CHANGE REQUEST FORM

HOT MIX ASPHALT GENERAL PERMIT (HMAGP)

MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY

COVERAGE NUMBER MSR70__ __ __ __

Instructions: For the following changes, notification must be provided to the DEQ at least 30 days prior to the change:

- **Part A – Any planned changes in facility operations, including removal of the hot mix plant or rock/RAP crusher, that may affect air emissions and/or water discharges.**
- **Part B – Any planned changes of ownership.**
- **Part C – Any changes in information previously submitted in the NOI or Recoverage Form.**

Complete each Part of the Form, marking "N/A" if the section does not apply to the change requested.

Company Name: _____ Facility Name: _____

Facility Street Address: _____ City: _____ County: _____

Contact Person: _____ Phone No.: _____ Email: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

PART A – CHANGE TO FACILITY OPERATIONS ☐ YES ☐ N/A

1. Is the change a Major Modification (defined in ACT 6, Condition T-15)? ☐ YES ☐ NO
   a. If yes to 1, have you completed the public notice requirements in ACT 2, Condition S-3? (See Public Notice Instructions for more information.) ☐ YES ☐ NO
   b. If yes to 1, have you notified the contiguous landowners per ACT 2, Condition S-2? ☐ YES ☐ NO
2. Will the change result in additional outfalls? ☐ YES ☐ NO
   a. If yes to 2, is a revised SWPPP attached? ☐ YES ☐ NO
3. Does the change result in removal of the hot mix asphalt plant or rock/RAP crusher? ☐ YES ☐ NO
   a. If yes to 3, indicate equipment being removed: _____

For all changes to facility operations, update the most recent version of the NOI or Recoverage Form, as needed, and attach it to this Form. Changes should also be outlined in a cover letter accompanying this form.

PART B – CHANGE OF OWNERSHIP ☐ YES ☐ N/A

Is the Request for Transfer Form complete and attached? ☐ YES ☐ NO

PART C – CHANGE OF INFORMATION PREVIOUSLY SUBMITTED ☐ YES ☐ N/A

Is the revised NOI or Recoverage Form attached reflecting any changes? ☐ YES ☐ NO

The most recent NOI or Recoverage Form should be revised and completed in its entirety, with any updates made as needed to reflect changes to the facility. Changes should also be outlined in a cover letter accompanying this form.

"I certify under penalty of law that this report is true, accurate, and complete, to the best of my knowledge and belief."

_____ _____

Authorized Signature of Responsible Official* Date

_____ _____

Printed Name Title

** A responsible official must meet the requirements of 2022 HMAGP, ACT 5, Condition T-5.*

Submit signed form online at www.mdeq.ms.gov/hmagp or via hard copy to Air II Branch Manager, Environmental Permits Division, MDEQ, PO Box 2261, Jackson, MS 39225

Last Revised: 9/12/2022