

**MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY  
GRANT APPLICATION  
PART 1. GENERAL INFORMATION**

1. Name of Applicant Madison County Board of Supervisors
2. Address of Applicant 125 West North Street, PO Box 608  
City Canton State MS Zip 39046-0608
3. Telephone No. of Applicant 601-855-5500
4. Contact Person Danny Lee
5. Address of Contact Person (if different than applicant) \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_
6. Telephone No. of Contact Person 601-855-5533
7. Email Address of Contact Person danny.lee@madison-co.com
8. Grant Request Category:  
\_\_\_\_\_ a. Local Government Solid Waste Assistance Grant (attach Part 2a)  
Competitive grant request \_\_\_\_\_ Non-Competitive grant request X  
\_\_\_\_\_ b. Local Government Solid Waste Planning Grant (attach Part 2c)  
\_\_\_\_\_ c. Local Government Waste Tire Grant (attach Part 2b)
9. Descriptive Title of Project/Program Local Solid Waste Assistance Grant Fund  
Noncompetitive Allocation
10. Describe the geographic area which the project/program will serve including the population to be served and list all political subdivisions to be served (e.g. counties, cities, etc.):  
Madison County, Flora, Canton, Ridgeland and Madison  
Population 104,618 (2017)
11. Is applicant in violation of or delinquent on, any condition of a previously awarded grant or loan from the MDEQ?  
\_\_\_\_\_ yes X no (If yes, please attach an explanation)
12. Certification
- To the best of my knowledge and belief, I certify that the information provided in this application including attachments is true, accurate, and correct. I further certify that I possess the authority to apply for this grant on behalf of the applicant.
- Trey Baxter \_\_\_\_\_  
Name of authorized representative (Please type or print) Signature of authorized representative
- President, Madison County Board of Supervisors 4/1/2019  
Title of authorized representative (Please type or print) Date

## SOLID WASTE ASSISTANCE GRANT REQUEST PART 2a

1. Grant Applicant: Local Solid Waste Assistance Grant Fund (Noncompetitive Allocation)

2. Please check one or more of the following activities which the applicant intends to conduct with the requested funds and include an estimate of the total funds needed to conduct the activity. Also, attach a more detailed proposed breakdown of how the funds will be used, such as costs for construction, equipment, personnel, administration, etc., (Note that no more than 3% of the funds may be used for administration of the grant.)

		Funds Requested
<input type="checkbox"/>	A. Cleanup of existing and/or future unauthorized dumps on public or private property	\$ _____
<input type="checkbox"/>	B. Establishment of a collection center or program for white goods, recyclables or other bulky rubbish waste not managed by local residential solid waste collection programs	\$ _____
<input type="checkbox"/>	C. Provision of public notice and education related to the proper management of solid waste, including recycling	\$ _____
<input type="checkbox"/>	D. Payment of the costs of employing a local solid waste enforcement officer (Complete Supplemental Part 3)	\$ _____
<input checked="" type="checkbox"/>	E. Payment of a maximum of seventy-five percent (75%) of the cost of conducting household hazardous waste collection programs.	\$ <u>\$21,256.88</u>
<input type="checkbox"/>	F. Development of other local solid waste management program activities associated with the prevention, enforcement or abatement of unauthorized dumps, as approved by the commission	\$ _____
<b>TOTAL FUNDS REQUESTED</b>		<b>\$ <u>21,256.88</u></b>

3. Please attach a narrative description for each part of Section 2 checked above, indicating how the applicant proposes to conduct the activities with the funds requested.

- If the activity includes Section 2.A., the description must identify the primary solid waste management facilities that will be utilized to ensure proper management of all solid wastes. The description must also identify the person or office that will be responsible for making a reasonable effort to require any known person(s) responsible for creating an unauthorized dump to clean up the property before the applicant expends money from the grant funds to do so and the person or office that will be responsible on behalf of the applicant for making a reasonable effort to recover from the responsible person any funds expended by the applicant.
- If the activity includes Section 2.B., the description should identify the location of any proposed collection center, if known, and any other primary solid waste management facilities that will be utilized to ensure proper management of all collected items.
- If the activity includes Section 2.D., applicant must submit Part 3: Enforcement Officer Supplemental Grant Request form.
- If the activity includes Section 2.E., the project shall be conducted in accordance with the Mississippi "Right-Way -To-Throw-Away Program" Regulations.

Mississippi Department of Environmental Quality  
Solid Waste Policy, Planning & Grants Branch  
P. O. Box 2261, Jackson, MS 39225  
Phone: 601-961-5171/Fax: 601-961-5785

**April 1, 2019**

**Madison County, Mississippi**

**Mississippi Department of Environmental Quality**

**Local Solid Waste Assistance Grant Fund, Noncompetitive Allocation**

Madison County, the City of Ridgeland and the City of Madison will enter into an Interlocal Cooperation Agreement to provide residential household hazardous waste disposal opportunity.

Through this interlocal agreement, we will enter into agreements/contracts with Magnolia Data Solutions, Care Environmental, Shred-it, Interstate Batteries, Waste Management and Southern Tire Recycling. This event will be held in the City of Madison at Madison Central Highschool on May 25, 2019 from 8AM to 12 noon and is being hosted by the Coty of Madison.