

STATE OF ALASKA

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MAR 13 2007

SARAH PALIN
GOVERNOR

DEPARTMENT OF NATURAL RESOURCES
OFFICE OF PROJECT MANAGEMENT AND PERMITTING
ALASKA COASTAL MANAGEMENT PROGRAM

SOUTHCENTRAL REGIONAL OFFICE
550 W 7th AVENUE SUITE 705
ANCHORAGE, ALASKA 99501
PH: (907) 269-7470 FAX (907) 269-3891

□ CENTRAL OFFICE
302 GOLD STREET, SUITE 202
P O Box 111030
JUNEAU, ALASKA 99801
PH (907) 465-3562 FAX (907) 465-3075

□ PIPELINE COORDINATOR'S OFFICE
411 WEST 4th AVENUE, SUITE 2C
ANCHORAGE, ALASKA 99501
PH (907) 2857-1351 FAX (907) 272-3829

March 12, 2007

HDR Alaska Inc.
2525 C Street, Suite 305
Anchorage, AK 99503
Attention: Mr. Todd Bethard

SUBJECT: ACMP SINGLE AGENCY REVIEW
Atka Sewer and Water improvements
POA-2007-423-D, ID2007-0212AA

Dear Mr. Bethard:

The Office of Project Management & Permitting (OPMP) has reviewed your Coastal Project Questionnaire and other pertinent information regarding the above referenced project.

Based upon the information you have supplied, your project will require authorization from the Alaska Department of Natural Resources, Division of Mining, Land and Water. The DNR/MLW office will be responsible for coordinating the State review to determine if your proposed project is consistent with the Alaska Coastal Management Program (ACMP). Please contact Ms. Ashley Reed, Natural Resource Specialist II at (907)269-5047 to find out who from her office will be conducting the review.

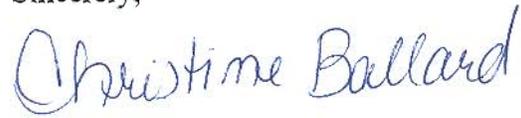
The U.S. Army Corps of Engineer's (COE) has authorized activities included in your proposed project under Nationwide Permit (NWP) #18, Minor Discharges. The activities authorized under this NWP, as modified by the Regional Conditions, are consistent with the Alaska Coastal Management Program (ACMP). The COE has provided you with a copy of the NWP and the associated regional conditions.

This decision is ONLY for the proposed project as described. If any changes to the project are proposed, including its intended use, prior to or during its siting, construction, or operation, contact this office immediately to determine if further review and approval of the revised project is necessary.

"Develop, Conserve, and Enhance Natural Resources for Present and Future Alaskans."

Thank you for your continued cooperation with the ACMP.

Sincerely,

A handwritten signature in blue ink that reads "Christine Ballard". The signature is written in a cursive, flowing style.

Christine Ballard
Project Review Assistant

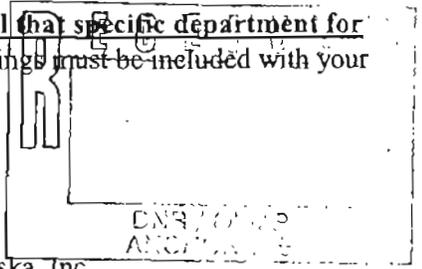
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cc: Karol Kolehmainen, AWCRSA
Mark Fink/Ellen Simpson, DFG
Stewart Seaberg, DNR/OHMP
Ashley Reed, DNR/MLW
William Ashton, DEC
Margie Goatley, DNR/SHPO
Medrick Northrop, COE Regulatory Branch

Coastal Project Questionnaire and Certification Statement

All questions must be answered. If you answer "Yes" to any of the questions, please call that specific department for further instructions to avoid delay in processing your application. Maps and plan drawings must be included with your packet.

An incomplete packet will be returned.



■ APPLICANT INFORMATION

<p>1. <u>City of Atka, Julie Dirks, City Administrator</u></p> <hr/> <p>Name of Applicant P.O. Box 765</p> <hr/> <p>Address Unalaska, AK 99685</p> <hr/> <p>City/State/Zip 907-581-6226</p> <hr/> <p>Daytime Phone 907-581-6317</p> <hr/> <p>Fax Number</p>	<p>2. <u>Todd Bethard, HDR Alaska, Inc.</u></p> <hr/> <p>Agent (or responsible party if other than applicant) 2525 C, Street, Suite 305</p> <hr/> <p>Address Anchorage, Alaska 99503</p> <hr/> <p>City/State/ZipState Zip Code 907-644-2000</p> <hr/> <p>Daytime Phone 907-644-2022</p> <hr/> <p>Fax Number</p>
<p>atka2@arctic.net</p> <hr/> <p>E-mail Address</p>	<p>Tbethard@hdrinc.com</p> <hr/> <p>E-mail Address</p>

■ PROJECT INFORMATION

Yes No

1. This activity is a: new project modification or addition to an existing project
- If this is a modification, do you currently have any State, federal or local approvals for this activity?

Note: Approval means any form of authorization. If "yes," please list below:

Approval Type	Approval #	Issuance Date	Expiration Date
Wastewater Disposal Permit	9440-DB-005		May 1, 1999
Wastewater Disposal Permit	8221-DB101		Jan. 1, 1989

2. If this is a modification, was this project reviewed for consistency with Alaska Coastal Management?

Previous State I.D. Number: AK _____

Previous Project Name: The above Wastewater disposal permits would have went under ADEC ACMP review.

■ PROJECT DESCRIPTION

1. Provide a brief description of your entire project and ALL associated facilities and land use conversions.

The existing surface water reservoir dam will be replaced, community water treatment plant replaced, two existing sewage ocean outfalls replaced including the addition of community septic tanks, two water storage tanks replaced, a new water service line constructed to Atka Pride Seafoods and the existing water distribution system in Old Atka

Village will be replaced with a 6" HDPE water line. The distribution lines will be installed within an existing roadway and will have 3 creek crossings, but the lines will be placed above the existing stream culverts.

Proposed starting date for project: Summer 2007 Proposed ending date for project: Unknown at this time due to funding.

- Attach the following:
 - a detailed project description, all associated facilities, and land use conversions, etc. (Be specific, including access roads, caretaker facilities, waste disposal sites, etc.);
 - a project timeline for completion of all major activities;
 - a site plan depicting project boundary with all proposed actions;
 - other supporting documentation to facilitate project review. Note: If the project is a modification, identify existing facilities and proposed changes on the site plan.

■ PROJECT LOCATION

- Attach a copy of the topographical and vicinity map clearly indicating the location of the project. Please include a map title and scale.

- The project is located in which region (see attached map):
 - Northern
 - Southcentral
 - Southeast
 - Southwest
 - within or associated with the Trans-Alaska Pipeline corridor

- Location of project (Include the name of the nearest land feature or body of water.) Village of Atka

Township T92S Range R176W Section 3,4,9,10,15,16, and 22 Meridian Seward Latitude/Longitude 52°12' North, 148°12' West
 USGS Quad Map _____

- Is the project located in a coastal district? Yes No If yes, identify: Aleutians West CRSA
(Coastal districts are a municipality or borough, home rule or first class city, second class with planning, or coastal resource service area.) Note: A coastal district is a participant in the State's consistency review process. It is possible for the State review to be adjusted to accommodate a local permitting public hearing. Early interaction with the district is important; please contact the district representative listed on the attached contact list.

- Identify the communities closest to your project location: Atka

- The project is on:
 - State land or water*
 - Federal land
 - Private land, Native Corporation Lands
 - Municipal land
 - Mental Health Trust land

*State land can be uplands, tidelands, or submerged lands to 3 miles offshore. See Question #1 in DNR section.
 Contact the applicable landowner(s) to obtain necessary authorizations.

■ DEPARTMENT OF ENVIRONMENTAL CONSERVATION (DEC) APPROVALS

- | | Yes | No |
|--|-------------------------------------|-------------------------------------|
| 1. Will a discharge of wastewater from industrial or commercial operations occur? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Will the discharge be connected to an approved sewer system? | <input type="checkbox"/> | <input type="checkbox"/> |
| Will the project include a stormwater collection/discharge system? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 2. Do you intend to construct, install, modify, or use any part of a wastewater (sewage or greywater) disposal system? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| a) If the answer is yes, will the discharge be 500 gallons per day or greater? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| b) If constructing a domestic wastewater treatment or disposal system, will the system be located within fill material requiring a COE permit? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |