

# STATE OF ALASKA

**DEPARTMENT OF ENVIRONMENTAL CONSERVATION  
DIVISION OF WATER  
WASTEWATER DISCHARGE AUTHORIZATION PROGRAM**

**SEAN PARNELL, GOVERNOR**

555 Cordova Street  
Anchorage, Alaska 99501-2617  
Phone: (907) 269-6285  
Fax: (907) 334-2415  
<http://www.dec.alaska.gov>

September 14, 2011

Company: Innovative Building Solutions, Inc  
ATTN: John McKeever  
PO Box 230666  
Anchorage, AK 99523

Facility:  
Eagle Crossing Subdivision, Phase N  
8968 Eagle River Lane  
Eagle River-Chugiak, AK 99577

Permit Number: AKR10DT18

This email/letter acknowledges that you have submitted a complete Notice of Intent form to be covered under the APDES General Permit for Stormwater Discharges for Construction General Permit Activity (Construction General Permit). Coverage under this permit begins at the conclusion of your seven-day waiting period, on September 21, 2011.

As stated above, this letter acknowledges receipt of a complete Notice of Intent. However, it is not an ADEC determination of the validity of the information you provided. Your eligibility for coverage under the Permit is based on the validity of the certification you provided. Your signature on the Notice of Intent certifies that you have read, understood, and are implementing all of the applicable requirements. An important aspect of this certification requires that you correctly determine whether you are eligible for coverage under this permit.

As you know, the Construction General Permit requires you to have developed and begun implementing a Stormwater Pollution Prevention Plan (SWPPP) and outlines important inspection and record keeping requirements. You must also comply with any additional location-specific requirements applicable to Alaska. A copy of the Construction General Permit must be kept with your SWPPP. An electronic copy of the Permit and additional guidance materials can be viewed and downloaded at <http://dec.alaska.gov/water/wnpssc/stormwater/index.htm>.

For tracking purposes, the following number has been assigned to your Notice of Intent Form: AKR10DT18.

If you have general questions regarding the stormwater program or your responsibilities under the Construction General Permit, please call Greg Drzewiecki at (907) 269-7692.

Thank you for using the ADEC eNOI system.

SEP 13 2011

For Agency Use

Permit # \_\_\_\_\_

DEC  
Division of Water Quality  
Water Pollution Control Section

Notice of Intent (NOI) for Storm Water Discharge Associated with Construction Activity Under an APDES Construction General Permit



Submission of this Notice of Intent (NOI) constitutes notice that the party identified in Section I of this form requests authorization to discharge pursuant to the APDES Construction General Permit (CGP). Submission of this NOI also constitutes notice that the party identified in Section II of this form meets the eligibility requirements of the CGP for the project identified in Section IV of this form. Permit coverage is required prior to commencement of construction activity until you are eligible to terminate coverage as detailed in the CGP. To obtain authorization, you must submit a complete and accurate NOI form. Refer to the instructions at the end of this form.

**I. Single/Multiple NOI Project**

Is this NOI for a project with a single NOI?  Yes  No  
 If "No," then you project has multiple NOIs, will the fee be paid with this NOI? Yes  No   
 If "No," then enter the name of the operator paying the fee:

**II. Operator Information**

Organization: INNOVATIVE BUILDING SOLUTIONS INC

Contact Person: JOHN MCKEEVER

Mailing Address:  
 Street (PO Box): PO BOX 230666  
 City: ANCHORAGE State: AK Zip: 99523  
 Phone: 929 4922 Fax(optional):  
 Email: JACKM@CLEARWIRE.NET

**III. Billing Contact Information**

Organization:

Contact Person:

Mailing Address:  
 Street (PO Box):  
 City: State: Zip:  
 Phone: Fax(optional):  
 Email:

Check if same as Operator Information.

**IV. Project/Site Information**

Project/Site Name: EAGLE CROSSING SUBD. PHASE N

Project Street/Location: 8968 EAGLE RIVER LANE

City: EAGLE RIVER State: Alaska Zip: 99577

Borough or similar government subdivision: ANCHORAGE

Latitude: 61.303953 Longitude: 149.501294

Determined By:  GPS  USGS topographic map  Other: DEVELOPER INFO

If you used a USGS topographic map, what was the scale?

Estimated Project Start Date: 9-15-11 Estimated Project Completion Date: 1-31-12

Estimated Area to be Disturbed (to the nearest quarter acre): 1/4 ACRE

Have storm water discharges from your project/site been covered previously under an EPA or DEC issued permit?  Yes  No

If "Yes", provide the Tracking Number for the coverage under a previous EPA or DEC permit: AKR10C941

If "Yes," have you updated your SWPPP according to the 2011 Alaska Construction General Permit?  Yes  No

**V. SWPPP (Storm Water Pollution Prevention Plan)**

Has the SWPPP been prepared in advance of filing this NOI?  Yes  No

Location of SWPPP for Viewing:  Address in Section II  Address in Section IV  Other

If other:

SWPPP Street: 3801 CENTERPOINT DR.

City: ANCHORAGE State: AK Zip: 99503

SWPPP Contact Information (if different than that in Section I):

Name: RIC DAVIDGE

Phone: 229-5328 Fax(optional):

Email:

**VI. Discharge Information**

Identify the name(s) of waterbodies to which you discharge:

EAGLE RIVER THROUGH MUNICIPALITY OF ANCHORAGE STORM DRAIN SYSTEM

Is this discharge consistent with the assumptions and requirements of applicable EPA approved or established TMDL(s)?  Yes  No

**VII. Treatment Chemicals**

Will you use control measures such as polymers, flocculants or other treatment chemicals at your construction site? Yes  No

**NOTE:** If you are unsure at the filing of the NOI, check "No" and then if you use treatment chemicals file an NOI Modification form indicating "Yes".

If "Yes," indicate the following polymers, flocculants or other treatment chemicals that will be used at your construction site:

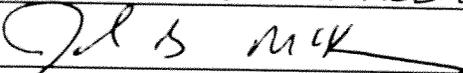
- |   |  |
|---|--|
| <input type="checkbox"/> Alum                 | <input type="checkbox"/> Gypsum                |
| <input type="checkbox"/> Polyacrylamide (PAM) | <input type="checkbox"/> Polyaluminum Chloride |
| <input type="checkbox"/> Other:               |  |

**VIII. Certification Information**

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: JOHN S MCKEEVER

Title: PRESIDENT

Signature: 

Date: 9-13-11 Email: JACKM@CLEARWARE

NOI Preparer (Complete if NOI was prepared by someone other than the certifier)

Prepared By:

Organization:

Phone:

Email: