THE STATE of ALASKA
GOVERNOR BILL WALKER

**Department of Environmental Conservation**

DIVISION OF WATER
Wastewater Discharge Authorization Program

555 Cordova St
Anchorage, Alaska 99501-2617
Main: 907.269.6285
Fax: 907.334.2415

4/28/2016

Company: New Horizons Telecom
ATTN: Steve Kieser
901 COPE INDUSTRIAL WAY
PALMER AK 99645-6739

Facility:
Quintillion Foc Install Phase 2
Dalton Highway milepost 300-359
Prudhoe Bay AK 99734

Permit Number: AKR10FA86

This email/letter acknowledges that you have submitted a reissuance Notice of Intent form to be covered under the APDES General Permit for Stormwater Discharges for Construction General Permit Activity (Construction General Permit). The permittee is authorized to discharge storm water under the terms and conditions of this permit upon the issuance date of this letter. Permit documents can be accessed starting tomorrow on the ADEC's Storm Water Permit Search website: http://www.dec.state.ak.us/Applications/Water/WaterPermitSearch/Search.aspx

As stated above, this letter acknowledges receipt of a 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://www.dec.state.ak.us/water/wnpspc/stormwater/index.htm.

For tracking purposes, the following number has been assigned to your Notice of Intent Form: AKR10FA86 .

If you have general questions regarding the stormwater program or your responsibilities under the Construction General Permit, please call (907) 269-6285. Thank you for using the ADEC eNOI system.

(For Agency Use) Permit Authorization #: AKR10FA86

# Notice of Intent (NOI)
# for Storm Water Discharges 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 II of this form requests authorization to discharge pursuant to the APDES Construction General Permit (CGP, AKR100000). 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 authorization 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 your 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: | Name: | Title: |
|---|---|---|
| New Horizons Telecom | Steve Kieser | VP of Program Development |

| Phone: | Fax (optional): | Email: |
|---|---|---|
| (907) 761-6000 | | |

| Mailing Address: | Street (PO Box): | | |
|---|---|---|---|
| | 901 COPE INDUSTRIAL WAY | | |
| | City: | State: | Zip: |
| | PALMER | AK | 99645-6739 |

## III. Billing Contact Information

| Organization: | Name: | Title: |
|---|---|---|
| New Horizons Telecom | Steve Kieser | VP of Program Development |

| Phone: | Fax (optional): | Email: |
|---|---|---|
| (907) 761-6000 | | |

| Mailing Address: ☐ Check if same as Operator Information | Street (PO Box): | | |
|---|---|---|---|
| | 901 COPE INDUSTRIAL WAY | | |
| | City: | State: | Zip: |
| | PALMER | AK | 99645-6739 |

## IV. Project / Site Information

| Project Name: | Estimated Start Date: | Estimated End Date: |
|---|---|---|
| Quintillion Foc Install Phase 2 | 05/22/2015 | 06/30/2016 |

Brief Description of Project:

Estimated Area to be Disturbed *(nearest tenth acre)*: 7

Installation will occur along the Dalton Highway milepost 300-359

Is your project / site less than one-acre, but part of a common plan of development? ☐ Yes ☑ No

If "Yes", provide the Permit Authorization Number and name of the common plan of development: Number: Name:

Have storm water discharges from your project / site been authorized previously by a DEC permit? ☑ Yes ☐ No

If "Yes," provide the Permit Authorization Number for the previous DEC permit? AKR10FA86

If "Yes," have you updated your SWPPP according to the most recently issued CGP? ☑ Yes ☐ No

| Location Address: | Street: | | Borough or similar government subdivision: | |
|---|---|---|---|---|
| | Dalton Highway milepost 300-359 | | North Slope | |
| | City: | | State: | Zip: |
| | Prudhoe Bay | | Alaska | 99734 |
| | Latitude (decimal degree, 5 places): | Longitude (decimal degree, 5 places): | Determined By: | Map (other) |
| | | | ☐ USGS Topographic Map, scale: | |
| | 68.69717 | -149.059047 | ☐ Other: Google Earth | |

(For Agency Use) Permit Authorization #: AKR10FA86

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

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

For projects with 5 or more acres of disturbance, has a SWPPP been submitted to DEC? ☑ Yes ☐ No, ≤ 5 acres

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

| If other: | Street: | | |
|---|---|---|---|
| | City: | State: AK | Zip: |

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

| Organization: | Name: | Title: |
|---|---|---|
| New Horizons Telecom | Brian Teachworth | Associate Engineer |

| Phone: | Fax (optional): | Email: |
|---|---|---|
| (907) 761-6000 | | |

| Mailing Address: ☐ Check if same as Operator Information | Street (PO Box): 901 COPE INDUSTRIAL WAY | | |
|---|---|---|---|
| | City: PALMER | State: AK | Zip: 99645-6739 |

## VI. Permanent Storm Water Controls

Will you construct a permanent storm water management control measure at the project site (Part 4.11)? ☐ Yes ☑ No

If "Yes", indicate the type of measure to be installed:

☐ Pond ☐ Oil/Water/Grit Separator ☐ Proprietary Storm Water Sedimentation Device

☐ Other:

## VII. Discharge Information

Does your project discharge into a Municipal Separate Storm Sewer System (MS4)? ☐ Yes ☑ No

If yes, name of the MS4 Operator:

**Receiving Water and Wetlands Information:** (if additional space is needed for this question, attach separate sheet or annotate in Section XI.)

**Impaired waters/303d Listed waters**:
(see http://dec.alaska.gov/water/wqsar/Docs/impairedwaters.pdf or http://dec.alaska.gov/water/wqsar/map.html, and http://dec.alaska.gov/water/tmdl/tmdl_index.htm.

| **a.** Identify the name(s) of waterbodies or wetlands to which you discharge. | **b.** Are any of your discharges directly into any segment of a 303d Listed Water, i.e. "Impaired" Water? | | **c.** If you answered **YES** to question **b**, then answer the following three questions: | | | | |
|---|---|---|---|---|---|---|---|
| | | | **i.** What pollutant(s) are causing the impairment? | **ii.** Are the pollutant(s) causing the impairment present in your discharge? | | **iii.** Is the discharge consistent with the assumptions and requirements of applicable EPA approved or established Total Maximum Daily Load (TMDL(s))? | |
| | **Yes** | **No** | | **Yes** | **No** | **Yes** | **No** |
| Sagavanirktok River | ☐ | ☑ | | ☐ | ☐ | ☐ | ☐ |
| Oskrukuvik River | ☐ | ☑ | | ☐ | ☐ | ☐ | ☐ |
| Dan Creek | ☐ | ☑ | | ☐ | ☐ | ☐ | ☐ |
| Gustafson Gulch | ☐ | ☑ | | ☐ | ☐ | ☐ | ☐ |
| | ☐ | ☐ | | ☐ | ☐ | ☐ | ☐ |

## VIII. 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:

☐ Alum ☐ Gypsum

☐ Polyacrylamide (PAM) ☐ Polyaluminum Chloride

☐ Other:

## IX. Certification Information

An Alaska Pollutant Discharge Elimination System (APDES) permit application or report must be signed by an individual with the appropriate authority per 18 AAC 83.385. For additional information, please refer to 18 AAC 83.385 at the following link: http://www.legis.state.ak.us/basis/aac.asp#18.83.385.

| | |
|---|---|
| Corporate Executive Officer<br>18 AAC 83.385 (a)(1)(A) | For a corporation, a president, secretary, treasurer, or vice-president of the corporation in charge of a principal business function, or any other person who performs similar policy- or decision-making functions for the corporation. |
| Corporate Operations Manager<br>18 AAC 83.385 (a)(1)(B) | For a corporation, the manager of one or more manufacturing, production, or operating facilities, if<br>(i) the manager is authorized to make management decisions that govern the operation of the regulated facility, including having the explicit or implicit duty of making major capital investment recommendations, and initiating and directing other comprehensive measures to assure long term environmental compliance with environmental statutes and regulations;<br>(ii) the manager can ensure that the necessary systems are established or actions taken to gather complete and accurate information for permit application requirements; and<br>(iii) authority to sign documents has been assigned or delegated to the manager in accordance with corporate procedures. |
| Sole Proprietor or General Partner<br>18 AAC 83.385 (a)(2) | For a partnership or sole proprietorship, the general partner or the proprietor respectively. |
| Public Agency, Chief Executive Officer<br>18 AAC 83.385 (a)(3)(A) | For a municipality, state, or other public agency, the chief executive officer of the agency. |
| Public Agency, Senior Executive Officer<br>18 AAC 83.385 (a)(3)(B) | For a municipality, state, or other public agency, a senior executive officer having responsibility for the overall operations of a principal geographic unit or division of the agency. |
| **For Delegated Authority: the delegation must be made in writing and submitted to the DEC.*<br>*An Example of written authorization delegating authority can be found on the Division of Water website:*<br>*http://dec.alaska.gov/Water/OASysHelp/attachments/Delegation_Authorization_Form.pdf* | |
| Operations Manager<br>*(Delegated Authority)**<br>18 AAC 83.385 (b)(2)(A) | For a duly authorized representative, an individual or a position having responsibility for the overall operation of the regulated facility or activity, including the position of plant manager, operator of a well or a well field, superintendent or position of equivalent responsibility. |
| Environmental Manager<br>*(Delegated Authority)**<br>18 AAC 83.385 (b)(2)(B) | For a duly authorized representative, an individual or position having overall responsibility for environmental matters for the company. |

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.

| Organization: | Name: | Title: |
|---|---|---|
| New Horizons Telecom | Steve Kieser | VP of Program Development |

| Phone: | Fax (optional): | Email: |
|---|---|---|
| (907) 761-6000 | | |

| Mailing Address: ☐ Check if same as Operator Information | Street (PO Box): 901 COPE INDUSTRIAL WAY | | |
|---|---|---|---|
| | City: PALMER | State: AK | Zip: 99645-6739 |

Signature Page Signed by: Steve Kieser
Signature

4/28/2016
Date

## X. NOI Preparer *(Complete if NOI was prepared by someone other than the certifier.)*

| Organization: | Name: | Title: |
|---|---|---|
| New Horizons Telecom | Brian Teachworth | Associate Engineer |

| Phone: | Fax (optional): | Email: |
|---|---|---|
| (907) 761-6000 | | |

| Mailing Address: ☐ Check if same as Operator Information | Street (PO Box): 901 COPE INDUSTRIAL WAY | | |
|---|---|---|---|
| | City: PALMER | State: AK | Zip: 99645-6739 |

## XI. Document Attachments and Supplemental Information

Attachment 1. (Fill in as necessary if more space is required for Receiving water and Wetlands Information.)

| a. What is the name(s) of your receiving water(s) that receive storm water directly and/or through a MS4?<br>If your receiving water is impaired, then identify the name of the impaired segment, if applicable, in parenthesis following the receiving water name. | b. Are any of your discharges directly into any segment of an "impaired" water? | | c. If you answered yes to question b, then answer the following three questions: | | | | |
|---|---|---|---|---|---|---|---|
| | | | i. What pollutant(s) are causing the impairment? | ii. Are the pollutant(s) causing the impairment present in your discharge? | | iii. Has the TMDL been completed for the pollutant(s) causing the impairment? | |
| | Yes | No | | Yes | No | Yes | No |
| | ☐ | ☐ | | ☐ | ☐ | ☐ | ☐ |
| | ☐ | ☐ | | ☐ | ☐ | ☐ | ☐ |
| | ☐ | ☐ | | ☐ | ☐ | ☐ | ☐ |
| | ☐ | ☐ | | ☐ | ☐ | ☐ | ☐ |
| | ☐ | ☐ | | ☐ | ☐ | ☐ | ☐ |
| | ☐ | ☐ | | ☐ | ☐ | ☐ | ☐ |
| | ☐ | ☐ | | ☐ | ☐ | ☐ | ☐ |
| | ☐ | ☐ | | ☐ | ☐ | ☐ | ☐ |
| | ☐ | ☐ | | ☐ | ☐ | ☐ | ☐ |
| | ☐ | ☐ | | ☐ | ☐ | ☐ | ☐ |
| | ☐ | ☐ | | ☐ | ☐ | ☐ | ☐ |

THE STATE of ALASKA
GOVERNOR BILL WALKER

**Department of Environmental Conservation**

DIVISION OF WATER
Wastewater Discharge Authorization Program

555 Cordova St
Anchorage, Alaska 99501-2617
Main: 907.269.6285
Fax: 907.334.2415

Thank you for using the ADEC eNOI system. This Signature Page NOI must be signed by:

Steve E Kieser
New Horizons Telecom, Inc.

Please sign on the appropriate line in the Certification Information Section (Section IX, Page 4 of 4) of this Signature Page NOI.

In order to complete the certification of your electronic Notice of Intent Modification (eNOI), submit all pages of this Signature Page NOI via mail, fax, or email to:

Attn: Storm Water Program
Division of Water
Alaska Department of Environmental Conservation
555 Cordova Street
Anchorage, AK 99501
Fax Number: (907) 269-3487
Phone Number: (907) 269-8117
Email Address: DEC.Water.OPAHelp@alaska.gov

If you have any questions regarding this signature page or other questions concerning the eNOI System, please call ADEC at: (907) 269-8117.

Thank you for using the ADEC eNOI system.

(For Agency Use) Permit Authorization #: AKR10FA86
OASys Tracking #: CGPMOD-1035

# Notice of Intent (NOI) Modification for Storm Water Discharges Associated with Construction Activity filed under an APDES General Permit

(***Please copy content exactly from your NOI. Indicate changes*** *on the* ***next page***.)

| **Current NOI Information** |
|---|
| I. Permit Tracking Number:<br>AKR10FA86 Quintillion FOC Installation Phs. 2; NEW HORIZONS TELECOM, INC. |

| **Instructions for Completing a Modification to an APDES Notice of Intent (NOI)** |
|---|
| Use the form on the subsequent pages to indicate the items for which you are submitting this modification. Only enter the information you wish to change. You may use this form to modify an NOI that you submitted to ADEC for coverage under the Construction General Permit (CGP). If you have any questions about modifying your NOI, call the DEC Storm Water Program at (907) 269-8117. |
| **When Should You Modify Your Notice of Intent (NOI)?**<br>• You can use this form to update or correct information on your NOI, including:<br>• Owner/Operator address and contact information<br>• Site Information<br>• Start or End dates<br>• Number of acres to be disturbed<br>*(Note, if the original project disturbance was between 1 and < 5 acres, and now will disturb five acres or more, a SWPPP must also be submitted with the NOI modification. Please note the CGP has different provisions for small and large construction projects.)*<br>• Storm Water Pollution Prevention Plan (SWPPP) location and contact information<br>• Continuation of expired permit in accordance with Part 2.6. |
| **When must you Submit a Notice of Termination (NOT) Instead of a Modification Form?**<br>• The owner/operator has changed: You must submit a NOT when you transfer control of a site to a new owner/operator. The new owner/operator must then file a new NOI to obtain coverage under DEC's CGP. Coverage is not transferable. |

(For Agency Use) Permit Authorization #: AKR10FA86

# Notice of Intent (NOI)
# for Storm Water Discharges 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 II of this form requests authorization to discharge pursuant to the APDES Construction General Permit (CGP, AKR100000). 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 authorization 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 your 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: | Name: | Title: |
|---|---|---|
| Phone: | Fax (optional): | Email: |
| Mailing Address: Street (PO Box): | | |
| City: | State: | Zip: |

## III. Billing Contact Information

| Organization: | Name: | Title: |
|---|---|---|
| Phone: | Fax (optional): | Email: |
| Mailing Address: Street (PO Box): | | |
| City: | State: | Zip: |

## IV. Project / Site Information

| Project Name: | Estimated Start Date: | Estimated End Date: 09/15/2017 |
|---|---|---|
| Brief Description of Project: | Estimated Area to be Disturbed *(nearest tenth acre)*: | |

Is your project / site less than one-acre, but part of a common plan of development? ☐ Yes ☐ No

If "Yes", provide the Permit Authorization Number and name of the common plan of development: Number: Name:

Have storm water discharges from your project / site been authorized previously by a DEC permit? ☐ Yes ☐ No

If "Yes," provide the Permit Authorization Number for the previous DEC permit?

If "Yes," have you updated your SWPPP according to the 2016 CGP? ☐ Yes ☐ No

| Location Address: Street: | | Borough or similar government subdivision: | |
|---|---|---|---|
| City: Select | | State: Alaska | Zip: Select |
| Latitude (decimal degree, 5 places): | Longitude (decimal degree, 5 places): | Determined By: ☐ GPS ☐ USGS Topographic Map ☐ Other | |
| If you used a USGS Topographic map, what was the scale? | | | |

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

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

For projects with 5 or more acres of disturbance, has a SWPPP been submitted to DEC? ☐ Yes ☐ No, ≤ 5 acres

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

| If other: | Street: | | |
|---|---|---|---|
| | City: | State: AK | Zip: |

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

| Organization: | Name: | Title: |
|---|---|---|
| Phone: | Fax (optional): | Email: |

| Mailing Address: | Street (PO Box): | | |
|---|---|---|---|
| | City: | State: | Zip: |

## VI. Permanent Storm Water Controls

Will you construct a permanent storm water management control measure at the project site (Part 4.11)? ☐ Yes ☐ No

If "Yes", indicate the type of measure to be installed:

☐ Pond ☐ Oil/Water/Grit Separator ☐ Proprietary Storm Water Sedimentation Device

☐ Other:

## VII. Discharge Information

Does your project discharge into a Municipal Separate Storm Sewer System (MS4)? ☐ Yes ☐ No

If yes, name of the MS4 Operator:

**Receiving Water and Wetlands Information:** (if additional space is needed for this question, attach separate sheet or annotate in Section XI.)

**Impaired waters/303d Listed waters**:
(see http://dec.alaska.gov/water/wqsar/Docs/impairedwaters.pdf or http://dec.alaska.gov/water/wqsar/map.html, and http://dec.alaska.gov/water/tmdl/tmdl_index.htm.

| a. Identify the name(s) of waterbodies or wetlands to which you discharge. | b. Are any of your discharges directly into any segment of a 303d Listed Water, i.e. "Impaired" Water? | | c. If you answered **YES** to question **b**, then answer the following three questions: | | | | |
|---|---|---|---|---|---|---|---|
| | | | i. What pollutant(s) are causing the impairment? | ii. Are the pollutant(s) causing the impairment present in your discharge? | | iii. Is the discharge consistent with the assumptions and requirements of applicable EPA approved or established Total Maximum Daily Load (TMDL(s))? | |
| | Yes | No | | Yes | No | Yes | No |
| | ☐ | ☐ | | ☐ | ☐ | ☐ | ☐ |
| | ☐ | ☐ | | ☐ | ☐ | ☐ | ☐ |
| | ☐ | ☐ | | ☐ | ☐ | ☐ | ☐ |
| | ☐ | ☐ | | ☐ | ☐ | ☐ | ☐ |
| | ☐ | ☐ | | ☐ | ☐ | ☐ | ☐ |

## VIII. 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:

☐ Alum ☐ Gypsum

☐ Polyacrylamide (PAM) ☐ Polyaluminum Chloride

☐ Other:

(For Agency Use) Permit Authorization #: AKR10FA86 (

## IX. Certification Information

An Alaska Pollutant Discharge Elimination System (APDES) permit application or report must be signed by an individual with the appropriate authority per 18 AAC 83.385. For additional information, please refer to 18 AAC 83.385 at the following link:
http://dec.alaska.gov/commish/regulations/pdfs/18%20AAC%2083.pdf#page=71

**Signing Authority**: Please identify your authority to sign APDES permit applications and reports. (Select only one)

| | | |
|---|---|---|
| ☐ Corporate Executive Officer | 18 AAC 83.385 (a)(1)(A) | For a corporation, a president, secretary, treasurer, or vice-president of the corporation in charge of a principal business function, or any other person who performs similar policy- or decision-making functions for the corporation. |
| ☐ Corporate Operations Manager | 18 AAC 83.385 (a)(1)(B) | For a corporation, the manager of one or more manufacturing, production, or operating facilities. |
| ☐ Sole Proprietor or General Partner | 18 AAC 83.385 (a)(2) | For a partnership or sole proprietorship, the general partner or the proprietor respectively. |
| ☐ Public Agency, Chief Executive Officer | 18 AAC 83.385 (a)(3)(A) | For a municipality, state, or other public agency, the chief executive officer of the agency. |
| ☐ Public Agency, Senior Executive Officer | 18 AAC 83.385 (a)(3)(B) | For a municipality, state, or other public agency, a senior executive officer having responsibility for the overall operations of a principal geographic unit or division of the agency. |
| ☐ Operations Manager (Delegated Authority)* | 18 AAC 83.385 (b)(2)(A) | For a duly authorized representative, an individual or a position having responsibility for the overall operation of the regulated facility or activity, including the position of plant manager, operator of a well or a well field, superintendent or position of equivalent responsibility. |
| ☐ Environmental Manager (Delegated Authority)* | 18 AAC 83.385 (b)(2)(B) | For a duly authorized representative, an individual or position having overall responsibility for environmental matters for the company. |

* For Delegated Authority: If you select "Delegated Authority" (Duly Authorized Representative), the delegation must be made in writing and submitted to the DEC. Your signature will not be approved until DEC receives the written delegation.
An Example of written authorization delegating authority can be found on the Division of Water website:
http://dec.alaska.gov/Water/OASysHelp/attachments/Delegation_Authorization_Form.pdf

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.

| Organization: | Name: | Title: |
|---|---|---|
| New Horizons Telecom, Inc. | Steve E Kieser | VP of Program Development |

| Phone: | Fax (optional): | Email: |
|---|---|---|
| (907) 761-6024 | | skieser@nhtiusa.com |

| Mailing Address: | Street (PO Box): | | | |
|---|---|---|---|---|
| | 901 Cope Industrial Way | | | |
| | City: Palmer | State: AK | Zip: 99645 | |

Signature

Date: 1/24/17

## X. NOI Preparer *(Complete if NOI was prepared by someone other than the certifier.)*

| Organization: | Name: | Title: |
|---|---|---|
| | | |

| Phone: | Fax (optional): | Email: |
|---|---|---|
| | | |

| Mailing Address: | Street (PO Box): | | |
|---|---|---|---|
| | City: | State: | Zip: |

## XI. Document Attachments and Supplemental Information

Documents attached with this application:

☐ Copy of SWPPP if ≥ 5 acres of disturbance.

☐ Delegation of Signatory Authority.

Attachment 1. (Fill in as necessary if more space is required for Receiving water and Wetlands Information.)

| a. What is the name(s) of your receiving water(s) that receive storm water directly and/or through a MS4?<br>If your receiving water is impaired, then identify the name of the impaired segment, if applicable, in parenthesis following the receiving water name. | b. Are any of your discharges directly into any segment of an "impaired" water? | | c. If you answered yes to question b, then answer the following three questions: | | | | |
|---|---|---|---|---|---|---|---|
| | | | i. What pollutant(s) are causing the impairment? | ii. Are the pollutant(s) causing the impairment present in your discharge? | | iii. Has the TMDL been completed for the pollutant(s) causing the impairment? | |
| | Yes | No | | Yes | No | Yes | No |
| | ☐ | ☐ | | ☐ | ☐ | ☐ | ☐ |
| | ☐ | ☐ | | ☐ | ☐ | ☐ | ☐ |
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## Instructions for Completing a Notice of Intent (NOI) Form for Storm Water Discharges Associated with Construction Activity under an APDES Construction General Permit

**Who Must File an NOI Form:**

Operators of construction sites where one or more acres are disturbed, smaller sites that are part of a larger common plan of development or sale where there is a cumulative disturbance of at least one acre, or any other site specifically designated by the Director, must submit an NOI to obtain coverage under an APDES construction general permit. Each person, firm, public organization, or any other entity that meets either of the following criteria must file this form: (1) they have operational control over construction plans and specifications, including the ability to make modifications to those plans and specifications; or (2) they have day-to-day operational control of those activities at the project necessary to ensure compliance with SWPPP requirements or other permit conditions.

**Completing the Form:**

Obtain and read a copy of the APDES Construction General Permit. Type or print, in the appropriate areas only. "NA" can be entered in areas that are not applicable. If you have any questions about how or when to use this form, contact the DEC Storm Water Program at (907) 269-6285 or online at http://www.dec.state.ak.us/water/wnpspc/stormwater.

**Section I. Single/Multiple NOI Project:**

Indicate whether or not this is a single NOI project. If not, indicate if the fee will be paid with this NOI or another associated with this project. Provide the name of the operator that will be paying the fee.

**Section II. Operator Information:**

Provide the name of the contact person, title, and the legal name of the firm, public organization, or any other entity that operates the project described in this application. (An operator of a project is a legal entity that controls at least a portion of site operations and is not necessarily the site manager.) Also provide the operator's mailing address, telephone number, fax number (optional) and e-mail address (to be notified via e-mail of NOI approval when available). Correspondence for the NOI will be sent to this address.

**Section III. Billing Contact Information**

Provide the name of the contact person, title, and the legal name of the firm, public organization, or any other entity that is responsible for accounts payable for this project. Also provide the billing contact's mailing address, telephone number, fax number (optional), and email address. Correspondence for billing purposes will be sent to this address. If the billing contact is that same as the operator, check the box.

**Section IV. Project/Site Information:**

Enter the official or legal name, a brief description of the project or site, and complete street address, including city, state, zip code, and county or similar government subdivision of the project or site. If the project or site lacks a street address, indicate the general location of the site (e.g., Intersection of State Highways 61 and 34). Complete site information must be provided for permit authorization to be granted.

Provide the latitude and longitude of the facility in decimal degrees format with up to 5 digit accuracy. The latitude and longitude of your facility can be determined in several different ways, including through the use of global positioning system (GPS) receivers, U.S. Geological Survey (U.S.G.S.) topographic or quadrangle maps, Google Earth, Bing Maps, and EPA's web-based siting tools, among others. For consistency, DEC requests that measurements be taken from the approximate center of the construction site. Applicants must specify which method they used to determine latitude and longitude. If a U.S.G.S. topographic map is used, applicants are required to specify the scale of the map used. Enter the estimated construction start and completion dates using four digits for the year (i.e., 05/27/2016).

Enter the estimated area (acres) to be disturbed including but not limited to: grubbing, excavation, grading, and utilities and infrastructure installation. Indicate to the nearest tenth of an acre. Note: 1 acre = 43,560 sq. ft.

Indicate whether or not the project/site has been previously covered by an EPA or DEC permit. If "Yes" provide the permit authorization number that the project/site was covered under.

If this is a project that was covered under a previous DEC construction general permit indicate whether or not the SWPPP has been updated in accordance with the 2016 Alaska Construction General Permit.

If the project or site is less than one-acre, but part of a common plan of development, provide the permit authorization number and name of the common plan of development.

**Section V. SWPPP (Storm Water Pollution Prevention Plan) Information:**

Indicate whether or not the SWPPP was prepared in advance of filing the NOI form. For projects with 5 acres or more of disturbance, has a SWPPP been submitted to DEC (Part 2.1.3)? Check the appropriate box for the location where the SWPPP may be viewed. Provide the name, fax number (optional), and e-mail address of the contact person if different than that listed in Section II of the NOI form.

**Section VI. Permanent Storm Water Controls**

A permittee must comply with applicable APDES MS4 permit requirements, local requirements, and the applicable requirements under 18 AAC 72.600 (i.e., Nondomestic Wastewater System Plan Review) regarding the design and installation of permanent storm water management controls. Annotate the type of measure to be installed, and see Permit Part 4.11 for additional requirements regarding plan submittal deadlines.

**Section VII. Discharge Information:**

Identify the receiving water bodies or wetlands to which the project's storm water will discharge. These should be the first bodies of water that the discharge will reach. (Note: If you

discharge to more than one water body, please indicate all such waters in the space provided and attach a separate sheet if necessary.) For example, if the discharge leaves your site and travels through a roadside swale or a storm sewer and then enters a stream that flows to a river, the stream would be the receiving water body. Waters of the U.S. include lakes, streams, creeks, rivers, wetlands, impoundments, estuaries, bays, oceans, and other surface bodies of water within the confines of the U.S. and U.S. coastal waters. (Waters of the U.S. do not include man-made structures created solely for the purpose of wastewater treatment.) U.S.G.S. topographical maps may be used to make this determination. If the map does not provide a name, use a format such as "unnamed tributary to Cross Creek". If you discharge into a municipal separate storm sewer system (MS4), you must identify the water body into which that portion of the storm sewer discharges. That information should be readily available from the operator of the MS4.

Indicate if any of your storm water discharges from construction activities will be reach a 303d listed water (i.e., impaired water body)?
For a listing of impaired waters and an interactive map, see http://dec.alaska.gov/water/wqsar/Docs/impairedwaters.pdf or http://dec.alaska.gov/water/wqsar/map.html.

Indicate whether your storm water discharges from construction activities will be consistent with the assumptions and requirements of applicable EPA approved or established total maximum daily load(s)(TMDL(s)). To answer this question, refer to http://dec.alaska.gov/water/tmdl/tmdl_index.htm for specific TMDL information related to the construction general permit. You may also have to contact DEC. If there are no applicable TMDLs or no related requirements, please check the "yes" box in the NOI form.

**Section VIII. Treatment Chemicals:**

Indicate whether or not polymers, flocculants, or other treatment chemicals will be used. If you are unsure at the filing of the NOI, check "No" and then if you use them file an NOI Modification form indicating "Yes."

Check the box next to any treatment chemical that will be used. If "Other" is checked, list the treatment chemicals.

**Section IX. Certification Information:**

The NOI must be signed as follows:

(1) For a corporation, a responsible corporate officer shall sign the NOI, a responsible corporate officer means:
   (A) a president, secretary, treasurer, or vice-president of the corporation in charge of a principal business function, or any other person who performs similar policy - or decision-making functions for the corporation; or
   (B) the manager of one or more manufacturing, production, or operating facilities, if
      (i) the manager is authorized to make management decisions that govern the operation of the regulated facility, including having the explicit or implicit duty of making major capital investment recommendations, and initiating and directing other comprehensive measures to assure long term environmental compliance with environmental statutes and regulations;
      (ii) the manager can ensure that the necessary systems are established or actions taken to gather complete and accurate information for permit application requirements; and
      (iii) authority to sign documents has been assigned or delegated to the manager in accordance with corporate procedures.

(2) For a partnership or sole proprietorship, the general partner or the proprietor, respectively; or

(3) for a municipality, state, or other public agency, either a principal executive officer or ranking elected official shall sign the application; in this subsection, a principal executive officer of an agency means
   (A) the chief executive officer of the agency; or
   (B) a senior executive officer having responsibility for the overall operations of a principal geographic unit or division of the agency.

(4) Include the name, title, organization, address, telephone number, and email address of the person signing the form and the date of signing. An unsigned or undated NOI form will not be considered valid application for permit coverage.

**Section X. NOI Preparer Information.**

If the NOI was prepared by someone other than the certifier (for example, if the NOI was prepared by the project SWPPP contact or a consultant for the certifier's signature), include the name, title, organization, address, telephone number, and email address of the NOI preparer.

**Section XI. Document Attachments and Supplemental Information**

Include a copy of the SWPPP if ≥ 5 acres of disturbance. Indicate documents attached and supplemental information.

**Where to File NOI form**

Select one of three options:

1) **Preferred Option**: DEC encourages you to complete the NOI form electronically via DEC's Online Application System (OASys): https://myalaska.state.ak.us/dec/water/OASys/Login.aspx. Filing electronically is the fastest way to obtain permit coverage and help ensure that your NOI is complete.

2) If you file by mail please submit the original form with a signature in ink. Remember to retain a copy for your records.

   NOIs sent by mail:
   Alaska Dept. of Environmental Conservation
   Division of Water
   Wastewater Discharge Authorization Program
   555 Cordova Street
   Anchorage, AK 99501
   Phone: (907) 269-6285

3) Submit all pages of scanned original form via Email: DEC.Water.WQPermit@alaska.gov. *(Note, 20MB limit).*