# **Hydrostatic and Aquifer Pump Authorization - Modification**

### **Form Input**

### Form Instructions

Please see

Instructions for completing the NOI Modification for Storm Water discharges associated with activity under the APDES Hydrostatic and Aquifer Pump Test 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

For this modification re n, this form is the correct form: Facility Name Change or Transfer of Ownership - Stormwater. Please exit this form. When choosing permit change forms, please select the applicable form according to your selection.

## Modification Instruction

Enter brief note explaining what information is g modified.

When modifying contact information, please include the contact name(s) of who should no longer be associated with the permit or application.

Modifications such as project start/end dates or pro ge, are found under the Project Information Section. Modifications such as adding an electronic copy of the BMP, are found under the BMP

#### **Modification Description**

#### **Section Changes**

Please select which Section(s) will be modified.

Modified Section(s) \*Select All That Apply

□Contact Information □Project/Site Information

□ Discharge Information □ BMP Plan

☐ Attachments

# **Contact Information**

· contact. 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

□lnactivate

11/17/2025 12:17:02 PM Page 1 of 5

Prefix					
First Name	Last Name				
Title					
Organization Name					
Phone Type	Number	Extension			
Home					
Mobile					
Other					
Business	5				
Email		·			
Mailing Address Address Line 1					
Address Ellie 1		)			
Address Line 2					
		(A)			
City		State/Area		Postal Code	
Contact Change Comn	nents	<u> </u>			
		4			
Project/Site Inform	nation				
			()/	•	
Only one contact see l	ha dasismatad oo tha Annii	oort (Dorroitton). Dlanca rate	um to Contrast Information Co.	an telegrape of	
Only One Contact Carri	be designated as the Applic	cani (Fermiliee). Flease fell	urn to Contact Information Section	on the connect.	
Hydrostatic or Aquifer				•	
	!				
Project/Site Name					
				0.	
Project Description				-	
Project Start Date (Esti	mated)				
					1/1
Project End Date (Estin	nated)				1/10
					7.0
					()
The project end date is	s before the project start da	te. Please change the date t	to continue.		
Project Address					
Address Line 1					
Address Line 2					
Audress Lifle 2					
City		State/Area		Postal Code	
The project site must be	oe located in Alaska. Please	e use two-letter code: AK			

11/17/2025 12:17:03 PM Page 2 of 5

Visit the link below to help with locating project Borough or Similar Government Subdivision Alaska Region Map.

Borough or Similar Government	nent Subdivision *Select One	
C Aleutians East Borough	C Aleutians West Census Area	
© Bethel Census Area	C Bristol Bay Borough	
C 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)		
Project Location Latitude		Longitude
	etermine geographic coordinates 'Select One S Unit	
c GIS Information Inte	rnet-Google Maps	
○ Internet Map Service ○ Map		
○ Map (Other)		
Please list the mapping tech  *This control is conditionally displaye	nique used ed based on answers provided in other parts of the form	
What was the scale?  *This control is conditionally displaye	ed based on answers provided in other parts of the form	
J.	/	
General Location Map	· (2) * .	
Multiple attachments are not *.7Z,*.7z,*.AVI,*.avi,*.Avi,*.BN	allowed. Please be aware that files exceeding 500 MB in size are not all MP,*.bmp,*.Bmp,*.CSV,*.csv,*.Csv,*.DAT,*.dat,*.Dat,*.DOC,*.doc,*.Doc,	owed. The following file types are accepted: '.DOCX,*.docx,*.Docx,*.DWG,*.dwg,*.Dwg,*.EML,*.eml,*.Eml,*.GIF,*.gif,*.Gif,*.GPX,*.gpx,*.Gpx,*.HTM,
Comment	·/O	
	U <sub>A</sub>	
Confidential (Reason for C		
,		
Discharge Information		
Discharge information		* /
Discharge Flow Rates:		
Maximum anticipated discha	arge flow rate (gallons per day - GPD)	
Average anticipated dischar	ge flow rate (gallons per day - GPD)	
	, ,	
Total anticipated discharge (	(gallons)	
Discharge velocity at end of	pipe: (feet per second - FPS)	
Discinary release, at the en	p.per (receiper eccental 11 e)	
Is the discharge solely to lan	ad? "Select One	
○Yes ○No		
Idenfity the name(s) of water	bodies to which you will discharge to	
*This control is conditionally displaye	ed based on answers provided in other parts of the form	

Do you have aquifer pump testing discharges to Waters of the U.S? Soled One \*This control is conditionally displayed based on answers provided in other parts of the form

○Yes ○No

11/17/2025 12:17:03 PM Page 3 of 5

	ved based on answers provided in oth		the GP			
		at files exceeding 500 MB in s v,*.Csv,*.DAT,*.dat,*.Dat,*.DO			: ,*.EML,*.eml,*.Eml,*.GIF,*.gif,*.0	Gif,*.GPX,*.gpx,*.Gpx,*.HTM
Comment						
☐Confidential (Reason for	Confidentiality)					
*This control is conditionally display	ed based on answers provided in othe ed based on answers provided in othe water plume with an "Active" of groundwater plumes, pleas	er parts of the form er parts of the form or "Cleanup Complete-Instituti se see the Division of Water's	ional Controls" status identific Excavation Dewatering Gen	ed by DEC Contaminated Sit eral Permit webpage:	tes Program. For assistance in l	ocating mapped
	ther to land or water which red based on answers provided in oth		et of an �Active DEC iden	tified contaminated site or	groundwater plume�? "Select	One
*This control is conditionally display Contaminated Sites Map	red based on answers provided in off	er parts of the form				
Contaminated Sites *This control is conditionally display	ved based on answers provided in oth	er parts of the form				
Hazard ID#	Contaminated Site Name	Contaminate Type	Latitude	Longitude	In soil or groundwater?	CS Staff Contact
Describe the BMPs to be im *This control is conditionally display	nplemented in your certified red based on answers provided in oth		ng does not affect the con	taminated area.		
site be submitted in the atta		or review by DEC?	nit for aquifer pump testing	discharges located withir	n 1,500 feet of an active DEC ı	napped contaminated
Is the discharge greater that	n 30,000 gallons a day? <sup>™</sup>	lect One	*	6		
BMP Plan				70		
Has a BMP Plan been devel	loped in accordance to Par	t 2.2.7 of the Hydrostatic an	nd Aquifer Pump Testing g	C		
You must submit a BMP Pla	an with this submission.				(O)	
BMP Plan Instructions						
conditions of the project site, s	eneral permit and fact sheets to such as drainage patterns and	I soil conditions, are clearly un	derstood. The BMP Plan sho	ould be completed and attach	project activities are clearly def led with this NOI. If there is more ake sure roles and responsibility	than one construction
While developing the BMP Pla • DECs Excavation Dewaterin to other resource materials. DECs Excavation Dewatering	ng, Hydrostatic/Aquifer Pump		es below for links to the gene	eral permits, contaminated si	tes data, instructions for filing fo	r permit coverage, and links
Please see: Alaska Storm Water Guide						
BMP Plan Template						
Treatment Methodology						
How will the contaminate be	e mitigated should it becon	ne entrained during dischar	ge?			

11/17/2025 12:17:03 PM Page 4 of 5

BMP Plan Attachment Please attach your BMP plan here, and any other BMP related documents.
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,*.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)
Detailed Site Map  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,*.BMP,*.bmp,*.Bmp,*.CSV,*.csv,*.Csv,*.DAT,*.dat,*.Dat,*.DOC,*.doc,*.DOCX,*.docx,*.DOCX,*.docx,*.DWG,*.dwg,*.DWg,*.EML,*.eml,*.Eml,*.GIF,*.gif,*.Gif,*.GPX,*.gpx,*.Gpx,*.HTN  Comment
<b>O</b>
Confidential (Reason for Confidentiality)
Attachments
Document Attachments Please include any additional documents you would like submitted with this NO/
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,*.BMP,*.bmp,*.Bmp,*.CSV,*.csv,*.Csv,*.DAT,*.dat,*.Dat,*.DoC,*.doc,*.Doc,*.DOCX,*.docx,*.Dow,*.DWG,*.dwg,*.Dwg,*.EML,*.eml,*.Eml,*.Eml,*.GiF,*.gif,*.Gif,*.GPX,*.gpx,*.Gpx,*.HTN
Comment
Confidential (Reason for Confidentiality)
Confidential (Reason for Confidentiality)
0,0
`

11/17/2025 12:17:03 PM Page 5 of 5