



MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY

**MINING NOTICE OF INTENT (MNOI)
FOR COVERAGE UNDER
MINING STORM WATER, DEWATERING AND NO DISCHARGE GENERAL PERMIT (MGP)**

The MGP authorizes mining storm water and dewatering discharges and operation of wastewater recirculation systems with no discharge. Mining storm water is a discharge associated with mining activities that discharge storm water contaminated by contact or that has come into contact with, any overburden, raw materials, intermediate products, finished products, byproducts or waste products located on the site.

Dewatering discharges include the pumping, draining or removing of water that is impounded or that collects in the mine. If such impounded water is commingled with process generated wastewater, the mixture shall be managed and permitted as process generated wastewater. Wastewater recirculation systems with no discharge include wash operations with closed loop recirculation systems with no discharge of wastewater and hydraulic dredge operations with closed loop recirculation systems with no discharge of dredge wastewater.

Discharge of storm water or impounded water associated with mining or the operation of a wastewater recirculation system with no discharge without written notification of coverage from MDEQ is a violation of State Law.

To be completed by MDEQ Staff:

MSR32 _____

Date Received: _____

Agency Interest Number: _____

APPLICANT IS THE: OWNER OPERATOR

OWNER CONTACT INFORMATION

OWNER CONTACT PERSON: _____

OWNER COMPANY LEGAL NAME: _____

OWNER STREET OR P. O. BOX: _____

OWNER CITY: _____ STATE: _____ ZIP: _____

OWNER PHONE #: (_____) _____ OWNER EMAIL: _____

OPERATOR CONTACT INFORMATION

OPERATOR CONTACT PERSON: _____
OPERATOR COMPANY LEGAL NAME: _____
OPERATOR STREET OR P. O. BOX: _____
OPERATOR CITY: _____ STATE: _____ ZIP: _____
OPERATOR PHONE #: (____) _____ OPERATOR EMAIL: _____

PREPARER CONTACT INFORMATION

IF NOI WAS PREPARED BY SOMEONE OTHER THAN THE APPLICANT

CONTACT PERSON: _____
COMPANY LEGAL NAME: _____
STREET OR P.O. BOX: _____
CITY: _____ STATE: _____ ZIP: _____
PHONE # (____) _____ EMAIL: _____

Required items (check all that are included):

- A site-specific Stormwater Pollution Prevention Plan
- A United States Geological Survey (USGS) quadrangle map indicating site location
- Outfall location on required site location map
- Natural buffer zone around streams on the site (See ACT3 L-1, page 5 of the MGP)
- Proof of good standing or registration with the Mississippi Secretary of State for a corporation, limited liability company, a partnership, or a business trust.

Check activities requesting to be covered (check all that apply):

- Stormwater Discharges Associated with Borrow Material
- Stormwater Discharges Associated with a Mining Activity
- Mine Dewatering
- Wastewater Recirculation Systems under a State Operating General Permit

SIC/NAICS Code for type of material being mined (check all that apply):

- SIC 1422 / NAICS 212312 – Crushed and Broken Limestone Mining and Quarrying
- SIC 1442 / NAICS 212321 – Construction Sand and Gravel Mining
- SIC 1455 / NAICS 212323 – (Kaolin and Ball Clay) Kaolin, Clay, and Ceramic, and Refractory Minerals Mining
- SIC 1459 / NAICS 212323 – (Bentonite and Fire Clay) Kaolin, Clay, and Ceramic and Refractory Minerals Mining
- Other: SIC _____ / NAICS _____

MINE INFORMATION

MINE NAME: _____

MINE SITE ADDRESS (If the physical address is not available, please indicate nearest named road.)

Street: _____

City: _____ State: _____ County: _____ Zip: _____

LATITUDE: ___ degrees ___ minutes ___ seconds LONGITUDE: ___ degrees ___ minutes ___ seconds

LAT & LONG DATA SOURCE (GPS (Please GPS Entrance Gate) or Map Interpolation): _____

TOTAL ACREAGE: _____ MATERIAL TO BE MINED: _____

ESTIMATED START DATE: _____ ESTIMATED END DATE: _____

YYYY-MM-DD

YYYY-MM-DD

RECEIVING STREAM INFORMATION

NEAREST NAMED RECEIVING STREAM: _____

Water Body Impact Information	Yes	No
Receiving Stream on 303 (D) List of Impaired Water Bodies?	<input type="checkbox"/>	<input type="checkbox"/>
TMDL for Sediment for receiving stream segment?	<input type="checkbox"/>	<input type="checkbox"/>
TMDL for pH for receiving stream segment?	<input type="checkbox"/>	<input type="checkbox"/>
Does SWPPP include controls addressing impairments?	<input type="checkbox"/>	<input type="checkbox"/>

COMPLETE IF WASTEWATER RECIRCULATION SYSTEM UNDER STATE OPERATING GENERAL PERMIT IS PROPOSED

DISTANCE BETWEEN RECIRCULATION POND(S) AND PROPERTY LINE: _____ (FT)
(MUST BE AT LEAST 150 FEET)

NUMBER OF RECIRCULATION POND(S): _____

STORAGE CAPACITY OF EACH RECIRCULATION POND(S): _____ (FT³)

Wastewater Recirculation Required Components	Yes	No
Will hydraulic dredge be used?	<input type="checkbox"/>	<input type="checkbox"/>
Will there be washing of sand and gravel?	<input type="checkbox"/>	<input type="checkbox"/>
Is emergency discharge structure at least 24 inches above the normal operating fluid level, with said discharge structure being at least 24 inches below the lowest point on the top of the containment dike?	<input type="checkbox"/>	<input type="checkbox"/>
Has all dams and levees met guidelines of Dam Safety Regulations?	<input type="checkbox"/>	<input type="checkbox"/>
Does the SWPPP contain a daily inspection log as outlined in ACT ??? of the General Permit?	<input type="checkbox"/>	<input type="checkbox"/>

COMPLETE IF MINE DEWATERING IS PROPOSED

ESTIMATED DEWATERING VOLUME: _____ (GAL/DAY)

NAME AND ADDRESS OF THE RECIPIENT OF THE DISCHARGE MONITORING REPORTS (DMRs), IF DIFFERENT FROM SIGNATORY: _____

Number of Outfalls: _____

Location (s) of each Outfall (provide additional sheet if necessary):

OUTFALL #1

LATITUDE: ___ degrees ___ minutes ___ seconds

LONGITUDE: ___ degrees ___ minutes ___ seconds

OUTFALL #2

LATITUDE: ___ degrees ___ minutes ___ seconds

LONGITUDE: ___ degrees ___ minutes ___ seconds

Documentation of Compliance with other Regulatory Requirements Coverage under this general permit will not be granted until all other required MDEQ permits and approvals are addressed.	Yes	No
Will construction or operation of mine involve re-routing, filling, or crossing of a water conveyance of kind? Attach Section 404 documentation.	<input type="checkbox"/>	<input type="checkbox"/>
Is the mine covered by a permit from the Office of Geology? Provide permit number in "Other Documentation Provided with Submittal That May Be Required."	<input type="checkbox"/>	<input type="checkbox"/>
Is this site considered an Exempt Operation by the Office of Geology? Provide approval form.	<input type="checkbox"/>	<input type="checkbox"/>
Are approvals needed from the Office of Land and Water Resources for construction of an impoundment? Provide documentation of authorization.	<input type="checkbox"/>	<input type="checkbox"/>
Any local stormwater ordinances with which operations must comply? Provide any associated documentation.	<input type="checkbox"/>	<input type="checkbox"/>

Other Documentation Provided with Submittal That May Be Required

Section 404 Documentation

If the mine requires a Corps of Engineers Section 404 permit, provide appropriate documentation with this MNOI that:

- The mine has been approved by individual permit; or
- The work will be covered by a nationwide permit and NO NOTIFICATION to the Corps is required; or
- The work will be covered by a nationwide or general permit and NOTIFICATION to the Corps if required.

Office of Geology Permit Number: _____

For more information on Office of Geology requirements, call 601-961-5515

Notice of Exempt Operation

Attach proof of submission

Dam/Reservoir Safety Permit or Written Authorization

If impoundments will be constructed above natural surface elevations, coordination with the Office of Land and Water Resources if any of the following apply:

- The impoundment will be constructed with a peripheral dam or levee 8 feet or greater in height, measured from the lowest elevation of its toe.
- The impoundment will have a maximum storage volume greater than 25 acre-feet.
- The impoundment will impound a watercourse with a continuous flow.
- The impoundment has the potential to threaten downstream lives or man-made structures.

SIGNATURE

I 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.

Authorized Signature¹

Date

Printed Name

Title

¹This application shall be signed according to the General Permit, Act 15, T-4 as follows:

- 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 either a principal executive officer, the mayor, or ranking elected official.
- Duly Authorized Representative

Please submit this form to: Chief, Environmental Permits Division
MDEQ, Office of Pollution Control
P.O. Box 2261
Jackson, Mississippi 39225

https://www.mdeq.ms.gov/noi_esubmittals/