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

# Notice of Intent (NOI) APDES Excavation Dewatering 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 APDES Excavation Dewatering GP. Submission of this NOI also constitutes notice that the party identified in Section I of this form meets the eligibility requirements of the Excavation Dewatering GP for the project identified in Section III of this form. Permit coverage is required prior to commencement of the dewatering activity until you are eligible to terminate coverage as detailed in the Excavation Dewatering 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.

| STATE OF AL   | LASKA         | wanagement                         | Tractices (Divir | , i lan, and application is | ee. Neter to the instructions at   | tile ella ol | tills form.           |                      |  |  |
|---|---------------|------------------------------------|------------------|-----------------------------|--|--------------|-----------------------|----------------------|--|--|
| Notice of   | Intent St     | tatus                              |                  |                             |  |              |                       |                      |  |  |
| Mark  | or if this    | is a change c                      | of information   | for a discharge alrea       | under the Excavation Dewa<br>Idy covered under the Exca<br>General permit authorizat | vation De    | watering General Pe   | - ·                  |  |  |
| Original NOI Submission or  |               |                                    |                  |                             |  |              |                       |                      |  |  |
| ☐ NOI Ch  | ange of Inf   | ormation, AP                       | DES Permit a     | uthorization mber:          |  |              |                       |                      |  |  |
| I. Applica  | nt/Opera      | ator Inforn                        | nation           |                             |  |              |                       |                      |  |  |
| Organization: Name:   |               |                                    |                  | Name:                       |  | Title:       |                       |                      |  |  |
| Phone:  | Phone: Fax (d |                                    | Fax (optional    | ):                          | Email:   |              |                       |                      |  |  |
| Mailing<br>Address:   | Street        | Street (PO Box):                   |                  |                             |  |              |                       |                      |  |  |
| 1   | City:         |                                    |                  |                             | State:   |              | Zip:                  |                      |  |  |
| II. Project   | /Site Info    | ormation                           |                  |                             |  |              |                       |                      |  |  |
| Project/Site N  | -             |                                    |                  |                             |  |              |                       |                      |  |  |
| Project Descr   | iption:       |                                    |                  |                             |  |              | Estimated P           | Project Dates        |  |  |
| •   |               |                                    |                  |                             | Start:   |              |                       | End:                 |  |  |
| Project<br>Location:  | Street:       |                                    |                  |                             |  |              |                       |                      |  |  |
|   | City:         |                                    |                  |                             | Alaska Zip:  | Longitude:   | Latitude:             |                      |  |  |
|   | Borough or    | Similar Goverr                     | nment Subdivis   | ion:                        |  |              |                       |                      |  |  |
| Latitude/Long   | gitude data S | Source: N                          | lap 🗌 GPS        | Other:                      | Horizontal Reference   | ce Datum:    | □ NAD 27 □ NA         | AD 83 WGS 84         |  |  |
| III. Discha   | rge Infor     | mation                             |                  |                             |  |              |                       |                      |  |  |
|   |               | Average Daily Discharge Flow Rate: |                  |                             |  | g            | allons per minute (G  | ons per minute (GPM) |  |  |
|   |               | Maximum                            | Daily Dischar    | ge Flow Rate:               | gallons per minute (GF   |              |                       | PM)                  |  |  |
| Estimated D Flow Rates:   | ischarge      | Maximum Volume per Day             |                  |                             |  | g            | gallons per day (GPD) |                      |  |  |
|   |               | Total Anticipated discharge        |                  |                             |  | gallons      |                       |                      |  |  |
|   |               |                                    | velocity at the  |                             | feet per second (fps)  |              |                       |                      |  |  |
| Is the discharge solely to uplands?  Identify the name(s) of waterbodies and/or wetlands to which you will discharge to:  (Note: If the discharge is solely to uplands, please enter N/A, not applicable. If the discharge is to an unnamed wetland please indicate as such.) |               |                                    |                  |                             |  |              | nnamed wetland,       |                      |  |  |
| ☐ Yes   | □ No          | ] No                               |                  |                             |  |              |                       |                      |  |  |
| General Description of Dewatering Plan (Detailed plan should be described in a certified BMP plan):   |               |                                    |                  |                             |  |              |                       |                      |  |  |
|   |               |                                    |                  |                             |  |              |                       |                      |  |  |
|   |               |                                    |                  |                             |  |              |                       |                      |  |  |
|   |               |                                    |                  |                             |  |              |                       |                      |  |  |
|   |               |                                    |                  |                             |  |              |                       |                      |  |  |

For Agency Use

|  | OASYS #:              |                 |                                   |  |                   |             |       |      |  |
|--|-----------------------|-----------------|-----------------------------------|--|-------------------|-------------|-------|------|--|
|  |                       |                 |                                   |  |                   | Permit #:   |       |      |  |
|  | aminated Sites Prog   | ıram. For assı  | istance in locating mapp          | leanup Complete – Instit<br>ed contaminated sites ar<br>stormwater/dewater-hyd | nd listing of gro | oundwater p |       | EC   |  |
| <u>http://dec.alaska.gov/water/wastewater/stormwater/dewater-hydrostatic/#dewater</u> Is there a DEC identified contaminated site either in "Active" or "Cleanup Complete – Institutional Controls" stawithin 1,500 feet of the proposed dewatering activities?  |                       |                 |                                   |  |                   | Yes         | □ No  |      |  |
| Do you have excavation dewatering activities located within 1,500 feet of a DEC identified "contaminated grounds and provided the contaminated grounds are set of the contaminated grounds and provided the contaminated grounds are set of the contam |                       |                 |                                   |  | aminated groui    | ndwater     | ☐ Yes | □ No |  |
|  | charges to land or to |                 | he U.S.?<br>For groundwater plume | within 1 EOO foot:   |                   |             |       |      |  |
|  |                       |                 |                                   |  |                   |             |       |      |  |
|  |                       |                 |                                   | f the permit pertaining t  | o a               | Yes         | □ No  | □ NA |  |
| contaminated site been submitted with the NOI for review by DEC?  Do you have excavation dewatering activities that discharge to waters of the U.S. greater than 1,500 feet from an "Active DEC identified contaminated site" or "contaminated groundwater plume" and not eligible for coverage under the APDES Construction General Permit AKR100000?   |                       |                 |                                   |  |                   | Yes         | □ No  | □ NA |  |
| IV. BMP Plan   | for Manageme          | nt of the V     | Vastewater Dischar                | ge   |                   |             |       |      |  |
| Has a BMP Plan   | been developed in     | accordance t    | o Part 2.2.7 and Part 2.2         | .8 of the Permit?  |                   | Yes         | □ No  | □ NA |  |
| Has the certified  | d BMP Plan been sul   | bmitted to DI   | EC with the NOI?                  |  |                   | ☐ Yes       | □ No  | □ NA |  |
| V. Billing Cor   | ntact Informatio      | n               |                                   |  |                   |             |       |      |  |
| Organization:  |                       |                 | Name:                             |  | Title:            |             |       |      |  |
| Phone:   |                       | Fax (optiona    | I):                               | Email:   |                   |             |       |      |  |
| Mailing<br>Address:  | Street (PO Box):      |                 |                                   |  |                   |             |       |      |  |
| Check if   | City:                 |                 |                                   | State:   | Z                 | ip:         |       |      |  |
| same as Operator<br>Information  |                       |                 |                                   |  |                   |             |       |      |  |
| VI. Application  | on Preparer (Com      | plete if NOI wa | as prepared by someone ot         | her than the certifier.)   |                   |             |       |      |  |
| Organization:  | •                     |                 | Name: Title:                      |  | Title:            |             |       |      |  |
| Phone:   |                       | Fax (optiona    | 1):                               | Email:   |                   |             |       |      |  |
| Mailing<br>Address:  | Street (PO Box):      | 1               |                                   | I  |                   |             |       |      |  |
| Check if same as Operator Information  |                       |                 |                                   | Zip:   |                   |             |       |      |  |
| VII. Attachm   | ents                  |                 |                                   |  |                   |             |       |      |  |
| Documents attached with this application:  |                       |                 |                                   |  |                   |             |       |      |  |
| BMP Plan   |                       |                 |                                   |  |                   |             |       |      |  |
| Other:   |                       |                 |                                   |  |                   |             |       |      |  |
| ப Otner:   |                       |                 |                                   |  |                   |             |       |      |  |
|  |                       |                 |                                   |  |                   |             |       |      |  |
|  |                       |                 |                                   |  |                   |             |       |      |  |

For Agency Use

|   | OASYS #:       |  |  |                                 |                | OASYS #:                              |  |  |
|---|----------------|--|--|---------------------------------|----------------|---------------------------------------|--|--|
|   | Permit #:      |  |  |                                 |                |                                       |  |  |
| VIII. Certification I   | nformation     |  |  |                                 |                |                                       |  |  |
| An Alaska Pollutant Discharge Elimination System (APDES) permit application or report must be signed by an individual with the appropriate authority per 18 AAC 83.385. For additional information, please refer to 18 AAC 83.385 at the following link: http://www.legis.state.ak.us/basis/aac.asp#18.83.385.  |                |  |  |                                 |                |                                       |  |  |
| Corporate Executive Offi<br>18 AAC 83.385 (a)(1   |                | busines<br>corpora   | 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 Operations M 18 AAC 83.385 (a)(1  |                | (i) the included in included i | 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 procedures. |                                 |                |                                       |  |  |
| Sole Proprietor or Gener<br><u>18 AAC 83.385</u> (a)(2  | 2)             |  | rtnership or sole proprietorship,  |                                 |                |                                       |  |  |
| Public Agency, Chief Exe<br>18 AAC 83.385 (a)(3   | s)(A)          |  | unicipality, state, or other public  |                                 |                |                                       |  |  |
| Public Agency, Senior Ex<br>18 AAC 83.385 (a)(3   |                |  | unicipality, state, or other public<br>ons of a principal geographic unit  |                                 |                | ng responsibility for the overall     |  |  |
| Any report required by an APDES permit, and a submittal with any other information requested by the department, must be signed by a person described in above, or by a duly authorized representative of that person. *For Delegated Authority: the delegation must be made in writing and submitted to the DEC. Your signature will not be approved until DEC receives the written delegation. An Example of written authorization delegating authority can be found on the Division of Water website:   |                |  |  |                                 |                |                                       |  |  |
| Operations Manager  |                | 1  | cc.alaska.gov/media/13316/d<br>uly authorized representative, an   |                                 |                | sibility for the overall operation of |  |  |
| (Delegated Authorit<br>18 AAC 83.385 (b)(   | • •            | _  | ulated facility or activity, including tendent or position of equivalent   |                                 | manager, opera | tor of a well or a well field,        |  |  |
| Environmental Manager (Delegated Authority)*  18 AAC 83.385 (b)(2)(B)  For a duly authorized representative, an individual or position having overall responsibility for environmental manager (Delegated Authority)*  18 AAC 83.385 (b)(2)(B)  |                |  |  | esponsibility for environmental |                |                                       |  |  |
| I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. |                |  |  |                                 |                |                                       |  |  |
| Organization:   |                |  | Name:  | Title:                          |                |                                       |  |  |
| Phone:  |                | Fax (option  | ax (optional): Email:  |                                 |                |                                       |  |  |
| Mailing Address:  | Street (PO Box | ):   |  |                                 |                |                                       |  |  |
| Check if same as Operator Information City:   |                |  |  | State:                          |                | Zip:                                  |  |  |
|   |                |  |  |                                 |                |                                       |  |  |
| Signature/Responsib   | le Official    |  |  | Date                            |                |                                       |  |  |
|   |                |  |  |                                 |                |                                       |  |  |
|   |                |  |  |                                 |                |                                       |  |  |

# Instructions for Completing a Notice of Intent (NOI) Form for APDES Excavation Dewatering General Permit.

#### Who Must File an NOI Form:

The following three situations will require NOI submittal; applicants which discharge eligible excavation dewatering discharges to waters of the U.S. that are located within 1,500 feet of a permit defined "DEC mapped contaminated site"; discharges to waters of the U.S. which are greater than 1,500 feet of a permit defined "DEC mapped contaminated site" and are not eligible for coverage under the Construction General Permit; or eligible excavation dewatering discharges to the land which are located within 1,500 feet of a permit defined "DEC mapped contaminated site".

# **Completing the Form**

Obtain and read a copy of the APDES Excavation Dewatering 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 entity that is conducting the excavation dewatering operation and has responsibility for on-site operations necessary to assure compliance to the permit shall complete and submit an NOI.

#### **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 <a href="https://www.epa.gov/npdes/epas-stormwater-discharge-mapping-tools">https://www.epa.gov/npdes/epas-stormwater-discharge-mapping-tools</a> 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 dewatering 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 man-made 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 discharge flow rates 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 dewatering activities are located within 1,500 feet of either an "Active" or "Cleanup Complete-Institutional Control" status DEC contaminated site, see

http://dec.alaska.gov/water/wastewater/stormwater/dewaterhydrostatic/#dewater. If a contaminated site is within 1,500 feet a description of the contaminated site shall be provided including the nature of the contamination and measures to protect the contaminant plume. Additional state agency contact may be necessary which should be noted in the NOI.

#### **BMP Plan**

In accordance to Part 2.2.7 of the permit all excavation dewatering discharges which require NOI submittal are required to develop and submit a BMP plan. Questions were added to the NOI to specify that a BMP plan shall be developed, certified, and submitted with the 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 to Section III Project/Site Information.

#### **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.

# Instructions for Completing a Notice of Intent (NOI) Form for APDES Excavation Dewatering General Permit.

# 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 <a href="http://dec.alaska.gov/water/wastewater/stormwater/apdesenoi/">http://dec.alaska.gov/water/wastewater/stormwater/apdesenoi/</a>. Filing electronically is the fastest way to obtain permit coverage and 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, remember to 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