



NOTICE OF INTENT (NOI)

for Single Source De Minimis Discharges

to Waters of the United States under the
AZPDES De Minimis General Permit (AZG2016-001)

FOR COVERAGE, A COMPLETE AND ACCURATE NOI MUST BE SUBMITTED TO:
Arizona Department of Environmental Quality; Surface Water Section — De Minimis GP Program
1110 West Washington Street, 5415A-1; Phoenix, Arizona 85007

A. GENERAL INFORMATION

1. **NAME OF PROJECT:** _____

2. **OWNER of the facility or discharge activity**

Contact Name: _____ Position/Title: ~~AA~~ _____
Business/Agency: _____ Phone: _____
Mailing Address: _____
City: _____ State: |__| |__| Zip Code: _____
e-mail: _____

3. **OPERATOR of the facility or discharge activity** (if different from OWNER)

Contact Name: _____ Position/Title: _____
Business/Agency: _____ Phone: _____
Mailing Address: _____
City: _____ State: |__| |__| Zip Code: _____
e-mail: _____

4. **OTHER CONTACT** (if different from OWNER / OPERATOR)

Contact Name: _____ Position/Title: _____
Business/Agency: _____ Phone: _____
Mailing Address: _____
City: _____ State: |__| |__| Zip Code: _____
e-mail: _____

5. **OTHER ENVIRONMENTAL PERMITS HELD OR APPLIED FOR** (related to the discharge)

(Reference Permit Numbers & Type: previous De Minimis authorizations, UST, RCRA, APP, etc.)

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Name of project: _____

DESCRIPTION OF DISCHARGE:

Include purpose of discharge, any treatment processes, any added chemicals, and the presence and concentration of any constituents of concern (known or suspected) in discharge. Describe any vessels or piping associated with discharge and distance from receiving water. (Attach additional text if necessary.)

RECEIVING WATER (you may check more than one box if applicable):

EPHEMERAL WATERS or NON-DWS USE CANALS EFFLUENT-DEPENDENT WATERS
 PERENNIAL or INTERMITTENT WATERS DWS-USE CANALS ≤ 1/4 mi. from OAW or IMPAIRED WATERS

Name of receiving stream or waterbody: _____

Name of closest downstream perennial/intermittent water, if different from receiving stream or waterbody:

DISTANCE to closest downstream perennial/intermittent water, if listed above: _____

Is there potential for the discharge to enter a regulated municipal separate storm sewer system (MS4)?

YES NO

If YES, enter name of MS4: _____

MAP (required):

A legible, scaled map is attached detailing the path from the point of release to the point of discharge(s) to a water of the U.S. When the discharge is conveyed to the water of the U.S. through an MS4, canal, or other conveyance, the location of the entry to conveyance is shown.

Name of project: _____

C. BEST MANAGEMENT PRACTICES PLAN (BMPP)

1. _____ I confirm that a BMPP meeting the requirements of the De Minimis General Permit (No. AZG2016-001) has been or will be prepared, and will be fully implemented for the discharge.

Contact Name for BMPP: _____ Phone: _____

Business/Agency: _____ E-mail: _____

Mailing address: Same as page 1: _____ Owner _____ Operator _____ Other Contact

BMPP Contact mailing address if different from above:

City: _____ State: _____ ZIP Code: _____

2. _____ For discharges to or within 1/4 mile of OAW or impaired waters: I confirm that a copy of the BMPP is enclosed for review by ADEQ.

D. FEES

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

_____ NOI for Single Source Discharge: \$250.00

_____ BMPP review (see item C.2. above): add \$1,000.00

Total fee payment included: \$ _____

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

_____ No fee is required. This is an amendment of a previous NOI for which the fee was paid or not required.

(Please continue to Section E., APPLICANT CERTIFICATION)

Name of project: _____

E. APPLICANT CERTIFICATION (see Parts III.B.15. and V.K.1 of the General Permit)

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 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 this system, or those persons directly responsible for gathering the information, I believe the information submitted is 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. In addition I certify that the operator will comply with all terms and conditions stipulated in General Permit No. AZG2016-001 issued by the Director."

Printed Name of Signer: _____ Title: _____

Signature: _____ Date: _____

Business / Agency: _____

Signer or Business/Agency is the: Owner and Operator of the facility or discharge activity.
(check one)

Operator of the facility or discharge activity.