STATE OF ALASKA

DEPT. OF ENVIRONMENTAL CONSERVATION
DIVISION OF WATER
WASTEWATER DISCHARGE AUTHORIZATION PROGRAM

SEAN PARNELL, GOVERNOR
555 Cordova
Anchorage, Alaska 99501-2617
PHONE: (907) 269-6285
FAX: (907) 334-2415

5/11/2010 1:16:34 PM

Company: Providence Alaska Medical Center
ATTN: Kevin Prange
3760 Piper Street Suite 2015
Anchorage AK 99508

Facility:
Emergency Power Supply System
3200 Providence Drive
Anchorage AK 99508

Permit Number: AKR10DD73

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 5/18/2010 .

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://www.dec.state.ak.us/water/wnpspc/stormwater/stormwater.htm.

For tracking purposes, the following number has been assigned to your Notice of Intent Form: AKR10DD73.

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.

For Agency Use
Permit # AKR10DD73

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 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 I of this form meets the eligibility requirements of the CGP for the project identified in Section II 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. Operator Information

Organization: Providence Alaska Medical Center

Contact Person: Kevin Prange

Mailing Address:

Street (PO Box): 3760 Piper Street Suite 2015

City: Anchorage State: AK Zip: 99508

Phone: 907 212-7912 Fax(optional):

Email:

II. Billing Contact Information

Organization: Providence Alaska Medical Center

Contact Person: Kevin Prange

Mailing Address:

[ ] Check if same as Operator Information.

Street (PO Box): 3760 Piper Street Suite 2015

City: Anchorage State: AK Zip: 99508

Phone: 907 212-7912 Fax(optional):

Email:

III. Project/Site Information

Project/Site Name: Emergency Power Supply System

Project Street/Location: 3200 Providence Drive

City: Anchorage State: AK Zip: 99508

Borough or similar government subdivision: Anchorage

Latitude: 61.188333 Longitude: 149.8225

Determined By: ☐ GPS ☐ USGS topographic map ☑ Other: USGS Mapper

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

Estimated Project Start Date: 5/4/2010 Estimated Project Completion Date: 3/9/2012

Estimated Area to be Disturbed (to the nearest quarter acre): 3

For Agency Use
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IV. 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 I ☐ Address in Section III ☐ Other

If other:

SWPPP Street:

City: State: AK Zip:

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

Name: Kevin Prange

Phone: 907 212-7912 Fax(optional):

Email:

V. Discharge Information

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

Chester Creek South Fork

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

VI. Endangered Species Protection

Under which criterion of Part 1.3.3.6 of the permit have you satisfied your ESA eligibility obligations?

☑ A ☐ B ☐ C ☐ D ☐ E ☐ F

If you select criterion F, provide permit tracking number of operator under which you are certifying eligibility:

VII. 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: Kevin Prange Title: Construction Project Manager

Signature: Kevin Prange Date: 5/11/2010 1:16:34 PM Email:

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

Prepared By: Kevin Prange

Organization: Providence Alaska Medical Center

Phone: 907 212-7912 Email:

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 ADEC Storm Water Program at (907) 269-6285 or online at http://www.dec.state.ak.us/water/wnpspc/stormwater/.

Section I. Operator Information:
Provide the name of the contact person, 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 II. Billing Contact Information
Provide the name of the contact person, 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 and continue to Section III Project/Site Information.

Section III. Project/Site Information:
Enter the official or legal name 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 coverage to be granted.

The applicant must also provide the latitude and longitude of the facility either in degrees, minutes, seconds; degrees, minutes, decimal; or decimal format. 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, and EPA's web-based siting tools, among others. Refer to www.epa.gov/npdes/stormwater/cgp for further guidance on the use of these methodologies. For consistency, ADEC 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., 05/27/2009).

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

Section IV. SWPPP (Storm Water Pollution Prevention Plan) Information:
Indicate whether or not the SWPPP was prepared in advance of filing the NOI form. 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 I of the NOI form.

Section V. Discharge Information:
Enter the name(s) of receiving water bodies 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 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 www.epa.gov/npdes/stormwater/cgp for state- and regional-specific TMDL information related to the construction general permit. You may also have to contact ADEC. If there are no applicable TMDLs or no related requirements, please check the "yes" box in the NOI form.

Section VI. Endangered Species Information:
Indicate for which criterion (i.e., A, B, C, D, E, or F) of the permit the applicant is eligible with regard to protection of federally listed endangered and threatened species and designated critical habitat. See Part 1.3.3.6 and Appendix C of the permit. If you select criterion F, provide the permit tracking number of the operator under which you are certifying eligibility. The permit tracking number is the number assigned to the operator by ADEC Storm Water Program after ADEC's acceptance of the NOI.

Section VII. Certification Information:
The NOIs, 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.

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

Where to File NOI form

ADEC encourages you to complete the NOI form electronically via the Internet. ADEC's Online Application System (OASys) can be found at https://myalaska.state.ak.us/dec/water/opa . Filing electronically is the fastest way to obtain permit coverage and help ensure that your NOI is complete. If you choose not to file electronically, you must send the NOI to the address listed below.

If you file by mail, please submit the original form with a signature in ink. ADEC will not accept a photocopied signature. Remember to retain a copy for your records.

NOIs sent by mail:

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