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JUN 25 2024



TENNESSEE DEPARTMENT OF ENVIRONMENT AND CONSERVATION
Division of Water Resources
William R. Snodgrass Tennessee Tower, 312 Rosa L. Parks Avenue, 11th Floor,
Nashville, Tennessee, 37243
1-888-891-8332 (TDEC)

ENVIRONMENT & CONSERVATION
COOKEVILLE FIELD OFFICE

Application for Aquatic Resource Alteration Permit (ARAP) & State §401 Water Quality Certification

OFFICIAL STATE USE ONLY | Site #: | Permit #: NR2407.50

Section 1. Applicant Information (individual responsible for site, signs certification below)
Applicant Name (company or individual): Jones Bros. Contractors, LLC | SOS #: 0000305296 Status: Active
Primary Contact/Signatory: Andrew Wall | Signatory's Title or Position: President
Mailing Address: 1010 Pleasant Grove Place, Suite 300 | City: Mt. Juliet | State: TN | Zip: 37122
Phone: 615-864-7388 | Fax: | E-mail: awall@jonesbroscont.com

Section 2. Alternate Contact/Consultant Information (a consultant is not required)
Alternate Contact Name:
Company: | Title or Position:
Mailing Address: | City: | State: | Zip:
Phone: | Fax: | E-mail:

Section 3. Fee (application will be incomplete until fee is received)
[ ] No Fee [x] Fee Submitted with Application Amount Submitted: \$ 500
Current application fee schedules can be found at the Division of Water Resources webpage at:
https://www.tn.gov/environment/permit-permits/water-permits/1/aquatic-resource-alteration-permit--arap-.html
or by calling (615) 532-0625. Please make checks payable to "Treasurer, State of Tennessee".
Billing Contact (if different from Applicant): Name: Email:
Address: Phone:

Section 4. Project Details (fill in information and check appropriate boxes)
Site or Project Name: CNV009 - Miller Waste Area | Nearest City, Town or Major Landmark: Crossville
Street Address or Location (include zip): 132 Maynard Road
County(ies): Cumberland | MS4 Jurisdiction: N/A | Latitude (dd.dddd): 36.0441
Longitude (dd.dddd): -85.0556
Resources Proposed for Alteration: [ ] Stream / River [x] Wetland [ ] Reservoir
Name of Water Resource (for more information, access http://tdeconline.tn.gov/dwr ): Scott Creek (TN06010208013\_0500)
Brief Project Description (a more detailed description is required under Section 8):
Fill of wetland for TDOT support area and potential future commercial development

Does the proposed activity require approval from the U.S. Army Corps of Engineers, the Tennessee Valley Authority, or any other federal, state, or local government agency? [ ] Yes [x] No
If Yes, provide the permit reference numbers: USACE NWP #18 Non-PCN
Will the activity require a 401 Water Quality Certification: [ ] Yes [x] No
If Yes, attach any 401 WQC pre-filing meeting request documentation
Is the proposed activity associated with a larger common plan of development: [x] Yes [ ] No
If Yes, submit site plans and identify the location and overall scope of the common plan of development.
Plans attached? [x] Yes [ ] No
If applicable, indicate any other federal, state, or local permits that are associated with the overall project site (common plan of development) that have been obtained in the past (e.g., construction general permit and/or other ARAP): TNR172591

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<b>Section 5. Project Schedule</b> (fill in information and check appropriate boxes)	
Proposed start date: <b>July 2024</b>	Estimated end date: <b>September 2027</b>
Is any portion of the activity complete now?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If yes, describe the extent of the completed portion:	

**The required information in Sections 6-11 must be submitted on a separate sheet(s) and submitted in the same numbered format as presented below. If any question is not applicable, state the reason why it is not applicable.**

Section 6. Description	Attached	
	Yes	No
6.1 A narrative description of the scope of the project	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6.2 USGS topographic map indicating the exact location of the project (can be a photographic copy)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6.3 Photographs of the resource(s) proposed for alteration with location description (photo locations should be noted on map)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6.4 A narrative description of the <b>existing</b> stream and/or wetland characteristics including, but not limited to, dimensions (e.g., depth, length, average width), substrate and riparian vegetation	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6.5 A narrative description of the <b>proposed</b> stream and/or wetland characteristics including, but not limited to, dimensions (e.g., depth, length, average width), substrate and riparian vegetation	<input type="checkbox"/>	<input type="checkbox"/>
6.6 In the case of wetlands, include a wetland delineation with delineation forms and site map denoting location of data points	<input type="checkbox"/>	<input type="checkbox"/>
6.7 A copy of all hydrologic or jurisdictional determination documents issued for water resources on the project site	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Section 7. Project Rationale	Attached	
	Yes	No
Describe the need for the proposed activity, including, but not limited to the purpose, alternatives considered and rationale for selection of least impactful alternative, and what will be done to avoid or minimize impacts to water resources	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Section 8. Technical Information	Attached	
	Yes	No
8.1 Detailed plans, specifications, blueprints, or legible sketches of present site conditions and the proposed activity. Plans must be 8.5 x 11 inches. Additional larger plans may also be submitted to aid in application review. The detailed plans should be superimposed on existing and new conditions (e.g., stream cross sections where road crossings are proposed)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8.2 For the proposed activity and compensatory mitigation, provide a discussion regarding the sequencing of events and construction methods and any proposed monitoring	<input type="checkbox"/>	<input type="checkbox"/>
8.3 Depiction and narrative on the location and type of erosion prevention and sediment control (EPSC) measures for the proposed alterations and any other measures to treat, control, or manage impacts to waters	<input checked="" type="checkbox"/>	<input type="checkbox"/>

<p><b>Section 9. Water Resources Degradation</b> (degree of proposed impact)</p> <p>Note that in most cases, activities that exceed the scope of the General Permit limitations are considered greater than <i>de minimis</i> degradation to water quality. Please provide your basis for concluding the proposed activity will cause one of the following levels of water quality degradation:</p> <p><input checked="" type="checkbox"/> a. <i>De minimis</i> degradation, no appreciable permanent loss of resource values</p> <p><input type="checkbox"/> b. Greater than <i>de minimis</i> degradation (if greater than <i>de minimis</i> complete Sections 10-11)</p> <p><i>For information and guidance on the definition of de minimis and degradation, refer to the Antidegradation Statement in Chapter 0400-40-03-.06 of the Tennessee Water Quality Criteria Rule:</i>  <a href="https://publications.tnsofiles.com/rules/0400/0400-40/0400-40.htm">https://publications.tnsofiles.com/rules/0400/0400-40/0400-40.htm</a></p> <p><i>For more information on specifics on what General Permits can cover, refer to the Natural Resources Unit webpage at:</i>  <a href="https://www.tn.gov/environment/permit-permits/water-permits/1/aquatic-resource-alteration-permit-arap.html">https://www.tn.gov/environment/permit-permits/water-permits/1/aquatic-resource-alteration-permit-arap.html</a></p>
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Section 10. Detailed Alternatives Analysis		Attached Yes No	
10.1	Analyze all reasonable alternatives and describe the level of degradation and permanent loss of resource value caused by each alternative. Assessment must consider options other than the "Preferred" and "No Action" alternatives. Provide associated rationale for selecting or rejecting all alternatives considered and demonstration that the least impactful practicable alternative was selected.	<input type="checkbox"/>	<input type="checkbox"/>
10.2	Discuss the social and economic consequences of each alternative	<input type="checkbox"/>	<input type="checkbox"/>
10.3	Demonstrate that the degradation associated with the preferred alternative will not violate water quality criteria for uses designated in the receiving waters, and is necessary to accommodate important economic and social development in the area	<input type="checkbox"/>	<input type="checkbox"/>

Section 11. Compensatory Mitigation		Attached Yes No	
11.1	A detailed discussion of the proposed compensatory mitigation. Provide evidence of credit reservation if proposing to utilize a third-party provider.	<input type="checkbox"/>	<input type="checkbox"/>
11.2	Analysis of any proposed appreciable loss of resource value using the TN Stream Mitigation Guidelines. Provide Stream Quantification Tool (SQT) results if applicable. Include Existing Condition Score (ECS) and debit/credit calculations.	<input type="checkbox"/>	<input type="checkbox"/>
11.3	Describe how the compensatory mitigation would result in no net loss of resource value	<input type="checkbox"/>	<input type="checkbox"/>
11.4	Provide a detailed monitoring plan for the compensatory mitigation site if permittee-responsible project is proposed	<input type="checkbox"/>	<input type="checkbox"/>
11.5	Describe the long-term protection measures for the compensatory mitigation site if permittee-responsible project is proposed (e.g., deed restrictions, conservation easement)	<input type="checkbox"/>	<input type="checkbox"/>

**Certification and Signature**

An application submitted by a corporation must be signed by a principal executive officer; from a partnership or proprietorship, by the partner or proprietor respectively; from a municipal, state, federal or other public agency or facility, the application must be signed by either a principal executive officer, ranking elected official, or other duly authorized employee.

*I certify under penalty of law that this document and all attachments were prepared by me, or under my direction or supervision. The submitted information 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. As specified in Tennessee Code Annotated Section 39-16-702(a)(4), this declaration is made under penalty of perjury. The project proponent hereby requests that the certifying authority review and take action on this CWA 401 certification request within the applicable reasonable period of time.*

Andrew Wall	President		01/17/24
Printed Name	Official Title	Signature	Date

Note that this form must be signed by the principal executive officer, partner or proprietor, or a ranking elected official in the case of a municipality; for details see **Certification and Signature** statement above. For more information, contact your local EFO at the toll-free number 1-888-891-8332 (TDEC). Submit the completed ARAP Application form (keep a copy for your records) to the appropriate EFO for the county(ies) where the proposed activity is located, addressed to **Attention: ARAP Processing**. You may also electronically submit the complete application and all associated attachments to [water.permits@tn.gov](mailto:water.permits@tn.gov).

EFO	Street Address	Zip Code	EFO	Street Address	Zip Code
Memphis	8383 Wolf Lake Drive, Bartlett	38133-4119	Cookeville	1221 South Willow Ave.	38506
Jackson	1625 Hollywood Drive	38305-4316	Chattanooga	1301 Riverfront Pkwy., Ste. 206	37402
Nashville	711 R S Gass Boulevard	37243	Knoxville	3711 Middlebrook Pike	37921
Columbia	1421 Hampshire Pike	38401	Johnson City	2305 Silverdale Road	37601



Cancel

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Customer Information

Customer ID: 195396

Phone: 9999999999 Extension:

First Name: Andrew Middle Name:

Last Name: Wall

Company / Affiliation: Civil & Environmental Consultants

Address: 117 Seaboard Lane  
Ste E100

Zip: 37067 State: TN City: FRANKLIN

Note: The valid Zip Code is required in order to select the right state and city.

Email:

Receipt Item(s)

TDEC

Division	Description	TDEC Code	Quantity	Price	Line Total
WPC	WPC-ARAP-\$500 Permit Application	43.340.F02	1	\$500.00	\$500.00
					\$500.00
					\$500.00

Receipt Details

Receipt Total: \$500.00

Receipt #: EAC-CK-21237

Receipt Date: 25-JUN-24 10:49:32

County: Cumberland

EFO/Office: Cookeville Field Office

Amount Received: 500.00

Method of Payment: Check

Check Number: 7184 (Required if the Method of Payment is selected as 'CHECK'.)

Comments: ARAP NR2407.50  
CHV009-Miller Waste Area  
132 Maynard Road

Date Voided:

Created By: Marcie Groves (BG56018)

Created Date: 25-JUN-24

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