



TENNESSEE DEPARTMENT OF ENVIRONMENT AND CONSERVATION

Division of Water Resources

William R. Snodgrass Tennessee Tower, 312 Rosa L. Parks Avenue, 11th Floor, Nashville, Tennessee  
1-888-891-8332 (TDEC)

NASHVILLE ENVIRONMENTAL FIELD OFFICE RECEIVED  
MAY 10 2019

Notice of Intent (NOI) for General NPDES Permit for Stormwater Discharges from Construction Activities (TNR100000)

Site or Project Name: SHOPPES AT NORTHGATE, LOT 4		NPDES Tracking Number: TNR
Street Address or Location: MEMORIAL BOULEVARD, MURFREESBORO		Construction Start Date: July, 2019
Site Description: presently vacant to become a restaurant/retail development		Estimated End Date: December, 2019
County(ies): Rutherford		Latitude (dd.dddd): N35.8810
MS4 (if applicable): Murfreesboro		Longitude (-dd.dddd): W86.3840
Check box if a SWPPP is attached: <input checked="" type="checkbox"/>	Check box if a site location map is attached: <input checked="" type="checkbox"/>	Acres Disturbed: 2.9 Acres+/-
Check the appropriate box(s) if there are streams and/or wetlands on or adjacent to the construction site:		Total Acres: 2.9 Acres+/-
Streams <input type="checkbox"/> Wetlands <input type="checkbox"/>		
Has a jurisdictional determination been made by the USACE or the Army regarding waters of the United States?: Yes <input type="checkbox"/> No <input type="checkbox"/>		
Note: if yes, attach the jurisdictional determination		
If an Aquatic Resource Alteration Permit (ARAP) has been obtained for this site, what is the permit number? NR(S)		
Receiving waters: West Fork Stones River		

Site Owner/Developer (Primary Permittee): (Provide person, company, or entity that has operational or design control over construction plans and specifications): **D3 Memorial II, LLC**

For corporate entities only, provide correct Tennessee Secretary of State (SOS) Control Number: **001029374**  
(an incorrect SOS control number may delay NOI processing)

Site Owner or Developer Contact Name: (signs the certification below) Tim Dearman	Title or Position: President
Mailing Address: 3841 GREEN HILLS VILLAGE DRIVE, STE 400	City: Nashville State: TN Zip: 37215
Phone: (615) 269-5444 Fax: ( )	E-mail: tdearman@oldacremcdonald.com

Optional Contact: Huddleston-Steele Engineering (Manly Thweatt)	Title or Position: Civil Engineer
Mailing Address: 2115 NW Broad Street	City: Murfreesboro State: TN Zip: 37129
Phone: (615) 893-4084 Fax: ( )	E-mail: mthweatt@hsengr.com

**Owner/Developer(s) Certification:** (must be signed by president, vice-president or equivalent, or ranking elected official) (Primary Permittee)

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.

Owner/Developer Name (print/type): <b>Tim Dearman</b>	Signature:	Date: <b>5/29/2019</b>
Owner/Developer Name (print/type):	Signature:	Date:

**Contractor Certification:** (must be signed by president, vice-president or equivalent, or ranking elected official) (Secondary Permittee)

I certify under penalty of law that I have reviewed this document, any attachments, and the SWPPP referenced above. Based on my inquiry of the construction site owner/developer identified above and/or my inquiry of the person directly responsible for assembling this NOI and SWPPP, I believe the information submitted is accurate. I am aware that this NOI, if approved, makes the above-described construction activity subject to NPDES permit number TNR100000, and that certain of my activities on-site are thereby regulated. I am aware that there are significant penalties, including the possibility of fine and imprisonment for knowing violations, and for failure to comply with these permit requirements. As specified in Tennessee Code Annotated Section 39-16-702(a)(4), this declaration is made under penalty of perjury.

Contractor name, address, and SOS control number (if applicable):	Signature:	Date:
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Received Date: <b>5-3-19</b>	Reviewer:	Field Office: <b>04</b>	Permit Tracking Number: TNR <b>243439</b>	Exceptional TN Water:
Fee(s): <b>250.</b>	T & E Aquatic Flora/Fauna:	SOS Corporate Status:	Waters with Unavailable Parameters:	Notice of Coverage Date: