



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)

Notice of Intent (NOI) for General NPDES Multi-Sector Permit for Stormwater Discharges from Industrial Activities

Type of application: New Reissuance Modification

(If this NOI is submitted for Permit Modification provide the existing permit tracking number: TNR056340)

| | | | |
|--|--|---|----------|
| Facility Name: AAA AUTO SALVAGE INC | | County: HICKMAN | |
| Street Address or Location: 6142 PRIMM SPRINGS RD | | Latitude (DD.DDD): | 35.8921 |
| | | Longitude (-DD.DDD): | -87.3189 |
| Attach a copy of a topo map, a city map, or a county map, identifying the location of this facility and each outfall | | <input checked="" type="checkbox"/> Map Attached | |
| Has a Storm Water Pollution Prevention Plan (SWPPP) been developed? | | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |

Owner or Operator: (the person or legal entity which controls facility's operation; this may or may not be the same as the facility name or the official contact name)
STEVE BOURINI

| | | | | |
|----------|---|--|---------------------|----------------------|
| 1 | Official Contact Person Name: (Individual Responsible for a Facility) STEVE BOURINI | Title or Position: OWNER | | |
| | Mailing Address: 6142 PRIMM SPRINGS RD | City: LYLES | State: TN | Zip: 37098 |
| | Phone: () 615-979-9000 | E-mail: STEVE.AAAAUTOSALVAGE@COMCAST.NET | | |

| | | | | |
|----------|---|---|---------------------|------|
| 2 | Local Contact Person Name: (if appropriate, write "same as #1") NANCY BOURINI | Title or Position: OFFICE MANAGER | | |
| | Facility Address: (this may or may not be the same as street address) SAME | Facility City: | State: TN | Zip: |
| | Phone: () 615-403-3000 | E-mail: AAAUTOSALVAGE@COMCAST.NET | | |

Write in the box (to the right) or circle the number (above) to indicate where to send correspondence and invoices:

| | | | | | |
|--|---|---|--|----|----|
| Stormwater runoff enters following stream(s) and/or lake(s): (for each outfall, give names and latitude/longitude) | | Number of storm water outfalls: | | | |
| Nature of business: AUTO RECYCLING | SIC code(s): (primary code listed as No.1, secondary, if applicable, as No.2, etc.) | | | | |
| | 1. 5.15 | 2. | 3. | 4. | 5. |
| | | | | | 6. |
| Area of property associated with industrial activity: <u>4.1</u> Acres (area of facility property should <u>not</u> include recreation areas, landscaping, lawns, greenfields, forest, office buildings, employee parking lots, etc.) | Permit Sectors (STATE USE ONLY) | | | | |
| Activities at facility: Check all that apply. | | | | | |
| 01. <input type="checkbox"/> Manufacturing | 05. <input checked="" type="checkbox"/> Vehicle Maintenance | 09. <input type="checkbox"/> Wastewater treatment | 13. <input type="checkbox"/> Coal Pile | | |
| 02. <input type="checkbox"/> Storage/Distribution | 06. <input type="checkbox"/> Hazardous waste TSD | 10. <input type="checkbox"/> Land application | 14. <input type="checkbox"/> Borrow Pit or Soil Harvesting | | |
| 03. <input checked="" type="checkbox"/> Vehicle Storage | 07. <input type="checkbox"/> Outside waste disposal | 11. <input type="checkbox"/> Landfill | 99. <input type="checkbox"/> Other: _____ | | |
| 04. <input type="checkbox"/> Trucking Terminal | 08. <input type="checkbox"/> Recycling | 12. <input type="checkbox"/> Mining operation | | | |

CERTIFICATION AND SIGNATURE (Make all entries in ink, not with a pencil. This NOI must be signed by a responsible corporate officer for a corporation, a general partner for a partnership, the proprietor for a sole proprietorship, or a principal executive officer or ranking elected official for a public agency.)

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 gather and evaluate 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. 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.

| | | | |
|----------------------|----------------|----------------------|-------------------|
| STEVE BOURINI | OWNER | <i>Steve Bourini</i> | 02/09/2023 |
| Printed Name | Official Title | Signature | Date |

STATE USE ONLY

| | | | | |
|---------------|---------------------|-----------------------|------------------------|------------------------------|
| Received Date | Fee(s) | Reviewer | EFO | Tracking No. TNR05 |
| | T & E Aquatic Fauna | Exceptional TN Water? | Unavailable Conditions | NOC Date |



Get Latitude Longitude

To make a search, use the name of a place, city, state, or address, or click the location on the map to get lat long coordinates.

Place Name

6142 primm springs rd lyles tn 37098

Find

Add the country code for better results. Ex: London, UK

Latitude

35.873759

Longitude

-87.335872

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Lat Long

(35.873759, -87.335872)

GPS Coordinates

35° 52' 25.5324" N

87° 20' 9.1392" W

Map Mouse Over Location

(35.874664, -87.337309)

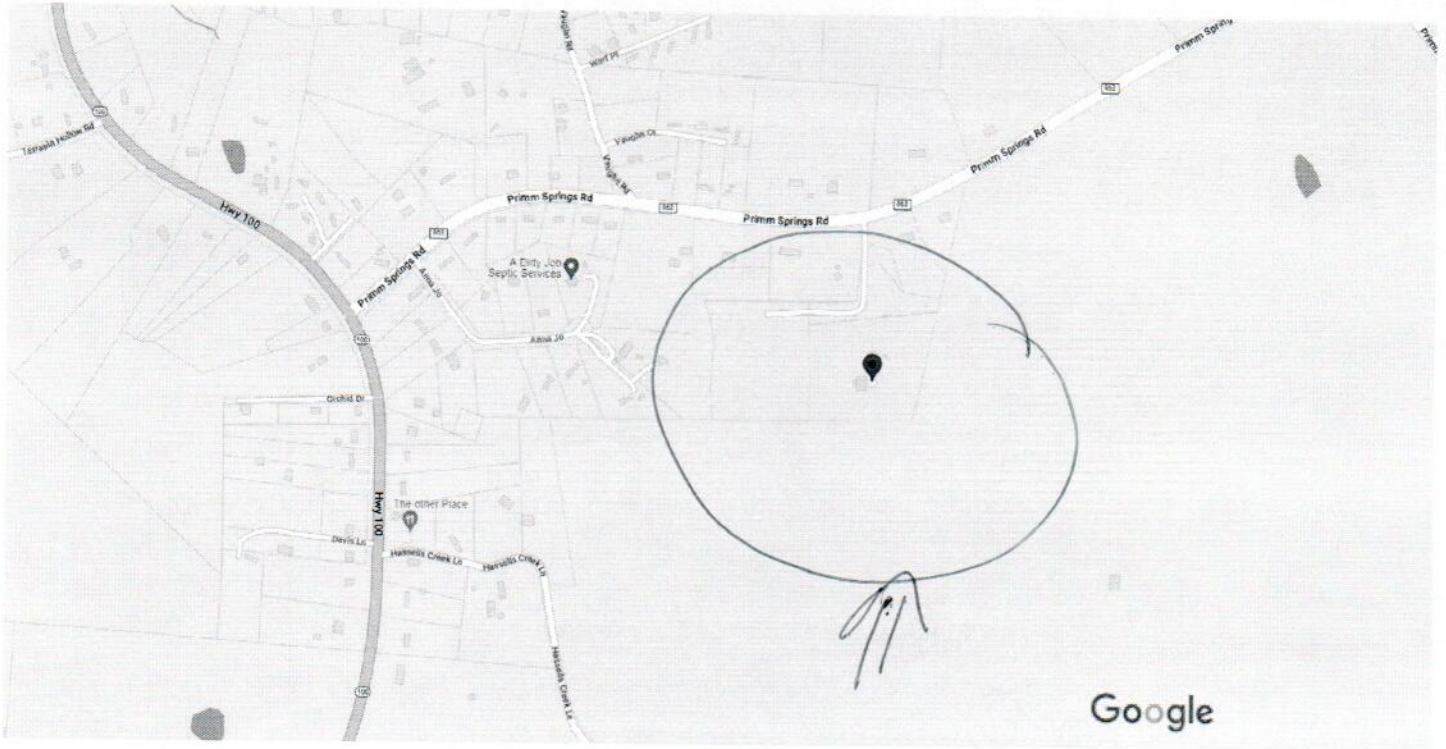
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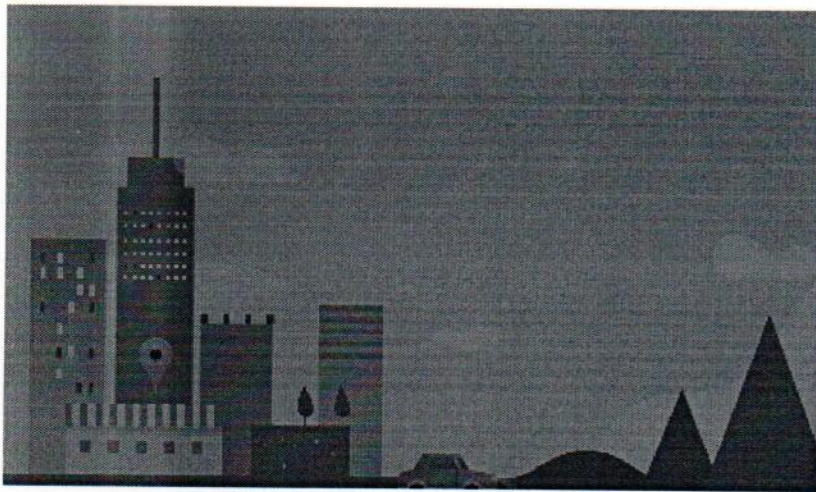
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