# Hydrostatic and Aquifer Pump Notice of Intent (NOI)

#### **Form Input**

### Form Instructions

Please see

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

#### **Contact Information**

#### **Required Contacts**

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

- Applicant (Permittee)
- Billing contact
- Operator or Onsite Conta - Application Prepare

	-
Contact Role(s)	*Sele
□ Applicant	

□ Billing Contact

☐Onsite Contact □ Operator □ Contractor □SWPPP Contact □Subcontractor

. (More Options Available)

First Name Last Name  Title  Organization Name  Phone Type Number Extension  Home Susiness Su	ontact		7//	
Title  Organization Name  Phone Type Number Extension  Home  Mobile Other  Business  Email  Mailing Address Address Line 1  Address Line 2	Prefix			
Organization Name  Phone Type Number Extension  Home Mobile Other  Business Email  Mailing Address Address Line 1  Address Line 2	First Name	Last Name	0,	
Organization Name  Phone Type Number Extension  Home Mobile Other  Business Email  Mailing Address Address Line 1  Address Line 2				
Phone Type Number Extension  Home	Title			
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Business  Email  Mailing Address Address Line 1  Address Line 2				_ * / .
Email  Mailing Address Address Line 1  Address Line 2	Other			
Mailing Address Address Line 1  Address Line 2	Business			
Address Line 1  Address Line 2	Email	,	,	0,
Address Line 1  Address Line 2				
Address Line 2	Mailing Address			<u> </u>
	Address Line 1			
City State/Area Postal Code	Address Line 2			`\\\
City State/Area Postal Code				
	City		State/Area	Postal Code

### Project/Site Information

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

The contacts listed below are required in the Contact Information section. Please return to the previous section and select the role and fill out the contact details.

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

Only one contact can be designated as the Applicant (Permittee). Please return to Contact Information Section to correct.

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Hydrostatic or Aquifer NOI? *Select One	
C Hydrostatic C Aquifer	
Project/Site Name	
Project Description	
Project Start Date (Estimated)	
Project End Date (Estimated)	
1//~	
The project end date is before the project start date. Please change the date to continue.	
Project Address	
Address Line 1	
Address Line 2	
City State/Area	Postal Code
	,
The anxiests the country of the Aleste Character for the Aleste Character for the Ch	
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	
ALL BOOK MADE	
Borough or Similar Government Subdivision "Select One C Aleutians East Borough C Aleutians West Census Area C Bethel Census Area C Bristol Bay Borough C Chugach Census Area C City & Borough of Wrangell C City and Borough of Juneau C City and Borough of Sitka C Copper River Census Area C Denali Borough	
C Aleutians East Borough C 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 C Denali Borough	
(More Options Available)	
C Copper River Census Area C Denali Borough (More Options Available)  Visit the link below to help with conversion between DMS and Latitude/Longitude DMS - Lat/Long converter	
Visit the link below to help with conversion between DMS and Latitude/Longitude  DMS - Lat/Long converter	
Project Location  Latitude Longitude	
Landad	<u> </u>
Select the method used to determine geographic coordinates *Select All That Apply	\ '\\
□EDMS Map □GPS Unit	<b>'/</b> ),
☐GIS Information ☐Internet-Google Maps	
□Internet Map Service □Map (USGS)	
∏Map (Other)	· V/_
Please list the mapping technique used	<b>/, ()</b>
*This control is conditionally displayed based on answers provided in other parts of the form	

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What was the scale?
\*This control is conditionally displayed based on answers provided in other parts of the form

General Location 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,*.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,*.H*  Comment
Continent
Confidential (Reason for Confidentiality)
Discharge Information
Discharge Flow Rates:
Discharge Flow Rates
Maximum anticipated discharge flow rate (gallons per day - GPD)
Average anticipated discharge flow rate (gallons per day - GPD)
Total anticipated discharge (gallons)
<b>10</b>
Discharge velocity at end of pipe: (feet per second - FPS)
Is the discharge solely to land? "Select One C Yes C No
Idenfity the name(s) of waterbodies to which you will discharge to
*This control is conditionally displayed based on answers provided in other parts of the form
Do you have aquifer pump testing discharges to Waters of the U.S? "Select One "This control is conditionally displayed based on answers provided in other parts of the form C Yes C No
Do you have aquifer pump testing discharges to Waters of the U.S? *Select One
*This control is conditionally displayed based on answers provided in other parts of the form C Yes C No
Effluent Limits and Monitoring Requirements for Metal Sampling (Table 6)
*This control is conditionally displayed based on answers provided in other parts of the form Please submit the required total metals analysis for the parameters listed in Table 6 of the GP
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,*.DWG,*.dwg,*.Dwg,*.EML,*.eml,*.Eml,*.Eml,*.Gif,*.Gif,*.Gif,*.GpX,*.gpx,*.Gpx,*.H*  Comment
Continent
Confidential (Reason for Confidentiality)
Have you contacted the DEC-Contaminated Sites Group? Select One *This control is conditionally displayed based on answers provided in other parts of the form
Have you contacted the DEC-Contaminated Sites Group? Select One *This control is conditionally displayed based on answers provided in other parts of the form
c Yes c No

## Comment

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

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, please see the Division of Water's Excavation Dewatering General Permit webpage: <a href="https://dec.alaska.gov/water/wastewater/stormwater/permits-approvals/hydrostatic/">https://dec.alaska.gov/water/wastewater/stormwater/permits-approvals/hydrostatic/</a>

Do you have a discharge either to land or water which are located within 1,500 feet of an Active DEC identified contaminated site or groundwater plume ? Saled One \*This control is conditionally displayed based on answers provided in other parts of the form

○Yes ○No

\*This control is conditionally displayed based on answers provided in other parts of the form  $\underline{Contaminated\ Sites\ Map}$ 

### **Contaminated Sites**

displayed based on answers provided in other parts of the for

Hazard ID#	Contaminated Site Name	Contaminate Type	Latitude	Longitude	In soil or groundwater?	CS Staff Contact

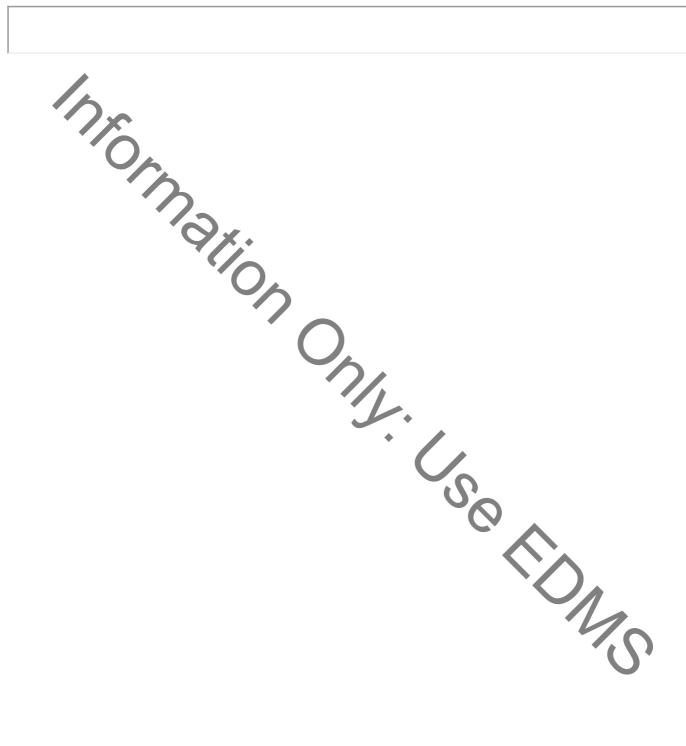
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Describe the BMPs to be implemented in your certified BMP plan to insure pumping does not affect the contaminated area.
*This control is conditionally displayed based on answers provided in other parts of the form
Will all permit required additional documentation described in Part 2.2 of the permit for aquifer pump testing discharges located within 1,500 feet of an active DEC mapped contaminated site be submitted in the attachments step of this NOI for review by DEC?
*This control is conditionally displayed based on answers provided in other parts of the form C Yes C No
s the discharge greater than 30,000 gallons a day? "Select One
CYes CNo
BMP Plan
Has a BMP Plan been developed in accordance to Part 2.2.7 of the Hydrostatic and Aquifer Pump Testing general permit? "Solect One
C Yes C No
<b>'</b> ∕>∽
You must submit a BMP Plan with this submission.
BMP Plan Instructions
Tips for Completing the BMP Plan Template
Permittees should read the general permit and fact sheets before beginning to prepare the BMP Plan. The BMP Plan should be prepared once the project activities are clearly defined and the unique conditions of the project site, such as drainage patterns and soil conditions, are clearly understood. The BMP Plan should be completed and attached with this NOI. If there is more than one construction operator for your project, consider coordinating with other operators while developing your plan. Multiple operators may share the same plan, but make sure roles and responsibilities are clearly stated.
While developing the BMP Plan, refer to:  Decs Excavation Dewatering, Hydrostatic/Aquifer Pump Test General Permits webpages below for links to the general permits, contaminated sites data, instructions for filing for permit coverage, and links
to other resource materials. DECs Excavation Dewatering, Hydrostatic/Aquifer Pump Test General Permits
Please see:
Alaska Storm Water Guide
Please see:  BMP Plan Template
Treatment Methodology
How will the contaminate be mitigated should it become entrained during discharge?
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,*.BMP,*.bmp,*.Bmp,*.CSV,*.csv,*.Csv,*.Csv,*.DAT,*.dat,*.DAt,*.DOC,*.doc,*.Doc,*.DOCX,*.docx,*.Docx,*.DVG,*.avg,*.Dwg,*.EML,*.eml,*.Eml,*.Eml,*.GIF,*.gif,*.Gif,*.GPX,*.gpx,*.Gpx,*.HTM,*.docx,*.Docx,*.Docx,*.Docx,*.Docx,*.Docx,*.Dwg,*.Dwg,*.EML,*.eml,*.Eml,*.Eml,*.GIF,*.gif,*.Gif,*.GPX,*.gpx,*.Gpx,*.HTM,*.docx,*.Docx,*.Docx,*.Docx,*.Docx,*.Docx,*.Docx,*.Docx,*.Dwg,*.Dwg,*.EML,*.eml,*.Eml,*.Eml,*.GIF,*.gif,*.Gif,*.GPX,*.gpx,*.Gpx,*.HTM,*.docx,*.Docx,*.Docx,*.Docx,*.Docx,*.Docx,*.Docx,*.Docx,*.Docx,*.Docx,*.Dwg,*.Dwg,*.EML,*.eml,*.Eml,*.Eml,*.GIF,*.gif,*.Gif,*.GPX,*.gpx,*.Gpx,*.HTM,*.docx,*.Docx,*.Docx,*.Docx,*.Docx,*.Docx,*.Docx,*.Docx,*.Docx,*.Docx,*.Docx,*.Dwg,*.Dwg,*.EML,*.eml,*.Eml,*.Eml,*.GIF,*.gif,*.Gif,*.GpX,*.gpx,*.Gpx,*.HTM,*.docx,*.D
Comment
Confidential (Reason for Confidentiality)
Detailed Site Map
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Comment
Confidential (Reason for Confidentiality)

### **Attachments**

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	Document Attachments Please include any additional documents you would like submitted with this NOI
	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,*.Csv,*.DAT,*.dat,*.Dat,*.Doc,*.Doc,*.Doc,*.Doc,*.Doc,*.Doc,*.Doc,*.Doc,*.Dwg,*.dwg,*.Dwg,*.EML,*.eml,*.Eml,*.GIF,*.gif,*.Gif,*.GPX,*.gpx,*.Gpx,*.HTM,*.  *.7Z.*.7z.*.AVI,*.avi,*.Avi,*.BMP,*.bmp,*.Bmp,*.CSV,*.csv,*.Csv,*.Csv,*.DAT,*.dat,*.Dat,*.Doc,*.D
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	Confidential (Reason for Confidentiality)



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