



Application for Coverage Under the General Permit to Discharge Stormwater Associated with **Industrial Activity**

Update Permit Information
Permit No. _____

Please print clearly in ink or type and read instructions before filling out this form. All sections are required unless otherwise noted.

I. Permittee Information

(All permit and billing correspondence will be mailed here)

Permittee's Name		Company Name	
Title		Universal Business Identifier (UBI) Number	
Phone No.	Fax No.	Street Address or P.O. Box	
E-mail		City	State Zip + 4

II. Facility Information

Name of Facility		Date facility began operation or will begin operation	
Facility Contact Name		Phone No.	
Facility Contact Email Address		Fax No.	
Facility Street Address (or Location Description)		Record site location at front door or site entrance <u>Latitude</u> _____ ° _____ ' _____ " <u>Longitude</u> _____ ° _____ ' _____ "	
City	State	Zip + 4	County Size of Site in Acres

A. List your Standard Industrial Classification (SIC) codes below with the primary SIC code in box 1. You must identify **all industrial activities** performed at your facility. (See [Table 1](#) in the permit for a list of activities.) You must translate the North American Industry Classification System (NAICS) code for your facility into a SIC code online at <http://www.census.gov/epcd/www/naicstab.htm>.

1		2		3		4		5		6	
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B. Type or Nature of Industrial Activities: _____

C. Is this facility a Hazardous Waste Treatment, Storage, and Disposal (TSD) facility regulated under Chapter 173-303 WAC? Yes No

D. For Airport Facilities:
Is the facility located at an airport where a single facility, **or a combination of facilities**, use more than 100,000 gallons of glycol-based deicing chemicals and/or 100 tons or more of urea on an average annual basis? Yes No If yes, identify the sampling points that collect runoff from deicing activities: _____.

III. Other Permits / Registration Check all that apply.

NPDES Permit (Individual or General Construction Stormwater) Permit No. _____

State Waste Discharge Permit (Ground Discharges) Permit No. _____

IV. Site Information

A. Discharge Point(s) Latitude and Longitude*: Provide latitude and longitude expressed in degrees (°), minutes (′), and seconds (″) for each of your facility’s discharge point(s). List **all** discharge points. (Please use an extra sheet of paper if necessary.) Please use topographic maps and GPS settings that use the 1983 North American Datum (NAD 83).

For the discharge identifier, list the name, number, or letter used on the map to identify the point(s) of discharge. The identifier can only be a maximum of three characters long and **must be unique** for each discharge point.

If you identify more than one discharge point, mark the discharge point(s) you will sample to comply with the permit sampling requirements by checking the “S/P” (sample point) box.

Discharge identifier. These cannot be symbols. (maximum of three characters ex. 01A)	Latitude degrees, minutes, seconds	Longitude degrees, minutes, seconds	S/P	Location description
	° ′ N	° ′ W	<input type="checkbox"/>	
	° ′ N	° ′ W	<input type="checkbox"/>	
	° ′ N	° ′ W	<input type="checkbox"/>	
	° ′ N	° ′ W	<input type="checkbox"/>	
	° ′ N	° ′ W	<input type="checkbox"/>	

NOTE: You must use the unique identifier for the sampling point on each discharge monitoring report (DMR) form you will submit each quarter. Ecology will provide the DMR form when we issue coverage under the permit.

B. Receiving Water Latitude / Longitude: Provide latitude and longitude expressed in degrees (°), minutes (′), and seconds (″) of you facility’s discharge where it enters the receiving water(s). Please use topographic maps and GPS settings that use the 1983 North American Datum (NAD 83). List all receiving waters for the site. These receiving waters must be listed in the public notice. (Please use an extra sheet of paper if necessary.)

Receiving Water Body	Latitude degrees, minutes, seconds	Longitude degrees, minutes, seconds
	° ′ N	° ′ W
	° ′ N	° ′ W
	° ′ N	° ′ W
	° ′ N	° ′ W
	° ′ N	° ′ W

3. Name of Conveyance System: If you discharge to a municipal stormwater system or other stormwater conveyance system (e.g., Kent stormwater drainage system, roadside ditch), identify the system by name or if unnamed, by other identifier (e.g., 145th street ditch). _____

*For assistance with latitude and longitude, refer to either of the following websites:
<http://www.getlatlon.com> or http://www.epa.gov/tri/report/siting_tool/index.htm. Please convert all latitude and longitude coordinates into degrees, minutes, seconds format. For help with this process go to: <http://www.fcc.gov/mb/audio/bickel/DDMMSS-decimal.html>

V. State Environmental Policy Act (SEPA)

Applies only to facilities that began operations after January 1, 2010.

Has a SEPA review been completed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Exempt Type of SEPA determination: <input type="checkbox"/> Determination of Non-Significance (DNS) <input type="checkbox"/> Final Environmental Impact Statement (EIS) <input type="checkbox"/> Mitigated DNS (MDNS) Agency issuing DNS, MDNS, Final EIS, or Exemption: _____ Date: _____

VI. Public Notice

New Facilities beginning operations, or existing facilities modifying existing coverage, after **January 1, 2010**, must publish a public notice at least **once** a week for **two** consecutive weeks with **seven days** in between publications, in a **single** newspaper of general circulation in the county in which the facility is located. Ecology cannot grant permit coverage earlier than the end of the 30-day public comment period, which begins on the date of the second public notice.

Submit (or fax: 360-407-6426) the application to Ecology **on** or **before** the date of the **first** public notice. If you fax the application to Ecology, you must follow up with hard copy by mail.

Date of the first public notice: ____ / ____ / ____ Date of second public notice: ____ / ____ / ____ (Begins 30-day public comment period) <u>Example:</u> Date of the first public notice: 01 / 01 / 2010 Date of second public notice: 01 / 08 / 2010 Name of the newspaper that will publish the public notices: _____

Complete this template using site-specific information. The **bold** language is required by WAC 173-226-130 and must be included in its entirety. (Either use the fill-in template below or attach on a separate sheet of paper, if necessary.)

_____ (Name of applicant) _____ (Address of applicant) is **seeking coverage/modification of coverage (select one) under the Washington Department of Ecology’s NPDES General Permit for Stormwater Discharges Associated with Industrial Activities.**

The industrial site, known as _____ (Site name) **is located at** _____ (Street address) **in** _____ (Name of nearest city). **Operations are due to start up on / started on** (select one) _____ (Date).

Industrial activities include _____ (Briefly describe the industrial activity).

Stormwater from the site discharges to _____ (List unnamed and named receiving waters).

Any person desiring to present their views to the Department of Ecology concerning this application may notify Ecology in writing within 30 days from the last date of publication of this notice. Comments may be submitted to:

Washington Dept of Ecology
Water Quality Program – Industrial Stormwater
PO Box 47696
Olympia, WA 98504-7696

VII. Certification of Permittee*

"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."

Printed Name / Company

Title

Signature *

Date

*** Federal regulations require this application is signed by one of the following:**

- A. In the case of corporations, by a principal executive officer of at least the level of vice president.
- B. In the case of a partnership, by a general partner of a partnership.
- C. In the case of sole proprietorship, by the proprietor.
- D. In the case of a municipality, state, federal, or other public facility: by either a principal executive officer or ranking elected official.

Please return this signed original document to the below address. Make sure you retain a copy for your records.

Washington Department of Ecology
Water Quality Program – Industrial Stormwater
PO Box 47696
Olympia, WA 98504-7696

If you have any questions, please call:

- **Charles Gilman** (360) 407-6437 or chgi461@ecy.wa.gov for Adams, Asotin, Columbia, Ferry, Franklin, Garfield, Grant, Lincoln, Pend Oreille, Skagit, Snohomish, Spokane, Stevens, Walla Walla, Whatcom, and Whitman counties.
- **Clay Keown** (360) 407-6048 or ckeo461@ecy.wa.gov for Island, King (except Seattle), and San Juan counties.
- **Josh Klimek** (360) 407-7451 or jokl461@ecy.wa.gov for city of Seattle and Kitsap, Pierce, and Thurston counties
- **Joyce Smith** (360) 407-6858 or josm461@ecy.wa.gov for Benton, Chelan, Clallam, Clark, Cowlitz, Douglas, Grays Harbor, Jefferson, Kittitas, Klickitat, Lewis, Mason Okanogan, Pacific, Skamania, Wahkiakum, and Yakima counties.

To ask about the availability of this document in a version for the visually impaired call the Water Quality Program at 360-407-6401. Persons with hearing loss, call 711 for Washington Relay Service. Persons with a speech disability, call 877-833-6341.