



**AZMSG2010-002 • AZMSG2010-003**  
**NOTICE OF INTENT (NOI)**  
 for Stormwater Discharges Associated with  
**INDUSTRIAL ACTIVITY**  
 under the AZPDES 2010 Multi-Sector Permits

**FOR COVERAGE, A COMPLETE AND ACCURATE NOI MUST BE SUBMITTED TO:**  
 Arizona Department of Environmental Quality; Surface Water Section/Stormwater Program  
 1110 West Washington, 5415A-1; Phoenix, Arizona 85007

Submitting this completed Notice of Intent (NOI) constitutes notice that the operator identified in Section B of this form requests authorization to discharge pollutants to waters of the United States from the facility identified in Section C under the AZPDES Multi-Sector General Permit(s) (MSGP) for industrial stormwater. Submitting this NOI constitutes your notice to ADEQ that the facility identified in Section C of this form meets the eligibility conditions of Part 1.1 of the MSGP. Please read and make sure you comply with all eligibility requirements, including the requirement to prepare a Stormwater Pollution Prevention Plan. If you are filling out the form electronically, hover computer pointer over form fields to see completion tips.

**A. NOI REVISION (Follow instructions carefully.)**

**2010 Authorization #**  
(ADEQ Use Only)

► Is this NOI a revision for a facility previously filed under the AZPDES 2010 Multi-Sector General Permit?  
 \_\_\_ YES \_\_\_ NO If "yes," complete the following:

1. Provide your current authorization #: AZMSG-\_\_\_\_\_
2. Provide the name of the facility in Part C.1 and enter only the specific information being revised.
3. Complete the certification section (Part G) and have this document signed by the authorized signatory.

**B. FACILITY OPERATOR INFORMATION**

- Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Ext: \_\_\_\_\_
- E-mail: \_\_\_\_\_ Fax: \_\_\_\_\_
- Operator Business Name: \_\_\_\_\_
- Mailing Address: \_\_\_\_\_
- City: \_\_\_\_\_ State: |\_\_\_\_\_| Zip Code: \_\_\_\_\_

**C. FACILITY INFORMATION**

1. Facility Name: \_\_\_\_\_
2. Facility physical location (include the address, if applicable, otherwise provide directions from the nearest municipality):
  - Street address or directions: \_\_\_\_\_
  - \_\_\_\_\_
  - \_\_\_\_\_
  - City: \_\_\_\_\_ State: |\_\_\_\_\_| Zip Code: \_\_\_\_\_
  - County: \_\_\_\_\_ Phone: \_\_\_\_\_ Ext: \_\_\_\_\_
3. Provide the latitude and longitude of the outfall (discharge location) of the facility in degrees/minutes/seconds:
 

Latitude: |\_\_|°|\_\_|'|\_\_|".|\_\_|"  
 (Degrees, minutes, seconds)      Longitude: |\_\_|°|\_\_|'|\_\_|".|\_\_|"  
 (Degrees, minutes, seconds)
4. Have stormwater discharges from the facility been covered previously under an EPA or AZPDES permit? \_\_\_ YES \_\_\_ NO  
 If yes, provide one of the following:
  - The EPA tracking number: AZR05 \_\_\_\_\_ OR
  - The AZPDES MSGP authorization number: AZMSG- \_\_\_\_\_ OR
  - The AZPDES Individual Permit number: \_\_\_\_\_
5. Is the facility located on Indian Country land? \_\_\_ YES \_\_\_ NO
  - ► If you answered yes, DO NOT submit this NOI to ADEQ. The Department does not have permitting authority on Indian Country land. You must coordinate with the U.S. EPA for permit coverage on Indian Country land within Arizona.

6. PRIMARY INDUSTRIAL ACTIVITY: Identify the sector, subsector, and 4-digit Standard industrial Classification (SIC) or Activity Code (AC) that best represents the products produced or services rendered for which your facility is primarily engaged, as defined in the MSGP.

Sector     Subsector     SIC or AC

▶ Area of industrial activity at the primary site that is exposed to stormwater: \_\_\_\_\_ acres

7. CO-LOCATED INDUSTRIAL ACTIVITY: Identify the applicable sector(s), subsector(s) of co-located industrial activity, and 4-digit Standard Industrial Classification (SIC) or Activity Code (AC) for which you are requesting permit coverage.

Sector     Subsector     SIC or AC     ▶ Area of industrial activity exposed to stormwater: \_\_\_\_\_ acre(s)

Sector     Subsector     SIC or AC     ▶ Area of industrial activity exposed to stormwater: \_\_\_\_\_ acre(s)

Sector     Subsector     SIC or AC     ▶ Area of industrial activity exposed to stormwater: \_\_\_\_\_ acre(s)

Sector     Subsector     SIC or AC     ▶ Area of industrial activity exposed to stormwater: \_\_\_\_\_ acre(s)

Sector     Subsector     SIC or AC     ▶ Area of industrial activity exposed to stormwater: \_\_\_\_\_ acre(s)

Sector     Subsector     SIC or AC     ▶ Area of industrial activity exposed to stormwater: \_\_\_\_\_ acre(s)

▶ **TOTAL** of areas listed in Items C.6 and C.7: \_\_\_\_\_ acres

8. Is the facility expected to be inactive and unstaffed at any time during the permit term?  YES  NO

▶ If yes, indicate the estimated starting and ending dates that you expect the facility to be inactive and unstaffed:

From \_\_\_\_\_ to \_\_\_\_\_

**D. DISCHARGE INFORMATION**

1. Does the facility discharge stormwater into a Municipal Separate Storm Sewer System (MS4)?  YES  NO

▶ If yes, name the MS4 operator: \_\_\_\_\_

2. Receiving Water (provide the name of the closest water that receives stormwater, either directly or through a MS4 or other conveyance):

\_\_\_\_\_

**3. Impaired Waters:**

a. Does the facility discharge directly to an impaired water or to an upstream tributary within 2.5 miles of an impaired water?  ____Yes ____No	b. Are there any NEW discharges to an impaired water or to an upstream tributary within 2.5 miles of an impaired water?  ____Yes ____No	If the answer to D.3.a or D.3.b is "yes," answer the following <u>three</u> questions:		
		c.1. What pollutant(s) are causing the impairment?	c.2. Are the pollutant(s) causing the impairment present in the discharge?  ____Yes ____No	c.3. Has a TMDL been completed for the pollutant(s) causing the impairment?  ____Yes ____No

4. Outstanding Arizona Waters (OAW):

a. Are there any NEW or EXPANDED discharges DIRECTLY to an OAW?  YES  NO

b. Are there existing discharges within 2.5 miles of an OAW?  YES  NO

c. Are there any NEW or EXPANDED discharges to an upstream tributary within 2.5 miles of an OAW?  YES  NO

5. Effluent Limitation Guidelines (ELGs) and Sector-Specific Requirements:

a. Are you requesting permit coverage for any stormwater discharges subject to effluent limitation guidelines?  YES  NO

▶ If yes, indicate which ELGs apply to the stormwater discharges by checking the corresponding box(es) on page 3.

Effluent Limitation Guidelines (40 CFR Part/Subpart)	Eligible Discharges	Affected MSGP Sector	Check if Applicable
Part 429, Subpart I	Discharges resulting from spray down or intentional wetting of logs at wet deck storage areas	A	
Part 418, Subpart A	Runoff from phosphate fertilizer manufacturing facilities that comes into contact with any raw materials, finished product, by-products or waste products (SIC 2874)	C	
Part 443, Subpart A	Runoff from asphalt emulsion facilities	D	
Part 411, Subpart C	Runoff from material storage piles at cement manufacturing facilities	E	
Part 436, Subpart B, C, or D	Mine dewatering discharges at crushed stone mines, construction sand and gravel mines, or industrial sand mines	J	
Part 445, Subparts A & B	Runoff from hazardous waste and non-hazardous waste landfills	K, L	
Part 423	Coal pile runoff at steam electric generating facilities	O	

b. If you are a Sector S (Air Transportation) facility, do you anticipate using more than 100,000 gallons of glycol-based deicing/anti-icing chemicals and/or 100 tons or more of urea on an average annual basis?  YES  NO

**E. STORMWATER POLLUTION PREVENTION PLAN (SWPPP)**

- I confirm that a SWPPP meeting the requirements of the general permit has been developed and will be implemented prior to discharging stormwater from this facility.  YES  NO
- Name of the person to contact to view the SWPPP: \_\_\_\_\_
- Telephone number of the SWPPP contact: \_\_\_\_\_ Ext: \_\_\_\_\_ Fax: \_\_\_\_\_
- E-mail: \_\_\_\_\_
- If the answer to Items D.3.b or D.4.c is "yes," have you included a copy of the SWPPP with this NOI?  YES  NO

**F. FEES**

I confirm that the correct fee payment is included with the NOI.

Less than or equal to 1 acre: \$350.00

Greater than 1 acre but less than or equal to 40 acres: \$500.00

Greater than 40 acres: \$1,000.00

Review of SWPPP by ADEQ, if required (see section E.5 above): add \$1,000.00.

No fee is required. The signer represents an Arizona State agency (exempt from AZPDES fees).

No fee is required. This is an amendment of an NOI filed previously under the 2010 MSGP, for which the fee was paid or not required.

Total fee payment included: \$ \_\_\_\_\_

**G. CERTIFICATION**

Pursuant to A.R.S. § 41-1030:

(1) ADEQ shall not base a licensing decision, in whole or in part, on a requirement or condition not specifically authorized by statute or rule. General authority in a statute does not authorize a requirement or condition unless a rule is made pursuant to it that specifically authorizes the requirement or condition.

(2) Prohibited licensing decisions may be challenged in a private civil action. Relief may be awarded to the prevailing party against ADEQ, including reasonable attorney fees, damages, and all fees associated with the license application.

(3) ADEQ employees may not intentionally or knowingly violate the requirement for specific licensing authority. Violation is cause for disciplinary action or dismissal, pursuant to ADEQ's adopted personnel policy. ADEQ employees are still afforded the immunity in A.R.S. §§ 12-821.01 and 12-820.02.

I certify under penalty of law that I have met the eligibility conditions of this permit and 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, I certify that the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I certify that I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

Print Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Business Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Phone: \_\_\_\_\_ Ext: \_\_\_\_\_