Permit No:	
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NOTICE OF INTENT (NOI)

APDES General Permit for Aquaculture Facilities in Alaska General Permit No. AKG130000

Submittal of this document constitutes notice that the party identified in Section III requests authorization to be authorized to discharge pollutants to waters of the United States under the Alaska Pollutant Discharge Elimination System (APDES) General Permit for Aquaculture Facilities in Alaska and agrees to comply with all applicable terms and conditions of the general permit. To be granted coverage, all information required on this form must be completed. Please provide all information below and any other supplemental information sheets as appropriate. If you have any questions in regard to your eligibility for coverage under the general permit or completing this form, please visit http://dec.alaska.gov/water/wastewater.aspx for DEC contact information.

I. Facility Information					
Facility Name			Existing Permit N	No.	
Physical Location					
Mailing Address					
City		State		Z	ip
Latitude (decimal degree)	Longitude (decimal degree)		Determined By: ☐ ☐ Web, Source:	GIS 🗆	USGS Topographic Map Other
Email		Phone		F	ax
II. Owner Information					
Organization					
Contact Name		Title			
Mailing Address					
City		State		Z	ip
Email		Phone		F	ax
III. Operator/Permittee		☐ Check	if the same as Owner		
Organization					
On-Site Contact Name		Title			
Mailing Address					
City		State		Zi	p
Email		Phone		Fa	ıx .

IV. Billing Information							
Organization							
Contact Name			Title				
Mailing Address							
City			State		Zip		
Email Address			Phone		Fax		
V. Operational In	formation						
	operate year-roun	d?			☐ Yes ☐	No	
If no, what month	s does it operate?						
Production System Check all that app		Flow Through	□ F	Recirculating	☐ Net Pen	S	
Number of rearing	g units:	Flow Through		Recirculating	Net Pe	ns	
		Facili	ty Production				
List production site ty Attach extra sheets as	pe (i.e., flow through, re needed.	ecirculating, or net per	n) and corresponding	total annual releas	se weight for each pro	oduction site.	
Aquatic	Species		Site Type Total Annual Release Weight				
			en Information				
Aquatic Species	Water Depth	Latitude (decimal degree)	Longitude (decimal degree)	Months Held	Release Location	Release Date	
VI. Source Water	Information						
Source Water Nar		Maximum Flow (g	pd)		Average Flo	w (gpd)	
		-	•		_		
Is the source water treated prior to use?						No	
If yes, please desc	ribe the treatment	process.					

VII. Receiving Water Information								
ody Name(s)								
Is any receiving waterbody listed as "impaired" On the 303(d) list? Yes No For which Pollutant(s)?								
If yes, are the pollutant(s) causing the impairment present in your discharge? Yes No								
If yes, is the discharge consistent with the assumptions and requirements of the applicable Total Maximum Daily Load(s) (TMDLs)?								No
Discharge Char	acterization							
Terminus Depth	Latitude (decimal degree)	_			•		Average Daily Flow (gpd)	
Terminus Depth	Latitude			Maximum Dai	ly (lbs)		Maximum Ann	ual (lbs)
	(decimal degree)	(decimal deg	gree)					
Does the facility produce other wastewater streams (e.g., domestic)?							No	
If yes, please list other wastewater streams.								
Does the facility convert aquatic animals from a raw to marketable form? Yes No							No	
Is the operator requesting one or more Zone of Deposit?							No	
Is yes, please provide location(s): Latitude (decimal degree): Longitude (decimal degree):								
Does the facility have coverage under other DEC Division of Water Permits? If yes, please list below. Yes No								No
it	Authorization Nun	nber		Expiratio	on		Type of D	ischarge
	aterbody listed utant(s) causin arge consistent al Maximum Discharge Char Terminus Depth Terminus Depth Terminus Depth roduce other wastewater streation and a questing one or	aterbody listed as "impaired" utant(s) causing the impairment arge consistent with the assumption all Maximum Daily Load(s) (TMD Discharge Characterization Terminus Depth	aterbody listed as "impaired" Latitude (decimal degree) Terminus Depth Latitude (decimal degree) Latitude (decimal degree) Terminus Depth Latitude (decimal degree) Latitude (decimal degree) Terminus Depth Latitude (decimal degree) Latitude (decimal degree): Latitude (decimal degree): Latitude (decimal degree):	aterbody listed as "impaired"				

IX. Feed Use								
Site Name	Feed T	ype	Month of Maximum Feeding Maximum Mon		nthly Feed (pounds) Maxin		mum Annual Feed (pounds)	
X. Chemical U	Jse							
Drug or Che	mical		Reason for Use	Applicat	tion Method	Maximum Daily A	Amount	Frequency of Use
XI. Submittal will be deem			•	ired attach	ments. If they	are not attached	l to your	NOI, your application
Site map: Legible map(s) with coordinates of all flow through and recirculating sites and associated net pen sites. The Global Positioning System (GPS) coordinates (latitude and longitude) of each proposed outfall terminus and net pen site shall be provided in decimal degrees (North American Datum (NAD) 1983 or World Geodetic System (WGS) 1984 datum). The accuracy of coordinates shall be at least within ±50 feet (17 meters). Also indicate the location of all incoming water supplies.								
☐ Line Drawing. Must depict operational areas contributing waste and wastewater as well as non-process waters flowing to each outfall. Must also show all influent and effluent monitoring locations.								
Outfall Narrative. Must describe each type of process, operation, or production area that contributes waste and wastewater to the effluent for each outfall. Must also describe the treatment the wastewater receives, including the final disposal method for any wastes and wastewaters disposed of other than by discharge through an outfall.								
Request to Discharge in Excluded Area(s). A permittee may request to discharge to Excluded Area(s) listed in Part 1.2.4 or Part 1.2.5. To request authorization to discharge in one or more of these Excluded Area(s) (if not listed in Appendix D), the permittee must submit documentation to DEC that the discharge will not cause substantial habitat degradation (Part 1.2.4) or meets the criteria under Part 1.2.5.								
☐ Carcass Disposal Plan. Submit a plan describing how the facility disposes of mortality and broodstock carcasses and the proposed discharge location(s) (latitude and longitude). See Part 1.5.5 for specific plan requirements.								
☐ Mixing Zone Request. Applicants requesting any mixing zone(s). Include Form 2M for each outfall, and Form 2G.								
☐ Zone of Deposit Request. Applicants requesting a ZOD that is not included in or is modified from what is described in Appendix D must submit the information required in 18 AAC 70.210(b).								

XII. Certification	n								
	: Discharge Elimina	tion System (APDES) perm	it applicatio	n must	t be signed by an individual with the appropriate authority per				
<u>18 AAC 83.385</u> .									
Corporate Executiv	e Officer				on, a president, secretary, treasurer, or vice-president of the				
18 AAC 83.385 (a)(1)(A)		corporation	on in c	charge of a principal business function, or any other person				
			who perfo	orms si	similar policy- or decision-making functions for the corporation.				
Corporate Operation	ons Manager		For a corp	oratio	on, the manager of one or more manufacturing, production, or				
18 AAC 83.385 (a)(2	1)(B)		operating	operating facilities, if					
			(i) the ma	nager	is authorized to make management decisions that govern the				
			operation	of the	e regulated facility, including having the explicit or implicit				
			duty of m	aking ı	major capital investment recommendations, and initiating and				
			directing	other o	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 ta	ken to	gather complete and accurate information for permit				
			applicatio	n requ	uirements; and				
			(iii) autho	rity to	sign documents has been assigned or delegated to the				
			manager	in accc	ordance with corporate procedures.				
Sole Proprietor or 0	General Partner		For a part	nershi	ip or sole proprietorship, the general partner or the proprietor				
18 AAC 83.385 (a)(2	2)		respective	ely.					
Public Agency, Chie	f Executive Officer		For a mur	icipali	ity, state, or other public agency, the chief executive officer of				
18 AAC 83.385 (a)(3	3)(A)		the agenc	у.					
Public Agency, Seni	or Executive Office	er	For a mur	icipali	ity, state, or other public agency, a senior executive officer				
18 AAC 83.385 (a)(3	3)(B)		having res	sponsil	ibility for the overall operations of a principal geographic unit				
			or division	or division of the agency.					
I certify under p	enalty of law th	nat this document and	all attach	men	nts were prepared under my direction or				
· ·	•				ualified personnel properly gather and evaluate the				
1 -				•					
			-		ons who manage the system, or those persons				
	_	·			submitted is, to the best of my knowledge and				
belief, true, acc	urate, and com	plete. I am aware that	t there are	sign	nificant penalties for submitting false information,				
including the po	ssibility of fine	and imprisonment for	r knowing	viola	ations.				
PLEASE NOTE THAT	T AN INCOMPLETE	NOLOR MISSING ATTACH	FMFNTS WI	II DEI	LAY PROCESSING. DEC MAY REQUEST ADDITIONAL				
		TO DISCHARGE UNDER A			ATT HOCESSING, DECIMAL REQUEST ADDITIONAL				
Organization:		Name:		2:					
Phone:		Fax (optional):	Email:						
		(-1							
	1								
Mailing Address:	Street (PO Box):								
	City:	State:			Zip:				
Signature:					Date:				
Signature.					Date.				
Please email a	digital copy of t	he NOI to							
DEC.Water.Sea	foodPermitting	@alaska.gov							
If alastronic submittal is not available, places mail the NOI to:									
If electronic submittal is not available, please mail the NOI to:									
-		mental Conservation							
Wastewater Dis	charge Authori	zation Program							
Seafood and Aq	uaculture Perm	nitting							
555 Cordova St		5							

Anchorage, AK 99501