

FOR OPC USE ONLY AI NO. _____ PLA NO. _____
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**INFORMATION REGARDING PROPOSED WASTEWATER PROJECTS
TO: THE MISSISSIPPI OFFICE OF POLLUTION CONTROL**

The _____,
(Name of Body Making Application, i.e. Individual, Corporation, Municipality, Developer, etc.)

whose mailing address is _____, _____, _____, _____,
(Street and Number) (City) (State) (Zip)

whose responsible official is _____, _____,
(Name) (Title)

and whose phone number is (_____) _____ - _____,

Herewith submits for consideration of the OPC plans, specifications, and other necessary data prepared by

(Engineer or Firm)

(Firm's Project Contact Person, if applicable)

(Mailing Address)

(City, State, Zip)

(_____) _____ - _____
(Phone Number)

who is hereby authorized to represent the applicant in the engineering features of this project for the construction of _____

(Clearly Describe Project: New System, Modification, Extension, Rehabilitation, Treatment, etc.)

to serve _____
(Subdivision, Plant, School, Other)

located at _____
(Approximate Location, Including Section, Township, and Range)

in or near the City of _____ in the County of _____, State of Mississippi, as required by the regulations of the OPC and herewith make application to the OPC for the approval of this project. We understand through the regulations of the OPC that this approval is required prior to the initiation of construction activities.

Upon construction, these facilities will be owned and maintained by _____

(Name of Utility Company, Municipality, Owner, Developer, etc.)

whose mailing address is _____, _____, _____, _____.
(Street and Number) (City) (State) (Zip)

NOTE: IF THIS PROJECT DOES NOT ADD ANY NEW CONNECTIONS OR ADDITIONAL FLOWS TO THE COLLECTION SYSTEM, YOU MAY OMIT SECTIONS A. THROUGH E. BELOW.

A. EXISTING SEWAGE COLLECTION SYSTEM

1. The facilities collecting the sewage from this proposed project are owned by _____

(Utility Company, Municipality, etc.)
2. The number of connections existing are _____.
3. The length of sanitary sewers existing are _____.
4. The number of existing lift stations are _____.
5. Additional facilities that collect sewage from this proposed project, i.e. a regional wastewater authority, are owned by _____.

B. CERTIFICATION(S) FROM COLLECTION ENTITIES

The official(s) responsible for the wastewater collection facilities denoted in Section A. above, that will serve the proposed project, do hereby certify that we agree to transport the wastewater flows generated from the proposed project. We also hereby certify that we have determined that our collection system(s) have the capacity available to transport properly the wastewater flows generated from the proposed project.

Signature

Signature

Title

Title

Entity

Entity

C. EXISTING SEWAGE TREATMENT WORKS

1. The facilities responsible for treatment of the sewage from this proposed project are owned by _____.
(Utility Company, Municipality, etc.)
2. The OPC Permit Number for this wastewater facility is _____.
3. The capacity for this wastewater treatment facility is _____.
4. The treatment type of this wastewater treatment facility is _____.
(Activated Sludge, Aerated Lagoon, etc.)
5. The present population served by the treatment facility is _____.
6. The operator in charge will be _____, who is a Class _____ wastewater operator, holding certificate number _____.

D. CERTIFICATION FROM WASTEWATER TREATMENT ENTITY

The official responsible for the wastewater treatment facility denoted in Section C. above, that will serve the proposed project, does hereby certify that we agree to treat the wastewater flows generated from the proposed project. We also hereby certify that we have determined that our treatment facility has the capacity available to treat properly the wastewater flows generated from the proposed project.

Signature

Title

Entity

E. PROPOSED PROJECT DETAILS

1. The ultimate population to be served by this proposed project is _____.
2. The number of connections to be added are _____.
3. Per capita discharge _____ gpcd: Infiltration _____ gpcd. (Estimate, if unknown)
4. Area Served in Acres _____ Design Population Per Acre _____
5. The area water is supplied by _____

(Name and Address of Water Utility)

6. Proposed Sewage Pumping Stations

Location or Number	Units Served	Pump Capacity (gpm)	Influent Flow (gpm)	
			Avg.	Peak

F. ADDITIONAL CLEARANCES

NOTE: APPROVAL OF THIS PROJECT SHALL NOT BE GRANTED UNTIL ALL THE MDEQ PERMITS, COVERAGES, AND APPROVALS DENOTED BELOW ARE SATISFACTORILY ADDRESSED.

1. The total area of ground disturbance by clearing, grading, and excavating for utilities, roadways, lots, etc. is _____ acres.
2. For construction projects disturbing five or more acres, have you applied to MDEQ or an MDEQ approved local authority for construction stormwater permit coverage?
 Yes Not applicable

If not applicable, why? _____

NOTE: IF YOU ARE DISTURBING MORE THAN ONE ACRE BUT LESS THAN FIVE ACRES AFTER MARCH 10, 2003, YOU MUST FOLLOW THE REQUIREMENTS OF MDEQ'S SMALL CONSTRUCTION STORM WATER GENERAL PERMIT. ALSO, AFTER MARCH 10, 2003, IF YOU ARE IN AN AREA THAT HAS AN MDEQ APPROVED LOCAL AUTHORITY YOU MUST APPLY FOR APPROVAL FOR 1-5 ACRE CONSTRUCTION PROJECTS. SOME LOCAL AUTHORITIES MAY REQUIRE APPROVAL FOR DISTURBANCE LESS THAN ONE ACRE.

3. Have determinations/authorizations been received from the Corps of Engineers regarding the need for a Section 404 Permit, General Permit or Nationwide Permit for stream or intermittent drain crossings, stream re-routing, or for placing fill material into wetlands?
 Yes Pending Not applicable

If not applicable, why? _____

G. ADDITIONAL CERTIFICATIONS

We hereby certify that we are the applicants for this project, that we are familiar with the information contained in this form, and that, to the best of our knowledge and belief, such information is true, complete, and accurate.

Signature of Responsible Official for Body Making Application

Printed Name and Title of Above

I hereby certify that the engineering documents for this project were prepared by myself or under my direct supervision, that I am familiar with the information contained in this form, and that, to the best of my knowledge and belief, such information is true, complete, and accurate.

Signature of Engineer Registered Under Mississippi Laws

(Seal)

Typed Name and Registration Number

THE APPLICANTS AGREE THAT NO CHANGES IN OR DEVIATION FROM THE PLANS AND SPECIFICATIONS APPROVED BY THE OPC WILL BE MADE EXCEPT WITH THE PRIOR CONSENT AND APPROVAL OF THE OPC.

COMMENTS: _____

FOR OPC USE ONLY AGENCY INTEREST NO. _____ PLANS NO. _____ COVERAGE NO. _____

**COASTAL COUNTY UTILITY AUTHORITY ENVIRONMENTAL CLEARANCE
FORM TO THE MISSISSIPPI OFFICE OF POLLUTION CONTROL**

This form is required to be completed and submitted to the Mississippi Office of Pollution Control for all proposed projects applying for wastewater approval or construction stormwater coverage in the following counties: Hancock, Harrison, Jackson, Pearl River, and Stone.

PROJECT NAME: _____

ENTITY MAKING APPLICATION: _____

RESPONSIBLE OFFICIAL: _____

COUNTY WHERE PROJECT IS LOCATED: _____

The portions below are to be completed by the appropriate County Utility Authority(CUA)

1. Is this project consistent with the requirements of the CUA?
 Yes No

2. Is this project connecting to a facility funded by Community Development Block Grant (CDBG) funds under the Mississippi Gulf Region Water and Wastewater Plan?
 Yes No
 If yes, complete Item 3.; if no, skip Item 3.

3. Has this project been coordinated with the U.S. Fish and Wildlife Service to identify the need for a Section 7 consultation for impacts to threatened and/or endangered species?
 Yes No
 If yes, a copy of the consultation clearance letter from the U.S. Fish and Wildlife Service must be attached to this form. If no, this project can not be considered by the Office of Pollution Control.

I hereby certify that I am the official responsible with the _____ County Utility Authority in these matters, that I am familiar with the information contained in this form, and that, to the best of my knowledge and belief, such information is true, complete, and accurate.

Signature

Title

Date

Entity