATION

THE CONTINUE ON CONTACT	PERSON: (Same as above)
PRIME CONTRACTOR COMPANY	/:
	R P.O. BOX:
PRIME CONTRACTOR CITY:	STATE: ZIP:
PRIME CONTRACTOR PHONE # (	INCLUDE AREA CODE):
	PROJECT INFORMATION
PROJECT NAME: Heatherwood Sul	bdivision
TOTAL ACREAGE THAT WILL BE disturbed area must be five (5) acres o development or sale that will disturb fi	DISTURBED <sup>1</sup> (To be covered by the Large Construction General Permit the or greater; or land disturbing activities that are part of a larger common plan of live (5) acres or greater.)  21.7
IS THIS PART OF A LARGER COM	MON PLAN OF DEVELOPMENT (Yes or No)? Yes
	ION PLAN OF DEVELOPMENT: Heatherwood Subdivision
	AND PERMIT COVERAGE NUMBER:
DESCRIPTION OF CONSTRUCTION	N ACTIVITY: Road construction and grading for a proposed subdivision.
PROPOSED DESCRIPTION OF PRO standard industrial classification code	PERTY USE AFTER CONSTRUCTION HAS BEEN COMPLETED (include (SIC) if known): Single-family residential subdivision
standard industrial classification code	(SIC) if known): Single-family residential subdivision
standard industrial classification code  PHYSICAL SITE ADDRESS (If the phindicate the beginning of the project an	(SIC) if known): Single-family residential subdivision SIC Code
standard industrial classification code  PHYSICAL SITE ADDRESS (If the phindicate the beginning of the project an STREET: US Highway 589	(SIC) if known):  Single-family residential subdivision  SIC Code  sysical address is not available indicate the nearest named road. For linear projects,
PHYSICAL SITE ADDRESS (If the phindicate the beginning of the project an STREET: US Highway 589  CITY: Sumrall	(SIC) if known):  Single-family residential subdivision  SIC Code  nysical address is not available indicate the nearest named road. For linear projects, didentify all counties the project traverses.)
PHYSICAL SITE ADDRESS (If the phindicate the beginning of the project an STREET: US Highway 589  CITY: Sumrall  ZIP: 39482	(SIC) if known):  Single-family residential subdivision  SIC Code  SIC Code  Dysical address is not available indicate the nearest named road. For linear projects, id identify all counties the project traverses.)  COUNTY: Lamar
PHYSICAL SITE ADDRESS (If the phindicate the beginning of the project an STREET: US Highway 589  CITY: Sumrall  ZIP: 39482  LATITUDE (Optional): N 31 d 23.064	(SIC) if known):  Single-family residential subdivision  SIC Code  sysical address is not available indicate the nearest named road. For linear projects, didentify all counties the project traverses.)  COUNTY: Lamar  4 min LONGITUDE (Optional): W 89 d 31.766 min
PHYSICAL SITE ADDRESS (If the phindicate the beginning of the project an STREET: US Highway 589  CITY: Sumrall  ZIP: 39482  LATITUDE (Optional): N 31 d 23.064	(SIC) if known):  Single-family residential subdivision  SIC Code  nysical address is not available indicate the nearest named road. For linear projects, id identify all counties the project traverses.)  COUNTY: Lamar  A min LONGITUDE (Optional): W 89 d 31.766 min
PHYSICAL SITE ADDRESS (If the phindicate the beginning of the project an STREET: US Highway 589  CITY: Sumrall  ZIP: 39482  LATITUDE (Optional): N 31 d 23.064  METHOD USED TO DETERMINE LAT & NEAREST NAMED RECEIVING STRARE THERE RECREATIONAL STRADOWNSTREAM OF PROJECT BOUN	Single-family residential subdivision  SIC Code  nysical address is not available indicate the nearest named road. For linear projects, id identify all counties the project traverses.)  COUNTY: Lamar  A minLONGITUDE (Optional): W 89 d 31.766 min
PHYSICAL SITE ADDRESS (If the phindicate the beginning of the project an STREET: US Highway 589  CITY: Sumrall  ZIP: 39482  LATITUDE (Optional): N 31 d 23.064  METHOD USED TO DETERMINE LAT & NEAREST NAMED RECEIVING STRARE THERE RECREATIONAL STRADOWNSTREAM OF PROJECT BOUNACTIVITY?  No.	SIC Code  sysical address is not available indicate the nearest named road. For linear projects, didentify all counties the project traverses.)  COUNTY: Lamar  LONGITUDE (Optional): W 89 d 31.766 min  LONG (GPS (Please GPS Construction Entrance) or Map Interpolation):  REAM: Monroe Creek  EAMS, PRIVATE/PUBLIC PONDS OR LAKES WITHIN ½ MILE

<sup>&</sup>lt;sup>1</sup>Acreage for subdivision development includes areas disturbed by construction of roads, utilities and drainage. Additionally, a housesite of at least 10,000 ft<sup>2</sup> per lot (entire lot, if smaller) shall be included in calculating acreage disturbed.

#### DOCUMENTATION OF COMPLIANCE WITH OTHER REGULATIONS/REQUIREMENTS

### COVERAGE UNDER THIS PERMIT WILL NOT BE GRANTED UNTIL ALL OTHER REQUIRED MDEQ PERMITS AND APPROVALS ARE SATISFACTORILY ADDRESSED

IS THIS LCNOI FOR A FACILITY THAT WILL REQUIRE OTHER PE	RMITS (Yes or No)? Yes
IF YES, CIRCLE WHICH ONE(S): AIR, HAZARDOUS WASTE, PRETINDIVIDUAL NPDES, OTHER: Individual NDPES	TREATMENT, WATER STATE OPERATING,
IS THE PROJECT REROUTING, FILLING OR CROSSING A WATER (Yes or No)? No	CONVEYANCE OF ANY KIND Regulatory Branch for permitting requirements).
IF THE PROJECT REQUIRES A CORPS OF ENGINEER SECTION 404 DOCUMENTATION WITH THIS LCNOI THAT:	PERMIT, PROVIDE APPROPRIATE
The project has been approved by individual permit, or	
The work will be covered by a nationwide permit and <u>NO</u> NOTIFICA	ATION to the Corps is required, or
The work will be covered by a nationwide or general permit and NO?	TIFICATION to the Corps is required
IS A LAKE REQUIRING THE CONSTRUCTION OF A DAM BEING PR IF YES, PROVIDE APPROPRIATE APPROVAL DOCUMENTATION FI WATER, DAM SAFETY.	OPOSED (Yes or No)? No ROM MDEQ OFFICE OF LAND AND
IF THE PROJECT IS A SUBDIVISION, INDUSTRIAL PARK, OR LARG SANITARY SEWAGE BE DISPOSED? Circle one of the following and atta	E APARTMENT COMPLEX, HOW WILL ach the pertinent documents.
<ol> <li>Existing Municipal or Commercial System. Please attach plans and s associated "Information Regarding Proposed Wastewater Projects" f provided at the time of LCNOI submittal, the MDEQ will accept writ responsible for wastewater collection and treatment that the flows ger be transported and treated properly. The letter must include the estir</li> </ol>	orm. If the plans and specifications can not be ten acknowledgement from official(s) perated from the proposed project can and will
2. Collection and Treatment System will be Constructed. Please attach a permit from the MDEQ or indicate the date the application was subm	copy of the cover of the NPDES discharge itted to the MDEQ. Date: 3/07
3. Individual Onsite Wastewater Disposal Systems for Subdivisions Less of General Acceptance from the Mississippi State Department of Heal engineer that the platted lots should support individual onsite wastew	th or certification from a registered professional
4. Individual Onsite Wastewater Disposal Systems for Subdivisions Gree feasibility of installing a central sewage collection and treatment system response from the MDEQ concerning the feasibility study must be attacystem is not feasible, then please attach a copy of the Letter of Gener Health or certification from a registered professional engineer that the wastewater disposal systems.	m must be made by the MDEQ. A copy of the ached. If a central collection and wastewater al Acceptance from the State Department of
INDICATE ANY LOCAL STORM WATER ORDINANCE WITH WHICH	THE PROJECT MUST COMPLY:

## STORM WATER POLLUTION PREVENTION PLAN (SWPPP) AND USGS QUAD MAP REQUIREMENT

ATTACH A CONSTRUCTION SWPPP THAT INCLUDES THE MINIMUM COMPONENTS FOUND IN THE LARGE

CONSTRUCTION STORM WATER GENERAL PERMIT.			
INDICATE ANY ASSOCIATION OR GENERIC SWPPP (In addition, attach a site map with the appropriate erosion an sediment controls identified. For linear projects such as roads and pipelines provide drawings of typical controls:			
SWPPP attached.			
THE SITE'S PROPERTY BOUND	R COPY OF QUAD MAP EXTENDING AT LEAST 1/2 MILE BEYOND ORY OUTLINING THE SITE LOCATION (Quad maps can be obtained from MDEQ OFF A COPY IS SUBMITTED PROVIDE THE NAME OF THE QUAD MAP (found in		
USGS quadrangle map attached.			
cordance with a system designed to abmitted. Based on my inquiry of the athering the information, the inform	s document and all attachments were prepared under my direction or supervision in assure that qualified personnel properly gathered and evaluated the information be person or persons who manage the system, or those persons directly responsible for ation submitted is, to the best of my knowledge and belief, true, accurate and complete, penalties for submitting false information, including the possibility of fine and		
Miled Lory gnature (Must be signed by operato	3-13-07		
gnature (Must be signed by operato	or when different than owner) Date		
Michael Long	Title		
inted Name	Title		
his application shall be signed as fol For a corporation, by a responsib For a partnership, by a general p For a sole proprietorship, by the For a municipal, state or other pu Duly Authorized Representative.	ole corporate officer; partner; proprietor; ublic facility, by principal executive officer, mayor, or ranking elected official;		
ase submit this LCNOI form to:	Chief, Environmental Permits Division MS Department of Environmental Quality, Office of Pollution Control P.O. Box 10385 Jackson, Mississippi 39289-0385		

By completing and submitting this form to the MDFQ, the prime contractor is certifying that (1) they have operational control over the erosion and sediment control specifications (including the ability to make modifications to such specifications) and (2) has day-to-day operational control of those activities at the site necessary to ensure compliance with the SWPPP and applicable permit conditions. The owner(s) of the property and the prime contractor associated with regulated construction activity on the property have joint and several responsibility for compliance with the permit. Notwithstanding any permit condition to the contrary, the coverage recipient and any person who causes pollution of waters of the state or places waste in a location where they are likely to cause pollution of any waters of the state shall remain responsible under applicable federal and state laws and regulations and applicable permits.

PRIME CONTRACT	OR INFORMATION
PRIME CONTRACTOR CONTACT PERSON: Michael Long	PHONE NUMBER: 601) 794-5858
PRIME CONTRACTOR COMPANY: Home Construction Plu	is, LLC
PRIME CONTRACTOR STREET OR P.O. BOX: 26 Bent Bro	ok Drive
PRIME CONTRACTOR CITY: Purvis	STATE: MS ZIP: 39475
OWNER INFO	ORMATION
OWNER CONTACT PERSON: (Same as above)	PHONE NUMBER: ( )
OWNER COMPANY NAME:	
PROJECT INF	ORMATION
CONSTRUCTION STORM WATER GENERAL PERMIT COV	VERAGE NUMBER (Found on Certificate of Coverage):
PROJECT NAME: Heatherwood Subdivision	
DESCRIPTION OF CONSTRUCTION ACTIVITY: Road cons	struction and grading for a proposed subdivision.
PHYSICAL SITE ADDRESS (If the physical address is not available indicate the beginning of the project and identify all counties the STREET: Highway 589	able indicate the nearest named road. For linear projects, project traverses.)

I certify that I am the prime contractor for this project and will comply with all the applicable requirements in the above referenced general NPDES permit. I further 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 false information, including the possibility of fine and imprisonment for knowing violations.

COUNTY: Lamar

Prime Contractor Signature Date Printed Name Title

'This application shall be signed as follows:

CITY: Sumrall

- 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, mayor, or ranking elected official; Duly Authorized Representative.

This Prime Contractor Certification form shall be submitted to:

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