Notice of Intent (NOI)

to be Covered under
APDES General Permit AKG523000
Alaska Offshore Seafood Processors

Submit NOI to:
Wastewater Discharge Authorization Program
555 Cordova Street
Anchorage, Alaska 99501
Telephone (907) 269-6285
DEC.Water.WQPermit@alaska.gov

Submittal of this document constitutes notice that the party identified in Section II intends to be covered by the APDES permit authorizing discharges from seafood processing activities in Alaska occurring between 0.5 and 3.0 nautical miles from shore or baseline and obligates the permittee to comply with the terms and conditions of the permit.

Section I. Permit Information (Part 4.4.1)

Currently Assigned APDES Permit No.(s): AKG 52-3037

ADEC Environmental Health processor permit No.: AK 702

Section II. Operator Information (Part 4.4.2)

Company/Organization Name: Alaska Glacier Seafoods, Inc

Contact Person: Mike Erickson Title: President

Authorized Representative Name or Title: Jesse Ormsby, Office Manager

Mailing Address:

Street (PO Box): PO Box 34363

City: Juneau State: Ak Zip: 99803

Phone: 907-790-3590 Fax(optional): 907-790-4286

Email: jesse@alaskaglacierseafoods.com

Section III. Billing Contact Information (Part 4.4.3)

Company/Organization Name: Same

Contact Person: Jesse Ormsby Title: Office Manager

Mailing Address:

[✓] Check if same as Operator Information.

Street (PO Box):

City: State: Zip:

Phone: 907-790-3584 Fax(optional):

Email:

Section IV. Owner Information (Part 4.4.4)

Company Name:

Contact Person: Title:

Mailing Address:

[✓] Check if same as Operator Information.

Street (PO Box):

City: State: Zip:

Phone: Fax(optional):

Email:

Section V. Seafood Processor Facility Information (Part 4.4.5)	
Current Facility Name:	
Previous Name of Facility Over the Last Five Years	Date of Name Change
1. N/A	
2.	
3.	
4.	
5.	
Coast Guard Vessel Classification: AK-3960-H	USCG No.: EB40462

Vessel Length (feet): 32	Vessel Width (feet): 8	Vessel Draft (feet): 1.5

Section VI. Processor Classification (Part 4.4.6)	
Indicate the classification below that describes the type of operations for this processor. Check each that applies.	
	Operator of a stationary offshore processor discharging seafood processing waste in waters between 0.5 nm and 1.0 nm from shore at MLLW
✓	Operator of a mobile offshore processer discharging seafood processing waste while in transit in waters between 0.5 and 1.0 nm from shore at MLLW.
	Operator of a stationary offshore processor discharging seafood processing waste in waters between 1.0 nm from shore and 3.0 nm from shore at MLLW or baseline
	Operator of a mobile offshore processor discharging seafood processing waste while in transit in waters between 1.0 nm from shore and 3.0 nm from shore at MLLW or baseline

Section VII. Production Information (Part 4.4.7)

Provide a description of each product line, the type of raw product processed on each product line, the type of finished product, the 24 hour design processing capacity of each product line, and the estimated 24 hour maximum seafood processing wastewater discharge flow when the product line is active.

Product Line Description (Cod line #1, Crab Line)	Type of raw product processed (cod, pollock, salmon)	Type of finished product (for example, fillets, surimi, canned)	24 hour design processing capacity of product line	24-Hour Maximum Seafood Processing Wastewater Discharge Flow	
See attached					

Section VIII. Description of Discharges (Part 4.4.8)	
Seafood Processing Wastes (Fill out the applicable sections)	
Name and type of grinder(s): Autio Grinder	Grind size dimension and design capacity per manufacturer specifications: less than .5 inches
Depth in feet from the sea surface to outfall terminus: 20 feet	
See the AKG523000 NOI attachment for additional seafood processing waste discharge required information.	

Sanitary Wastes			
N/A	Type of Marine Sanitation Device (MSD)	Date of USCG approval and certification the MSD:	
Installation Date of MSD:		Number of People Utilizing the MSD:	
MSD Design Capacity (gal/day):		Max:	Avg:
Are any other waste streams combined with MSD effluent prior to discharge? Yes No If yes, explain:			

Graywater	
Estimated average daily volume of graywater discharged: N/A	

Other Wastewaters (Check all the apply) and contributing volume to discharge N/A					
	Process Disinfectants (List Type)				
	Cooling Water			Transfer Water	
	Boiler Water			Live Tank Water	
	Cooking Water			Air Scrubber Water	
	Refrigeration Condensate			Freshwater Pressure Relief Water	
	Refrigerated Seawater			Other (Describe):	

Section IX. Receiving Water Information (Part 4.4.9)
See the AKG523000 NOI Attachment for the receiving water required information.

Section X. Refueling Capability and Proximity to Fueling Stations (Part 4.4.10)	
Does your processor refuel fishing vessels? NO	
	If yes, what is the capacity of your refueling tanks?

Section XI Submittals with the NOI (Part 4.4.11)	
✓	1) **Area Map.** A legible area map of the location of the processor and all outfalls.
✓	2) **Bathymetric Map**. A bathymetric map of the receiving water within one nautical mile of the discharge.
N/A	3) **Line Drawing**. The operator shall submit a line drawing of the water flow through the facility.
N/A	4) **Outfall Narrative.** A narrative identifying each type of process, operation, or production area that contributes wastewater to the effluent for each outfall.
✓	**BMP Certification.** A previously permitted operator under AKG523000 shall submit certification that the BMP Plan has been reviewed and revised, as needed.

XII. Certification Information (Part 4.4.12)

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: Bonnie Erickson	Title: Secretary
Signature: Bonnie Erickson	Date: 3/17/16
Company: Alaska Glacier Seafoods, Inc.	Email: jesie@alaskaglacierseafoods.com

ATTACHMENT B - GRINDER AND WASTE CONVEYANCE INSPECTION LOG

For the grinder system inspection: Conduct a daily inspection of the grinder system during the processing season to confirm that grinders are operating and reducing the size of seafood waste to 0.5 inches or smaller in any dimension. If not, report the percentage that does not meet 0.5 inch and include the length of the largest piece.

For the waste conveyance system inspection: Conduct a daily visual inspection of the waste conveyance system, including the sump or other places of effluent collection for removal of gloves, earplugs, rubber bands or other items that may be entrained in the wastewater. Discharge of such items is prohibited.

AKG52 - 3037	GRINDER SYSTEM		WASTE CONVEYANCE SYSTEM
DATE/TIME/INITIALS	Grinders Operating Y/N	Size reduced to 0.5 inch or smaller? Y/N	Report observations on foreign objects found and disposal location.
see attached			

Name, Initials, Signature of Observer #1: _____

Name, Initials, Signature of Observer #2: _____

Name, Initials, Signature of Observer #3: _____

Name, Initials, Signature of Observer #4: _____

Comments

ATTACHMENT **C- SEA SURFACE VISUAL MONITORING LOG**

An operator shall conduct daily sea surface monitoring while discharging to determine compliance with WQS, the permit conditions, and to document observations of, or incidents involving, threatened or endangered species.

PERMIT Number AKG52 -3037				
DATE/TIME	Estimate the area (feet) of continuous films, sheens, or mats of foam and the probable cause.	Tide cycle	Number of Steller sea lion, Steller's eider, spectacled eider, northern sea otter, and short-tailed albatross. Note if injured or dead and probable cause.	Initials of Observer
See attached				

Name, Initials, Signature of Observer #1: _____

Name, Initials, Signature of Observer #2: _____

Name, Initials, Signature of Observer #3: _____

Comments:

Attachment D

Seafloor Survey: Summary Report Form

Operator Information N/A	**APDES Permit Number: AKG52**
Name:	**Company:**
Address:	**Facility:**
Email:	**Fax:**
Phone:	**Waters discharged to:**
Surveyor name:	**Survey location in degrees, minutes and seconds; or decimal degrees:**
Surveyor phone:	
Diver name(s) if different from the surveyor:	**Survey start date:**
Diver phone:	**Survey end date:**
Surveyor address:	**Signed survey report attached:** Yes No
Five photos of waste piles attached: Yes No	**Measurement method:**
Survey method Dive ROV CC sonar Grab Sample	**NOAA reported current direction and speed:**
Field measurement and calculation attached: Yes No	
Depth of survey at MLLW	**Disposal occurred at time of survey:** Yes No
Attached summary of findings, such as types and quantities of aquatic life observed adjacent to, on, in or feeding on the waste; sediment types; and cover observed: Yes No	**Total area of coverage:**
	Total area of continuous coverage:
Findings of change from previous surveys attached Yes No	**Total area of discontinuous coverage:**
Map attached delineating survey area, area of continuous cover, and area of discontinuous cover Yes No	**Maximum seafood waste pile(s) depth:**
Statement attached whether continuous cover exceeds 1 acre. Yes No	

ATTACHMENT D-2

Seafloor Survey: Transect Data Form

APDES Permit Number: AKG52	N/A
Name of Operator:	
Date/Time of Survey:	

Distance along Transect (m)	Transect #1 SD/WD/% Cover	Transect #2 SD/WD/% Cover	Transect #3 SD/WD/% Cover	Transect #4 SD/WD/% Cover	Transect #5 SD/WD/% Cover

Notes:
SD - Seafood Waste Depth
WD - Water Depth at Mean Lower Low Water
% Cover - Percent of sample area covered by seafood waste (0-100)
T - Trace amounts of seafood waste (10% or less percent cover, less than 1 centimeter deep)