



THE STATE  
of **ALASKA**  
GOVERNOR BILL WALKER

## Department of Environmental Conservation

DIVISION OF WATER  
Wastewater Discharge Authorization Program

555 Cordova Street  
Anchorage, Alaska 99501-2617  
Phone: 907.269.6285  
fax: 907.334.2415

February 10, 2016

Company: Eklutna Services LLC  
ATTN: Nick Francis  
10950 Mausel Street, Unit B1  
Eagle River, AK 99577

Facility:  
Banner Creek Bridge Replacement  
MP 295 Richardson Hwy  
Delta Junction, AK 99737

Permit Number: AKR10FC00

This email/letter acknowledges that you have submitted a 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 seven (7) calendar days after acknowledgment of receipt of the permittee's completed NOI is posted on ADEC's Storm Water Permit Search website (<http://dec.alaska.gov/Applications/Water/WaterPermitSearch/Search.aspx>). Coverage under this permit begins seven-days from the 'Date Issued' on the Water Permit Search.

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://dec.alaska.gov/water/wnpssc/stormwater/index.htm>.

For tracking purposes, the following number has been assigned to your Notice of Intent Form:  
AKR10FC00.

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



## 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.

<b>I. Single/Multiple NOI Project</b>			
Is this NOI for a project with a single NOI?			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If "No," then your project has multiple NOIs, will the fee be paid with this NOI?			<input type="checkbox"/> Yes <input type="checkbox"/> No
If "No," then enter the name of the operator paying the fee:			
<b>II. Operator Information</b>			
Organization: Eklutna Services LLC		Name: Nick Francis	Title: Chief Operating Officer
Phone: 907-696-3838	Fax (optional):	Email: submittals@eklutnainc.com	
Mailing Address:	Street (PO Box): 10950 Mausel Street, Unit B1		
	City: Eagle River	State: Alaska	Zip: 99577
<b>III. Billing Contact Information</b>			
Organization: Eklutna Services LLC		Name: Bryce Hattenburg	Title: Project Engineer
Phone: 907-696-3838	Fax (optional):	Email: bhattenburg@eklutnainc.com	
Mailing Address:	Street (PO Box): 10950 Mausel Street, Unit B1		
<input type="checkbox"/> Check if same as Operator Information	City: Eagle Rive	State: Alaska	Zip: 99577
<b>IV. Project / Site Information</b>			
Project Name: Banner Creek Bridge Replacement		Estimated Start Date: 06/08/2015	Estimated End Date: 10/31/2016
Brief Description of Project:  Replace existing Banner Creek bridge with new 200' double span bridge.		Estimated Area to be Disturbed ( <i>nearest tenth acre</i> ): 8.5	
Is your project / site less than one-acre, but part of a common plan of development?			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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?			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Location Address:	Street: Mile post 295 Richardson Highway	Borough or similar government subdivision: Fairbanks North Star	
	City: Delta Junction	State: Alaska	Zip: 99737
Latitude (decimal degree, 5 places): 64.28930	Longitude (decimal degree, 5 places): -146.35180	Determined By: <input type="checkbox"/> GPS <input type="checkbox"/> Web Map, Source:	<input type="checkbox"/> USGS Topo Map, Scale: <input checked="" type="checkbox"/> Other: Google Maps

**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: \_\_\_\_\_ Zip: \_\_\_\_\_

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

Organization: Eklutna Services LLC Name: Mike Dunegan Title: Superintendent

Phone: 907-854-3505 Fax (optional): \_\_\_\_\_ Email: mdunegan@eklutnainc.com

Mailing Address:  Check if same as Operator Information Street (PO Box): 10950 Mausel Street, Unit B1

City: Eagle River State: Alaska Zip: 99577

**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.)

a. Identify the name(s) of waterbodies or wetlands to which you discharge.	Impaired waters/303d Listed waters: (see <a href="http://dec.alaska.gov/water/wqsar/Docs/impairdwaters.pdf">http://dec.alaska.gov/water/wqsar/Docs/impairdwaters.pdf</a> or <a href="http://dec.alaska.gov/water/wqsar/map.html">http://dec.alaska.gov/water/wqsar/map.html</a> , and <a href="http://dec.alaska.gov/water/tmdl/tmdl_index.htm">http://dec.alaska.gov/water/tmdl/tmdl_index.htm</a> .)							
	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:				iii. Is the discharge consistent with the assumptions and requirements of applicable EPA approved or established Total Maximum Daily Load (TMDL(s))?	
	Yes	No	i. What pollutant(s) are causing the impairment?		ii. Are the pollutant(s) causing the impairment present in your discharge?		Yes	No
Banner Creek	<input type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input checked="" type="checkbox"/>	<input type="checkbox"/>
Tanana River	<input type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input checked="" type="checkbox"/>	<input type="checkbox"/>
Adjacent Wetlands	<input type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input checked="" type="checkbox"/>	<input type="checkbox"/>
Un-named Tributary Drainages	<input type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input checked="" type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>	<input type="checkbox"/>

**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://dec.alaska.gov/commish/regulations/pdfs/18 AAC 83.pdf>

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

<input type="checkbox"/> 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.
<input checked="" type="checkbox"/> Corporate Operations Manager	18 AAC 83.385 (a)(1)(B)	For a corporation, the manager of one or more manufacturing, production, or operating facilities.
<input type="checkbox"/> Sole Proprietor or General Partner	18 AAC 83.385 (a)(2)	For a partnership or sole proprietorship, the general partner or the proprietor respectively.
<input type="checkbox"/> 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.
<input type="checkbox"/> 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.
<input type="checkbox"/> 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.
<input type="checkbox"/> 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](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: Eklutna Services LLC	Name: Nick Francis	Title: Chief Operating Officer
Phone: 907-696-3838	Fax (optional):	Email: submittals@eklutnainc.com
Mailing Address: <input type="checkbox"/> Check if same as Operator Information	Street (PO Box): 10950 Mausel Street, Unit B1	State: AK
City: Eagle River	Zip: 99577	
Signature 	Date 2/8/15	

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

Organization: Eklutna Services LLC	Name: Bryce Hattenburg	Title: Project Engineer
Phone: 907-696-3838	Fax (optional):	Email: bhattenburg@eklutnainc.com
Mailing Address: <input checked="" type="checkbox"/> Check if same as Operator Information	Street (PO Box):	State:
City:	Zip:	

**XI. Document Attachments and Supplemental Information**

Documents attached with this application:

- Copy of SWPPP if ≥ 5 acres of disturbance.  
 Delegation of Signatory Authority.



## 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.)

<b>Current NOI Information</b>
I. Permit Authorization Number: AKR10FC00

<b>II. Operator Information (as it appears on your NOI):</b>			
Organization: Eklutna Services LLC	Contact Person Name: Nick Francis	Title: Chief Operating Officer	
Phone: (907) 696-3838	Fax (optional):	Email: submittals@eklutnainc.com	
Mailing Address:	Street (PO Box): 10950 Mausel Street, Unit B1		
	City: Eagle River	State: Alaska	Zip: 99577

<b>III. Project / Site Information (as it appears on your NOI):</b>			
Project / Site Name: Banner reek Bridge Replacement	Estimated Start Date: 06/08/2015	Estimated End Date: 10/31/2016	
Brief Description of the Project:	Estimated Area to be Disturbed (nearest tenth acre): 8.5		
Replace existing Banner Creek Bridge with new 200' double span bridge.			
Location	Street: Mile post 295 Richardson Highway	Latitude (decimal degree, 5 places): 64.28930	Longitude (decimal degree, 5 places): -146.35180
Address:	City: Delta Junction	State: Alaska	Zip: 99737
		Borough or similar government subdivision: Fairbanks Northstar	

<b>Instructions for Completing a Modification to an APDES Notice of Intent (NOI)</b>
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) 269-6285.
<p><b>When Should You Modify Your Notice of Intent (NOI)?</b></p> <ul style="list-style-type: none"> <li>• You can use this form to update or correct information on your NOI, including:</li> <li>• Owner/Operator address and contact information</li> <li>• Site Information</li> <li>• Start or End dates</li> <li>• Number of acres to be disturbed</li> </ul> <p><i>(Note, if the original project disturbance was between 1 and &lt; 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.)</i></p> <ul style="list-style-type: none"> <li>• Storm Water Pollution Prevention Plan (SWPPP) location and contact information</li> <li>• Continuation of expired permit in accordance with Part 2.6.</li> </ul>
<p><b>When must you Submit a Notice of Termination (NOT) Instead of a Modification Form?</b></p> <ul style="list-style-type: none"> <li>• 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.</li> </ul>



## 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.

<b>I. Single/Multiple NOI Project</b>	
Is this NOI for a project with a single NOI?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If "No," then your project has multiple NOIs, will the fee be paid with this NOI?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If "No," then enter the name of the operator paying the fee:	

<b>II. Operator Information</b>			
Organization: Eklutna Services LLC		Name: Nick Francis	Title: Chief Operating Officer
Phone: (907) 696-3838	Fax (optional):	Email: submittals@eklutnainc.com	
Mailing Address:	Street (PO Box): 10950 Masuel Street, Unit B-1		City: Eagle River
	State: Alaska	Zip: 99577	

<b>III. Billing Contact Information</b>			
Organization: Eklutna Services LLC		Name: Bryce Hattenburg	Title: Project Engineer
Phone: (907) 696-3838	Fax (optional):	Email: bhattenburg@eklutnainc.com	
Mailing Address:	Street (PO Box):		City:
<input checked="" type="checkbox"/> Check if same as Operator Information	State:	Zip:	

<b>IV. Project / Site Information</b>		
Project Name: Banner Creek Bridge Replcement	Estimated Start Date: 6/8/2015	Estimated End Date: 10/31/2016
Brief Description of Project:	Estimated Area to be Disturbed ( <i>nearest tenth acre</i> ): 9.9	
Replace existing Banner Creek Bridge with new 200' double span bridge, install temporary detour, and construct material haul route.		

Is your project / site less than one-acre, but part of a common plan of development?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If "Yes," provide the Permit Authorization Number for the previous DEC permit?		
If "Yes," have you updated your SWPPP according to the most recently issued CGP?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Location Address:	Street: Milepost 295 Richardson Highway	Borough or similar government subdivision: Fairbanks North Star	
	City: Delta Junction	State: Alaska	Zip: 99737
Latitude (decimal degree, 5 places): 64.28930	Longitude (decimal degree, 5 places): -146.35180	Determined By: <input type="checkbox"/> GPS <input checked="" type="checkbox"/> Web, Source: Google Maps	
		<input type="checkbox"/> USGS Topographic Map, scale:	
		<input type="checkbox"/> Other:	

<b>V. SWPPP (Storm Water Pollution Prevention Plan)</b>									
Has the SWPPP been prepared in advance of filing this NOI?						<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		
For projects with 5 or more acres of disturbance, has a SWPPP been submitted to DEC?						<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No, ≤ 5 acres		
Location of SWPPP for Viewing:						<input type="checkbox"/> Address in Section II	<input checked="" type="checkbox"/> Address in Section IV	<input type="checkbox"/> Other	
If other:		Street:							
		City:		State:		Zip:			
<b>SWPPP Contact Information</b> (if different than that in Section II):									
Organization: Eklutna Services LLC			Name: Mike Dunegan			Title: Superintendent			
Phone: (907) 854-3505		Fax (optional):		Email: mdunegan@eklutninc.com					
Mailing Address: <input checked="" type="checkbox"/> Check if same as Operator Information		Street (PO Box):							
		City:		State:		Zip:			
<b>VI. Permanent Storm Water Controls</b>									
Will you construct a permanent storm water management control measure at the project site (Part 4.11)?						<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
If "Yes", indicate the type of measure to be installed:									
<input type="checkbox"/> Pond		<input type="checkbox"/> Oil/Water/Grit Separator		<input type="checkbox"/> Proprietary Storm Water Sedimentation Device					
<input type="checkbox"/> Other:									
<b>VII. Discharge Information</b>									
Does your project discharge into a Municipal Separate Storm Sewer System (MS4)?						<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
If yes, name of the MS4 Operator:									
<b>Receiving Water and Wetlands Information:</b> (if additional space is needed for this question, attach separate sheet or annotate in Section XI.)									
<b>Impaired waters/303d Listed waters:</b> (see <a href="http://dec.alaska.gov/water/wqsar/Docs/impairedwaters.pdf">http://dec.alaska.gov/water/wqsar/Docs/impairedwaters.pdf</a> or <a href="http://dec.alaska.gov/water/wqsar/map.html">http://dec.alaska.gov/water/wqsar/map.html</a> , and <a href="http://dec.alaska.gov/water/tmdl/tmdl_index.htm">http://dec.alaska.gov/water/tmdl/tmdl_index.htm</a> .)									
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	
Banner Creek		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Tanana River		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Adjacent Wetlands		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Un-named Tributary Drainages		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
		<input type="checkbox"/> Yes <input type="checkbox"/> No				<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>VIII. Treatment Chemicals</b>									
Will you use control measures such as polymers, flocculants or other treatment chemicals at your construction site?						<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
<i>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."</i>									
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:					

**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 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, 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.
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.
<p><i>*For Delegated Authority: the delegation must be made in writing and submitted to the DEC. An Example of written authorization delegating authority can be found on the Division of Water website: <a href="http://dec.alaska.gov/Water/OASysHelp/attachments/Delegation_Authorization_Form.pdf">http://dec.alaska.gov/Water/OASysHelp/attachments/Delegation_Authorization_Form.pdf</a></i></p>	
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.

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: Eklutna Services LLC	Name: Nick Francis	Title: Chief Operating Officer
Phone: (907) 696-3838	Fax (optional):	Email: submittals@eklutnainc.com
Mailing Address: <input checked="" type="checkbox"/> Check if same as Operator Information	Street (PO Box):	City:
		State:
		Zip:
Signature 		Date 6/14/2016

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

Organization: Eklutna Services LLC	Name: Bryce Hattenburg	Title: Project Engineer
Phone: (907) 696-3838	Fax (optional):	Email: bhattenburg@eklutnainc.com
Mailing Address: <input checked="" type="checkbox"/> Check if same as Operator Information	Street (PO Box):	City:
		State:
		Zip:

**XI. Document Attachments and Supplemental Information**

Documents attached with this application: <input type="checkbox"/> Copy of SWPPP if ≥ 5 acres of disturbance. <input type="checkbox"/> Delegation of Signatory Authority.	<input type="checkbox"/> Other:
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## 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.)

<b>Current NOI Information</b>
I. Permit Authorization Number: AKR10FC00

<b>II. Operator Information (as it appears on your NOI):</b>			
Organization: Eklutna Services LLC	Contact Person Name: Nick Francis	Title: Chief Operating Officer	
Phone: (907) 696-3838	Fax (optional):	Email: submittals@eklutnainc.com	
Mailing Address:	Street (PO Box): 10950 Mausel Street, Unit B1		
	City: Eagle River	State: Alaska	Zip: 99577

<b>III. Project / Site Information (as it appears on your NOI):</b>			
Project / Site Name: Banner reek Bridge Replacement	Estimated Start Date: 06/08/2015	Estimated End Date: 10/31/2016	
Brief Description of the Project:	Estimated Area to be Disturbed (nearest tenth acre): 9.9		
Replace existing Banner Creek Bridge with new 200' double span bridge, install temporary detour, and construct material haul route.			
Location	Street: Mile post 295 Richardson Highway	Latitude (decimal degree, 5 places): 64.28930	Longitude (decimal degree, 5 places): -146.35180
Address:	City: Delta Junction	State: Alaska	Zip: 99737
Borough or similar government subdivision: Fairbanks Northstar			

<b>Instructions for Completing a Modification to an APDES Notice of Intent (NOI)</b>
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) 269-6285.
<b>When Should You Modify Your Notice of Intent (NOI)?</b>
<ul style="list-style-type: none"> <li>• You can use this form to update or correct information on your NOI, including:</li> <li>• Owner/Operator address and contact information</li> <li>• Site Information</li> <li>• Start or End dates</li> <li>• Number of acres to be disturbed (Note, if the original project disturbance was between 1 and &lt; 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.)</li> <li>• Storm Water Pollution Prevention Plan (SWPPP) location and contact information</li> <li>• Continuation of expired permit in accordance with Part 2.6.</li> </ul>
<b>When must you Submit a Notice of Termination (NOT) Instead of a Modification Form?</b>
<ul style="list-style-type: none"> <li>• 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.</li> </ul>



## 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.

<b>I. Single/Multiple NOI Project</b>			
Is this NOI for a project with a single NOI?			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If "No," then your project has multiple NOIs, will the fee be paid with this NOI?			<input type="checkbox"/> Yes <input type="checkbox"/> No
If "No," then enter the name of the operator paying the fee:			
<b>II. Operator Information</b>			
Organization: Eklutna Services LLC		Name: Nick Francis	Title: Chief Operating Officer
Phone: (907) 696-3838	Fax (optional):	Email: submittals@eklutnainc.com	
Mailing Address:	Street (PO Box): 10950 Masuel Street, Unit B-1		City: Eagle River
	State: Alaska	Zip: 99577	
<b>III. Billing Contact Information</b>			
Organization: Eklutna Services LLC		Name: Bryce Hattenburg	Title: Project Engineer
Phone: (907) 696-3838	Fax (optional):	Email: bhattenburg@eklutnainc.com	
Mailing Address:	Street (PO Box):		City:
<input checked="" type="checkbox"/> Check if same as Operator Information	State:	Zip:	
<b>IV. Project / Site Information</b>			
Project Name: Banner Creek Bridge Replcement		Estimated Start Date: 6/8/2015	Estimated End Date: 08/31/2017
Brief Description of Project: Replace existing Banner Creek Bridge with new 200' double span bridge, install temporary detour, and construct material haul route.		Estimated Area to be Disturbed (nearest tenth acre): 9.9	
Is your project / site less than one-acre, but part of a common plan of development?			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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?			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If "Yes," provide the Permit Authorization Number for the previous DEC permit?			
If "Yes," have you updated your SWPPP according to the most recently issued CGP?			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Location Address:	Street: Milepost 295 Richardson Highway	Borough or similar government subdivision: Fairbanks North Star	
	City: Delta Junction	State: Alaska	Zip: 99737
Latitude (decimal degree, 5 places):	Longitude (decimal degree, 5 places):	Determined By: <input type="checkbox"/> GPS <input checked="" type="checkbox"/> Web, Source: Google Maps	
64.28930	-146.35180	<input type="checkbox"/> USGS Topographic Map, scale: <input type="checkbox"/> Other:	

<b>V. SWPPP (Storm Water Pollution Prevention Plan)</b>											
Has the SWPPP been prepared in advance of filing this NOI?						<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No				
For projects with 5 or more acres of disturbance, has a SWPPP been submitted to DEC?						<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No, ≤ 5 acres				
Location of SWPPP for Viewing:						<input type="checkbox"/> Address in Section II	<input checked="" type="checkbox"/> Address in Section IV	<input type="checkbox"/> Other			
If other:		Street:									
		City:		State:		Zip:					
<b>SWPPP Contact Information</b> (if different than that in Section II):											
Organization: Eklutna Services LLC			Name: Mike Dunegan			Title: Superintendent					
Phone: (907) 854-3505		Fax (optional):		Email: mdunegan@eklutninc.com							
Mailing Address: <input checked="" type="checkbox"/> Check if same as Operator Information		Street (PO Box):									
		City:		State:		Zip:					
<b>VI. Permanent Storm Water Controls</b>											
Will you construct a permanent storm water management control measure at the project site (Part 4.11)?						<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No				
If "Yes", indicate the type of measure to be installed:											
<input type="checkbox"/> Pond		<input type="checkbox"/> Oil/Water/Grit Separator		<input type="checkbox"/> Proprietary Storm Water Sedimentation Device							
<input type="checkbox"/> Other:											
<b>VII. Discharge Information</b>											
Does your project discharge into a Municipal Separate Storm Sewer System (MS4)?						<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No				
If yes, name of the MS4 Operator:											
<b>Receiving Water and Wetlands Information:</b> (if additional space is needed for this question, attach separate sheet or annotate in Section XI.)											
<b>Impaired waters/303d Listed waters:</b> (see <a href="http://dec.alaska.gov/water/wqsar/Docs/impairedwaters.pdf">http://dec.alaska.gov/water/wqsar/Docs/impairedwaters.pdf</a> or <a href="http://dec.alaska.gov/water/wqsar/map.html">http://dec.alaska.gov/water/wqsar/map.html</a> , and <a href="http://dec.alaska.gov/water/tmdl/tmdl_index.htm">http://dec.alaska.gov/water/tmdl/tmdl_index.htm</a> .)											
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?  Yes      No		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	
Banner Creek		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No						<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Tanana River		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No						<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Adjacent Wetlands		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No						<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Un-named Tributary Drainages		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No						<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
		<input type="checkbox"/> Yes <input type="checkbox"/> No						<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>VIII. Treatment Chemicals</b>											
Will you use control measures such as polymers, flocculants or other treatment chemicals at your construction site?						<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No				
<i>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."</i>											
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:							

**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 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, 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.
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.
<p><i>*For Delegated Authority: the delegation must be made in writing and submitted to the DEC. An Example of written authorization delegating authority can be found on the Division of Water website: <a href="http://dec.alaska.gov/Water/OASysHelp/attachments/Delegation_Authorization_Form.pdf">http://dec.alaska.gov/Water/OASysHelp/attachments/Delegation_Authorization_Form.pdf</a></i></p>	
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.

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: Eklutna Services LLC	Name: Nick Francis	Title: Chief Operating Officer
Phone: (907) 696-3838	Fax (optional):	Email: submittals@eklutnainc.com
Mailing Address: <input checked="" type="checkbox"/> Check if same as Operator Information	Street (PO Box):	City: State: Zip:
Signature: 		Date: 9/28/16

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

Organization: Eklutna Services LLC	Name: Bryce Hattenburg	Title: Project Engineer
Phone: (907) 696-3838	Fax (optional):	Email: bhattenburg@eklutnainc.com
Mailing Address: <input checked="" type="checkbox"/> Check if same as Operator Information	Street (PO Box):	City: State: Zip:

**XI. Document Attachments and Supplemental Information**

Documents attached with this application:	<input type="checkbox"/> Other:
<input type="checkbox"/> Copy of SWPPP if ≥ 5 acres of disturbance.	
<input type="checkbox"/> Delegation of Signatory Authority.	