For Agency Us	e
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OASYS #: _	
Permit #: _	

Notice of Intent (NOI)

APDES Hydrostatic or Aquifer Pump Testing Discharge 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 Alaska Pollutant Discharge Elimination System (APDES) Hydrostatic General Permit (GP) or Aquifer Pump Testing (mineral mining/expoloration actities only) Discharges GP. Submission of this NOI also constitutes notice that the party identified in Section I of this form meets the eligibility requirements of the Hydrostatic or Aquifer Pump Testing Discharges GP for the project identified in Section II of this form. Permit coverage is required prior to commencement of the hydrostatic or aquifer pump testing discharges activity until you are eligible to terminate coverage as detailed in the Hydrostatic or Aquifer Pump Testing Discharges GP. To obtain authorization, you must submit a complete and accurate NOI form, Best Management Practices (BMP) Plan, and application fee. Refer to the instructions at the end of this form.

Refer to the instructions at the end of this form.										
Notice of Inte	ent Status									
Hydrostatic NOI Aquifer Pump Testing NOI – (in support of mineral mining development and exploration only)										
Mark whether this is the first time you are requesting coverage for a new discharge, or if this is a change of information for a discharge already covered under the general permit. If this is a change of information, supply the APDES general permit authorization number for the discharge.										
☐ Origina	NOI submission	, or		form	ation, APDES Permit aut	horization n	umber:			
I. Applicant/0	Operator Info	rmation								
Organization: Name: Title:										
Phone:	Phone: Fax (optional): Email:									
Mailing Address:	Street (PO Box):									
	City:				State:		Zip:			
II. Project/Sit	e Information	n								
Project/Site Name	:									
Project Description	า:						Estimate	d Project Dates		
							Start:	End:		
Project Stree	et:									
City:					Alaska Zip:		Longitude:	Latitude:		
Boro	ough or Similar Gov	ernment Subdivi	sion:							
Latitude/Longi	tude data Source:	☐ Map ☐ G	PS Other:		Horizontal Refere	ence Datum:	□ NAD 27 □ N	AD 83		
III. Discharge	Information									
		Average Daily	Discharge Flow Rate	e:		gallo	ons per minute (G	PM)		
		1aximum Daily	Discharge Flow Rate	2:		gallo	ons per minute (G	PM)		
Estimated Discha Flow Rates:	arge	Maxin	num Volume per Da	У		gallo	gallons per day (GPD)			
		Total A	Anticipated discharge	e		gallo	gallons			
	[Discharge veloc	ity at the end of pipe	e		feet	per second (fps)			
Is the discharg uplands?					nds to which you will disc scharge is to an <u>unname</u>					
☐ Yes ☐ N	lo									
General Descrip	tion of Hydrosta	tic or Aquifer F	Pump Testing Activit	ties:						

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						0	ASYS #:			
						Po	ermit #:			
		_	waters of the U.S.,	neter	rs listed in Table 6 with v	our NOI?	☐ Yes	□No	□ NA	
have you submitted the required total metals analysis for the parameters listed in Table 6 with your NOI? Do you have aquifer pump testing discharges either to land or water which are located within 1,500 feet of an "Active DEC identified contaminated site or groundwater plume*"? *A contaminated site or groundwater plume with an "Active" or "Cleanup Complete-Institutional Controls" status identified by DEC Contaminated Sites Program. For assistance in locating mapped contaminated sites and listing of groundwater plumes see http://dec.alaska.gov/water/wastewater/stormwater/dewater-hydrostatic/#aquiferpump .						s" status l listing of	☐ Yes	□ No	□ NA	
If Yes, describe	the BMPs to be	implemented	in your certified BM	P pla	n to insure pumping doe	es not affect t	he contamina	ted area.		
	located within	a 1,500 feet of			3 of the permit for aquife contaminated site or plui		☐ Yes	□ No	□ N/A	
IV. BMP Plan r	equired to d	escribe how	the wastewate	r di	scharge will be man	aged				
Has a BMP Plan b	een developed i	in accordance t	to Part 2.2.9 of the g	gener	ral permit?		☐ Yes	□ No	□ N/A	
Has the certified E	BMP Plan been s	submitted to D	EC with the NOI?				☐ Yes	□No	□ N/A	
V. Billing Cont	act Informat	ion								
Organization:			Name:			Title:				
Phone:		Fax (optional):		Ema	ail:					
Mailing Address:	Street (PO Box)	:								
Check if same										
as Operator Information	City:	City: State: Z					Zip:			
VI. Application	n Preparer (co	omplete if NOI w	ras prepared by someo	ne ot	ther than the certifier.)					
Organization:	Tropardi (e.	omprese ii noon ii	Name:		are trial, the seramen,	Title:				
Phone:		Fax (optional):		Ema	ail:	1				
Mailing Address:	Street (PO Box)	:								
Check if same										
as Operator Information	City: State: Zip:									
VIII. Documen	ts Attachme	nts								
Documents attach	ned with this ap	plication:								
☐ BMP Plan										
☐ Aquifer Pur	np Test - tota	al metals and	alysis (Table 6)							
☐ Other:										

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	OASYS #:								
	Permit #:								
IX. Certificatio	n Information	,							
			m (APDES) nermit anni	ication or re	nort must he s	igned hy	an individual with the appropriate		
	_		rmation, please refer t			-			
http://www.legis.state.ak.us/basis/aac.asp#18.83.385.									
Corporate Executive 18 AAC 83.38		business	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 Operati	_	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							
Sole Proprietor or	General Partner		edures. rtnership or sole propriet	orship, the ge	eneral partner or	the propri	ietor respectively		
18 AAC 83.38	<u>5</u> (a)(2)				<u>-</u>				
Public Agency, Chi		r For a mu	unicipality, state, or other	public agenc	y, the chief execu	utive office	er of the agency.		
Public Agency, Sen 18 AAC 83.38			unicipality, state, or other ons of a principal geograp	-	•		r having responsibility for the overall		
2071110 00100			DES permit, and a submit			•	by the department,		
	must be	e signed by a pe	erson described in above,	or by a duly a	uthorized repres	entative oj	f that person.		
	*Fo	_	thority: the delegation m		_				
	An exam	_	ture will not be approved uthorization delegating a			_			
	Ancxum	-	ilaska.gov/media/1331	-	-	-			
Operations Manag	er						sponsibility for the overall operation of		
(Delegated Au							operator of a well or a well field,		
18 AAC 83.38			endent or position of equ						
Environmental Ma	•			tive, an individ	dual or position h	naving ove	rall responsibility for environmental		
(Delegated Au 18 AAC 83.38	* *	matters	for the company.						
		v that this o	document and all a	ttachmen	ts were nrer	nared u	nder my direction or		
-							roperly gather and evaluate the		
-		-	_	-	-	-	e system, or those persons		
						_	best of my knowledge and		
•	•	•	•				submitting false information,		
		•	risonment for kno	_	•	ities ioi	submitting raise information,		
•	ossibility of fi	ile allu illip		willig viola	itions.	T '11.			
Organization:			Name:			Title:			
Phone:		Fax (optional)	<u> </u>	Email:					
Mailing Address:	Street (PO Box):								
Check if	στισει (FO box).								
same as Operator	City:			Stato			Zip:		
Information City.			State:		210.				
					I				
Signature/Resp	oonsible Official			Da	ite				

Instructions for Completing a Notice of Intent (NOI) Form APDES Hydrostatic Testing or Aquifer Pump Testing General Permit.

Who Must File an NOI Form:

The following situations will require NOI submittal; applicants which discharge eligible hydrostatic or aquifer pump testing discharges to waters of the U.S. and aquifer pump testing discharges to the land of 30,000 gallon per day or greater or pump testing located within a 1,500 feet of an active DEC mapped contaminated site or plume.

Completing the Form

Obtain and read a copy of the APDES Hydrostatic and Aquifer Pump Testing 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://dec.alaska.gov/water/wastewater/stormwater/.

Applicant Information

The applicant that is conducting the hydrostatic or aquifer pump testing and has responsibility for on-site operations necessary to assure compliance to the permit shall complete and submit an NOI.

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 applicant, check the box and continue.

Project/Site Information

Enter the official or legal name and complete street address, including city, state, zip code, and borough 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 1 and 2). Complete site information must be provided for permit coverage to be granted.

The applicant must also provide the latitude and longitude of the project area in decimal format with a precision of 5 decimals. The latitude and longitude of your project area 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 https://www.epa.gov/npdes/epas-stormwater-discharge-mapping-tools for further use of EPA's web-based siting tool. For consistency, DEC requests that measurements be taken from the approximate center of the excavation area. Applicants must specify which source they used to determine latitude and longitude. Enter the estimated start and completion dates using four digits for the year (i.e., 05/27/2019).

Discharge Information

Enter the name(s) of receiving water bodies to which the hydrostatic or aquifer pump testing project 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 manmade 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 the anticipated the average daily and maximum daily discharge flow rate, maximum volume per day, and the total anticipated discharge with your estimated discharge velocity at the discharge point. Information shall also be provided to determine if the discharge is to a land disposal area and if the aquifer pump testing discharge volume will equal or exceed 30,000 gallons per day.

RMP Plan

In accordance to Part 2.2.8 of the permit all hydrostatic testing including flushing and aquifer pump testing discharges which require NOI submittal are required to submit a BMP plan to describe how the wastewater discharge will be managed. Questions were added to the NOI to specify that a BMP plan shall be developed, certified, and submitted with the NOI.

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 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:

DEC encourages you to complete the NOI form electronically via the Internet. DEC's Online Application System (OASys) can be found at http://dec.alaska.gov/water/wastewater/stormwater/APDESeNOI. Filing electronically is the fastest way to obtain permit coverage and

Instructions for Completing a Notice of Intent (NOI) Form APDES Hydrostatic Testing or Aquifer Pump Testing General Permit.

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 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