

Ted Stevens Anchorage International Airport General Permit (ANC-GP) Authorization - Modification

version 1.27

Form Input

**This form may contain one or more sections or controls that are conditionally displayed based on answers provided in other parts of the form*

Form Instructions

Please see:

[Instructions for completing the NOI Modification for Storm Water discharges associated with industrial activity under the APDES ANC-GP.](#)

Modification Reason

Permit Number

Are you modifying any of the following things for this permit? *Select All That Apply

Facility Name Change Transfer of Permit

Please exit the current form and return to Start a New Form. Select I want to renew, modify... > Select **Facility Name Change or Transfer of Ownership – Stormwater** form.

Modification Description or Section Changes

- If you have a quick description that explains your modification you can add it below.
- Please check any section boxes below if you've made any additional changes in those sections as well.

If changing contact details for anyone associated with the permit or application, please add a note in the Modification Description box below.

Modification Description

Modified Section(s) *Select All That Apply

Contact Information Facility Information
 MS4 and Effluent Limit Information SWPPP Documents
 Discharge Information Sector/SubSector Information
 Attachments

Contact Information

Contacts

If adding a **new contact**, scroll to the bottom and select "Add New Contact Information". Multiple roles may be selected per contact.

To **remove a contact**, select "Inactivate", below.

The following contact roles are required for this application. Multiple roles may be selected per contact.

- Applicant (**Permittee**)
- SWPPP Contact
- Billing Contact
- Application Preparer
- Onsite *or* Operator Contact

Contact Role(s) *Select All That Apply

Applicant Agent
 Billing Contact Consultant
 Onsite Contact Owner
 Operator Contractor
 SWPPP Contact Subcontractor

... (More Options Available)

To remove a contact, select "**Inactivate**". *Select All That Apply

Inactivate

Contact

Prefix

First Name

Last Name

Title

Organization Name

Phone Type

Number

Extension

Home

Mobile

Othe

Business

Email

Mailing Address

Address Line 1

Address Line 2

City

State/Area

Postal Code

Contact Change Comments

Facility Information

Only *one contact* can be designated as the Responsible Party/Permittee. Please return to Contact Information Section to correct.

Facility Name

Have storm water discharges from your site been covered previously under the APDES MSGP Permit? *Select One

Yes No

Provide the Multi-Sector General Permit (MSGP) authorization number

*This control is conditionally displayed based on answers provided in other parts of the form

Facility Address

Address Line 1

Address Line 2

City

State/Area

Postal Code

The project site must be located in Alaska. Please use two-letter code: AK

Visit the link below to help with locating project Borough or Similar Government Subdivision

[Alaska Region Map](#)

Borough or Similar Government Subdivision *Select One

- Aleutians East Borough
- Aleutians West Census Area
- Bethel Census Area
- Bristol Bay Borough
- Chugach Census Area
- City & Borough of Wrangell
- City and Borough of Juneau
- City and Borough of Sitka
- Copper River Census Area
- Denali Borough

... (More Options Available)

Visit the link below to help with conversion between DMS and Latitude/Longitude

Facility Address

Latitude

Longitude

Please list the mapping technique used *Select One

- EDMS Map
- GPS Unit
- GIS Information
- Internet-Google Maps
- Internet Map Service
- Map (USGS)
- Map (Other)

Please list the mapping technique used

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What was the scale?

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Identify the North American Industry Classification System (NAICS) code that best represents the products produced or services rendered for which your facility is primarily engaged:

[List of SIC and NAICS codes for DEC ANC-GP](#)

Primary NAICS code

Additional NAICS Code(s) *Select All That Apply

- 111110-Soybean Farming
 - 111120-Oilseed (except Soybean) Farming
 - 111130-Dry Pea and Bean Farming
 - 111140-Wheat Farming
 - 111150-Corn Farming
 - 111160-Rice Farming
 - 111190-Other Grain Farming
 - 111191-Oilseed and Grain Combination Farming
 - 111199-All Other Grain Farming
 - 111210-Vegetable And Melon Farming
- ... (More Options Available)

Primary SIC Code

Estimated area (in acres) of industrial activity at your site exposed to storm water

Identify the type(s) of category of operator *Select All That Apply

- Airport Authority
- Commercial aircraft carrier
- Air Cargo carrier
- Fixed-based operator and/or service provider involved in either deicing or fueling operations
- Ground service provider
- General aviation activities
- Military entity
- Other

Identify Type(s) of Activities *Select All That Apply

- Deicing / Anti-icing Operations
- Aircraft Maintenance
- Handling of aircraft lavatory waste or any other sanitary waste device not directly piped to a sanitary sewer (Publicly Owned Treatment Works)
- Vehicle / Equipment Maintenance
- Servicing, repairing, or maintaining aircraft and ground vehicles, and equipment cleaning and maintenance (including vehicle / equipment lubrication)
- Other

Primary Ownership Type *Select One

- Corporation
- Federal Facility (U.S. Government)
- Mixed Ownership (e.g., Public/Private)
- Municipal or Water District
- Non-Government
- Privately Owned Facility
- Public (Municipality)
- School District
- State Government
- Tribal Government

SWPPP Documents

SWPPP Template

Below is the link to the SWPPP Template to fill out and attach below. [SWPPP Template](#)

SWPPP

Multiple attachments are not allowed. Please be aware that files exceeding 500 MB in size are not allowed. The following file types are accepted:
.7Z.7z*.AVI*.avi*.Avi*.BMP*.bmp*.Bmp*.CSV*.csv*.Csv*.DAT*.dat*.Dat*.DOC*.doc*.Doc*.DOCX*.docx*.Docx*.DWG*.dwg*.Dwg*.EML*.eml*.Eml*.GIF*.gif*.Gif*.GPX*.gpx*.Gpx*.HTM*.

Comment

Confidential (Reason for Confidentiality)

Discharge Information

Receiving Water Information

Drainage Basin(s) - Identify the drainage basin(s) in which your discharge is located *Select All That Apply

- Basin A Drainage to Lake Spenard Basin B Drainage to Lake Hood
- Basin C Drainage to Lake Hood Basin D Drainage to Knik Arm
- Basin E Drainage to unnamed creek

Impaired Waters

*This control is conditionally displayed based on answers provided in other parts of the form

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Visit the link below to search AK DEC Impaired Waterbody database

[Impaired Waters](#)

Does a discharge of any parameter occur to an Impaired Waterbody, Category 4 [305(b)] or Category 5 [303(d)], listed in the current approved Alaskas Integrated Water Quality Monitoring and Assessment Report?

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- Yes No

What parameters are causing the Category 4 or 5 impairment?

*This control is conditionally displayed based on answers provided in other parts of the form

Are the parameters causing the impairment in the proposed discharge? *Select One

*This control is conditionally displayed based on answers provided in other parts of the form

- Yes No

Is the discharge consistent with the assumptions and requirements of applicable EPA approved or established Total Maximum Daily Load (TMDL(s))? *Select One

*This control is conditionally displayed based on answers provided in other parts of the form

- Yes No
 N/A

Attachments

Document Attachments

Please include any additional documents you would like submitted with this NOI

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