FOR AGENCY USE ONLY		
Date Received		
Year	Month	Day
Certificate of Coverage		
N C G		
Check #	Amount	
Permit Assigned to		

Division of Water Quality / Water Quality Section

National Pollutant Discharge Elimination System

NCG500000

NOTICE OF INTENT

National Pollutant Discharge Elimination System application for coverage under General Permit NCG500000: Non-contact cooling water, boiler blowdown, cooling tower blowdown, condensate, and similar point source discharges

(Please print or type)

1) Mailing address* of owner/operator:

Company Name _____
Owner Name _____
Street Address _____
City _____ State _____ ZIP Code _____
Telephone No. _____ _____ Fax: _____ _____

* Address to which all permit correspondence will be mailed

2) Location of facility producing discharge:

Facility Name _____
Facility Contact _____
Street Address _____
City _____ State _____ ZIP Code _____
County _____
Telephone No. _____ _____ Fax: _____ _____

3) Physical location information:

Please provide a narrative description of how to get to the facility (use street names, state road numbers, and distance and direction from a roadway intersection). _____

_____

(A copy of a county map or USGS quad sheet with facility clearly located on the map is required to be submitted with this application)

4) This NPDES permit application applies to which of the following :

☐ New or Proposed
☐ Modification
Please describe the modification: _____
☐ Renewal
Please specify existing permit number and original issue date: _____

5) Does this facility have any other NPDES permits?

☐ No
☐ Yes
If yes, list the permit numbers for all current NPDES permits for this facility: _____

_____

6) What is the nature of the business applying for this permit? _____

_____

7) Description of Discharge:

a) Is the discharge directly to the receiving water? ☐ Yes ☐ No
If no, submit a site map with the pathway to the potential receiving waters clearly marked. This includes tracing the pathway of the storm sewer to the discharge point, if the storm sewer is the only viable means of discharge.

b) Number of discharge points (ditches, pipes, channels, etc. that convey wastewater from the property): _____

c) What type of wastewater is discharged? Indicate which discharge points, if more than one.

☐ Non-contact cooling water Discharge point(s) #: _____
☐ Boiler Blowdown Discharge point(s) #: _____
☐ Cooling Tower Blowdown Discharge point(s) #: _____
☐ Condensate Discharge point(s) #: _____
☐ Other Discharge point(s) #: _____
(Please describe "Other") _____

d) Volume of discharge per each discharge point (in GPD):
#1: _____ #2: _____ #3: _____ #4 _____

e) Please describe the type of process (i.e., compressor, A/C unit, chiller, boiler, etc.) the wastewater is being discharged from, per each separate discharge point (if applicable, use separate sheet): ___
_____

8) Please check the type of chemical added to the wastewater for treatment , per each separate discharge point (if applicable, use separate sheet):

☐ Biocides Name: _____ Manuf.: _____
☐ Corrosion inhibitors Name: _____ Manuf.: _____
☐ Chlorine Name: _____ Manuf.: _____
☐ Algaecide Name: _____ Manuf.: _____
☐ Other Name: _____ Manuf.: _____
☐ None

9) If any box in item (8) above, other than none, was checked, a completed Biocide 101 Form and manufacturers' information on the additive is required to be submitted with the application for the Division's review.

10) Is there any type of treatment being provided to the wastewater before discharge (i.e., retention ponds, settling ponds, etc.)? ☐ Yes ☐ No

If yes, please include design specifics (i.e., design volume, retention time, surface area, etc.) with submittal package. Existing treatment facilities should be described in detail. Design criteria and operational data (including calculations) should be provided to ensure that the facility can comply with the requirements of the General Permit. The treatment shall be sufficient to meet the limits set by the general permits.

Note: Construction of any wastewater treatment facilities requires submission of three (3) sets of plans and specifications along with the application. Design of treatment facilities must comply with the requirements of 15A NCAC 2H .0138. If construction applies to this discharge, include the three sets of plans and specifications with this application.

11) Discharge Frequency:

a) The discharge is: ☐ Continuous ☐ Intermittent ☐ Seasonal

i) If the discharge is intermittent, describe when the discharge will occur: _____

_____

ii) If seasonal check the month(s) the discharge occurs: ☐ Jan. ☐ Feb. ☐ Mar. ☐ Apr. ☐ May ☐ Jun. ☐ Jul. ☐ Aug. ☐ Sept. ☐ Oct. ☐ Nov. ☐ Dec.

b) How many days per week is there a discharge? _____

c) Please check the days discharge occurs:
☐ Sat. ☐ Sun. ☐ Mon. ☐ Tue. ☐ Wed. ☐ Thu. ☐ Fri.

12) Pollutants:

Please list any known pollutants that are present in the discharge, per each separate discharge point (if applicable, use separate sheet): _____

13) Receiving waters:

a) What is the name of the body or bodies of water (creek, stream, river, lake, etc.) that the facility wastewater discharges end up in? If the site wastewater discharges to a separate storm sewer system (4S), name the operator of the 4S (e.g. City of Raleigh). _____

b) Stream Classification: _____

14) Alternatives to Direct Discharge:

Address the feasibility of implementing each of the following non-discharge alternatives

a) Connection to a Municipal or Regional Sewer Collection System
b) Subsurface disposal (including nitrification field, infiltration gallery, injection wells, etc.)
c) Spray irrigation

The alternatives to discharge analysis should include boring logs and/or other information indicating that a subsurface system is neither feasible nor practical as well as written confirmation indicating that connection to a POTW is not an option. It should also include a present value of costs analysis as outlined in the Division's "*Guidance For the Evaluation of Wastewater Disposal Alternatives".*

15) Additional Application Requirements:

For new or proposed discharges, the following information must be included in triplicate with this application or it will be returned as incomplete.

a) 7.5 minute series USGS topographic map (or a photocopied portion thereof) with discharge location clearly indicated.
b) Site map, if the discharge is not directly to a stream, the pathway to the receiving stream must be clearly indicated. This includes tracing the pathway of a storm sewer to its discharge point.
c) If this application is being submitted by a consulting engineer (or engineering firm), include documentation from the applicant showing that the engineer (Or firm) submitting the application has been designated an authorized Representative of the applicant.
d) Final plans for the treatment system (if applicable). The plans must be signed and sealed by a North Carolina registered Professional Engineer and stamped-"Final Design-Not released for construction".

e) Final specifications for all major treatment components (if applicable). The specifications must be signed and sealed by a North Carolina registered Professional Engineer and shall include a narrative description of the treatment system to be constructed.

I certify that I am familiar with the information contained in this application and that to the best of my knowledge and belief such information is true, complete, and accurate.

Printed Name of Person Signing: _____
Title: _____

_____ _____
(Signature of Applicant) *(Date Signed)*

North Carolina General Statute 143-215.6 b (i) provides that:

Any person who knowingly makes any false statement, representation, or certification in any application, record, report, plan or other document filed or required to be maintained under Article 21 or regulations of the Environmental Management Commission implementing that Article, or who falsifies, tampers with or knowingly renders inaccurate any recording or monitoring device or method required to be operated or maintained under Article 21 or regulations of the Environmental Management Commission implementing that Article, shall be guilty of a misdemeanor punishable by a fine not to exceed $25,000, or by imprisonment not to exceed six months, or by both. (18 U.S.C. Section 1001 provides a punishment by a fine of not more than $25,000 or imprisonment not more than 5 years, or both, for a similar offense.)

Notice of Intent must be accompanied by a check or money order for $100.00 made payable to:

NCDENR

Mail three (3) copies of the entire package to:

NPDES Permits Unit
Division of Water Quality
1617 Mail Service Center
Raleigh, North Carolina 27699-1617

Final Checklist

This application will be returned as incomplete unless all of the following items have been included:

- ☐ Check for $100 made payable to NCDENR
- ☐ 3 copies of county map or USGS quad sheet with location of facility clearly marked on map
- ☐ 3 copies of this completed application and all supporting documents
- ☐ 3 sets of plans and specifications signed and sealed by a North Carolina P.E.
- ☐ Thorough responses to items 1-7 on this application
- ☐ Alternatives analysis including present value of costs for all alternatives

Note

The submission of this document does not guarantee the issuance of an NPDES permit