NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110001

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Neuse River WWTP

Facility Address1: 8500 Battle Bridge Rd

Facility Address2:

City, State & Zip: Raleigh, NC 27610

Owner Information Details:

Owner Name: City of Raleigh Public Utilities Department

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: John R Carman **Title:** Director Public Utilities

Address1: PO Box 590

Address2:

City, State & Zip: Raleigh, NC 27602-0590

Work Phone: 919-857-4540 **Fax:** 919-857-4545

Email Address: john.carman@raleighnc.gov

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
John R Carman	Director Public Utilities	PO Box 590, Raleigh, NC 27602-0590	919-857-4540	919-857-4545	john.carman@raleighnc.gov

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
John W Gibson	NRWWTP fac mgr	PO Box 590, Raleigh, NC 27602-0590	919-996-3684	919-662-5707	john.gibson@ci.raleigh,nc,us

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Tim W Woody	Resue Superintendent Wastewater and	PO Box 590, Raleigh, NC 27602-0590	919-996-3700	919-662-5707	tim.woody@raleighnc.gov

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110004

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: North Buffalo Creek WWTP

Facility Address1: 2199 White St

Facility Address2:

City, State & Zip: Greensboro, NC 27405-7461

Owner Information Details:

Owner Name: City of Greensboro

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Steve Drew **Title:** Division Manager Operations

Address1: 2602 S Elm -Eugene St

Address2:

City, State & Zip: Greensboro, NC 27406-9787

Work Phone: 336-373-7893 **Fax:** 336-412-6305

Email Address: steve.drew@greensboro-nc.gov

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Lewis Walker		2503 White St, Greensboro, NC 27405	336-373-7662		lewis.walker@greensboro-nc.gov

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Steve Drew	Division Manager Operations	PO Box 3136, Greensboro, NC 27402-3136	336-373-2055	336-412-6305	allan.williams@ci.greensboro.nc.us

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Steve Drew	Division Manager Operations	PO Box 3136, Greensboro, NC 27402-3136	336-373-2055	336-412-6305	allan.williams@ci.greensboro.nc.us

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110005

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: T.Z. Osborne WWTP

Facility Address1: 2350 Huffine Mill Rd

Facility Address2:

City, State & Zip: Mc Leansville, NC 27301

Owner Information Details:

Owner Name: City of Greensboro

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Steve Drew **Title:** Division Manager Operations

Address1: 2602 S Elm -Eugene St

Address2:

City, State & Zip: Greensboro, NC 27406-9787

Work Phone: 336-373-7893 **Fax:** 336-412-6305

Email Address: steve.drew@greensboro-nc.gov

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Lewis Walker		2503 White St, Greensboro, NC 27405	336-373-7662		lewis.walker@greensboro-nc.gov

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Steve Drew	Division Manager Operations	PO Box 3136, Greensboro, NC 27402-3136	336-373-2055	336-412-6305	allan.williams@ci.greensboro.nc.us

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Steve Drew	Division Manager Operations	PO Box 3136, Greensboro, NC 27402-3136	336-373-2055	336-412-6305	allan.williams@ci.greensboro.nc.us

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110006

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Smith Creek WWTP

Facility Address1: 8505 Ligon Mill Rd

Facility Address2:

City, State & Zip: Wake Forest, NC 27587-2932

Owner Information Details:

Owner Name: City of Raleigh Public Utilities Department

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: John R Carman **Title:** Director Public Utilities

Address1: PO Box 590

Address2:

City, State & Zip: Raleigh, NC 27602-0590

Work Phone: 919-857-4540 **Fax:** 919-857-4545

Email Address: john.carman@raleighnc.gov

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
John R Carman	Director Public Utilities	PO Box 590, Raleigh, NC 27602-0590	919-857-4540	919-857-4545	john.carman@raleighnc.gov

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Wade W Shaw	facility mgr	PO Box 590, Raleigh, NC 27602-0590	919-554-6611	919-554-6602	wade.shaw@raleighnc.gov

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Tim W Woody	Resue Superintendent Wastewater and	PO Box 590, Raleigh, NC 27602-0590	919-996-3700	919-662-5707	tim.woody@raleighnc.gov

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110008

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Charlotte-Irwin Creek WWTP

Facility Address1: 4000 Westmont Dr

Facility Address2:

City, State & Zip: Charlotte, NC 28217

Owner Information Details:

Owner Name: Charlotte-Mecklenburg Utilities

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Jacqueline A Jarrell **Title:** PE

Address1: 4222 Westmont Dr

Address2:

City, State & Zip: Charlotte, NC 28217-1030

Work Phone: 704-336-4460 **Fax:** 704-336-5081

Email Address: jjarrell@ci.charlotte.nc.us

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Jacqueline A Jarrell	PE	4222 Westmont Dr, Charlotte, NC 28217-1030	704-336-4460	704-336-5081	jjarrell@ci.charlotte.nc.us

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Michael Lingerfelt		4000 Westmont Dr, Charlotte, NC 28217	704-357-1344 Ext. 223	704-357-8061	mlingerfelt@ci.charlotte.nc.us

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Jacqueline A Jarrell	PE	4222 Westmont Dr, Charlotte, NC 28217-1030	704-336-4460	704-336-5081	jjarrell@ci.charlotte.nc.us

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110010

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Charlotte-Mcalpine Creek WWTP

Facility Address1: 12701 Lancaster Highway

Facility Address2:

City, State & Zip: Pineville, NC 28134-6386

Owner Information Details:

Owner Name: Charlotte-Mecklenburg Utilities

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Jacqueline A Jarrell **Title:** PE

Address1: 4222 Westmont Dr

Address2:

City, State & Zip: Charlotte, NC 28217-1030

Work Phone: 704-336-4460 **Fax:** 704-336-5081

Email Address: jjarrell@ci.charlotte.nc.us

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Jacqueline A Jarrell	PE	4222 Westmont Dr, Charlotte, NC 28217-1030	704-336-4460	704-336-5081	jjarrell@ci.charlotte.nc.us

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Sandy Kim Neely		12701 Lancaster Hwy, Charlotte, NC 28217	704-542-0736	704-542-1918	kneely@ci.charlotte.nc.us

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Jacqueline A Jarrell	PE	4222 Westmont Dr, Charlotte, NC 28217-1030	704-336-4460 Ext. 238	704-336-5081	jjarrell@ci.charlotte.nc.us

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110011

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: McDowell Creek WWTP

Facility Address1: 4901 Neck Rd NCSR 2074

Facility Address2:

City, State & Zip: Huntersville, NC 28078

Owner Information Details:

Owner Name: Charlotte-Mecklenburg Utilities

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Jacqueline A Jarrell **Title:** PE

Address1: 4222 Westmont Dr

Address2:

City, State & Zip: Charlotte, NC 28217-1030

Work Phone: 704-336-4460 **Fax:** 704-336-5081

Email Address: jjarrell@ci.charlotte.nc.us

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Jacqueline A Jarrell	PE	4222 Westmont Dr, Charlotte, NC 28217-1030	704-336-4460	704-336-5081	jjarrell@ci.charlotte.nc.us

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Joseph Locklear	mgr plant	4901 Neck Rd, Huntersville, NC 28078-8347	704-875-6443	704-875-3047	jlocklear@ci.charlotte.nc.us
Steven Joseph Lockler		5622 Oak Dr, Charlotte, NC 28216-2606	704-875-6443		

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Jacqueline A Jarrell	PE	5100 Brookshire Blvd, Charlotte, NC 28216-3371	704-336-4460	704-423-9151	jjarrell@ci.charlotte.nc.us

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110012

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Charlotte-Sugar Creek WWTP

Facility Address1: 5301 Closeburn Rd

Facility Address2:

City, State & Zip: Charlotte, NC 28217

Owner Information Details:

Owner Name: Charlotte-Mecklenburg Utilities

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Jacqueline A Jarrell **Title:** PE

Address1: 4222 Westmont Dr

Address2:

City, State & Zip: Charlotte, NC 28217-1030

Work Phone: 704-336-4460 **Fax:** 704-336-5081

Email Address: jjarrell@ci.charlotte.nc.us

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Jacqueline A Jarrell	PE	4222 Westmont Dr, Charlotte, NC 28217-1030	704-336-4460	704-336-5081	jjarrell@ci.charlotte.nc.us

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
William McDonald Allen		4000 Westmont Dr, Charlotte, NC 28217	704-553-2124		ballen@ci.charlotte.nc.us

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Jacqueline A Jarrell	PE	5100 Brookshire Blvd, Charlotte, NC 28216-3371	704-336-4460	704-336-5081	jjarrell@ci.charlotte.nc.us

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110013

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: City of Winston-Salem - Archie Elledge WWTP

Facility Address1: 2801 Griffith Rd

Facility Address2:

City, State & Zip: Winston Salem, NC 27103-6417

Owner Information Details:

Owner Name: City of Winston-Salem

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: James F Crump **Title:**

Address1: 2801 Griffith Rd

Address2:

City, State & Zip: Winston Salem, NC 27103-6417

Work Phone: 336-765-0165 **Fax:**

Email Address:

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Jon M Southern		2801 Griffith Rd, Winston Salem, NC 27103-6417	336-397-7600		jons@cityofws.org

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Norman Lee Byerly		2799 Griffith Rd, Winston Salem, NC 27103-6417	910-765-0130	336-659-4320	LeeB@CityofW-S.org

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110014

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Town of North Wilkesboro WWTP

Facility Address1: 100 Thurman St

Facility Address2:

City, State & Zip: North Wilkesboro, NC 28659

Owner Information Details:

Owner Name: Town of North Wilkesboro

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Larry South **Title:** manager town

Address1: PO Box 218

Address2:

City, State & Zip: North Wilkesboro, NC 28659

Work Phone: 336-667-7129 **Fax:** 336-838-1779

Email Address: townmanager@north-wilkesboro.com

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Larry South	manager town	PO Box 218, North Wilkesboro, NC 28659	336-667-7129	336-838-1779	townmanager@north-wilkesboro.com

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Jimmy Lee Martin		PO Box 218, North Wilkesboro, NC 28659	336-838-5001	336-838-1779	lov1572@hotmail.com

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110015

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Fayetteville-Cross Creek Wrf

Facility Address1: 601 N Eastern Blvd

Facility Address2:

City, State & Zip: Fayetteville, NC 28301

Owner Information Details:

Owner Name: PWC/Fayetteville

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Dickie Vinent **Title:**

Address1: PO Drawer 1089

Address2:

City, State & Zip: Fayetteville, NC 28302-1089

Work Phone: 910-223-4712 **Fax:** 910-484-1228

Email Address: dickie.vinent@faypwc.com

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Wendell C Baxley	/ facilities op r super w	PO Box 1089, Fayetteville, NC 28302-1089	910-223-4700	910-484-1228	chuck.baxley@faypwc.com

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Dickie Vinent		PO Drawer 1089, Fayetteville, NC 28302-1089	910-483-1401		

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110018

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Westside WWTP

Facility Address1: 1044 W Burton Rd

Facility Address2:

City, State & Zip: Thomasville, NC 27360

Owner Information Details:

Owner Name: City of High Point

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Chris Thompson **Title:**

Address1: PO Box 230

Address2:

City, State & Zip: High Point, NC 27261

Work Phone: 336-883-3215 **Fax:** 336-883-1675

Email Address:

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Melanie Bruton	MRF super	5875 Riverdale Dr, Jamestown, NC 27282	336-883-3517	336-883-3624	melanie.bruton@highpointnc.gov
Terry L Houk		PO Box 230, High Point, NC 27261	336-883-3215	336-883-3490	terry.houk@ci.high-point.nc.us
Chris Thompson		PO Box 230, High Point, NC 27261	336-883-3215	336-883-3149	

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
John Hodges	mgr plants wastewater	PO Box 230, High Point, NC 27261	336-822-4730		john.hodges@highpointnc.gov

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Terry L Houk		PO Box 230, High Point, NC 27261	336-883-3215	336-883-3490	terry.houk@ci.high-point.nc.us

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110019

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: High Point City-Eastside WWTP

Facility Address1: 5898 Riverdale Rd

Facility Address2:

City, State & Zip: Jamestown, NC 27282

Owner Information Details:

Owner Name: City of High Point

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Chris Thompson **Title:**

Address1: PO Box 230

Address2:

City, State & Zip: High Point, NC 27261

Work Phone: 336-883-3215 **Fax:** 336-883-1675

Email Address:

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Melanie Bruton	MRF super	5875 Riverdale Dr, Jamestown, NC 27282	336-883-3517	336-883-3624	melanie.bruton@highpointnc.gov
Terry L Houk		PO Box 230, High Point, NC 27261	336-883-3215	336-883-3490	terry.houk@ci.high-point.nc.us
Chris Thompson		PO Box 230, High Point, NC 27261	336-883-3215	336-883-3149	

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
John Hodges	mgr plants wastewater	PO Box 230, High Point, NC 27261	336-822-4730	336-883-6704	john.hodges@highpointnc.gov

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Thomas Pryor Gore		PO Box 230, High Point, NC 27261	336-883-3410	336-883-3419	terry.houk.@ci.high-point.nc.us
Terry L Houk		PO Box 230, High Point, NC 27261	336-883-3215	336-883-3490	terry.houk@ci.high-point.nc.us

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110021

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Graham City-WWTP

Facility Address1: 1204 E Gilbreath St

Facility Address2:

City, State & Zip: Graham, NC 27253

Owner Information Details:

Owner Name: City of Graham

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Chris Rollins **Title:**

Address1: PO Drawer 357

Address2:

City, State & Zip: Graham, NC 27253-0357

Work Phone: 336-570-6700 **Fax:** 336-570-6703

Email Address: crollins@cityofgraham.com

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
David W Lawson		PO Drawer 357, Graham, NC 27253-0357	336-570-6721	336-513-5502	dlawson@cityofgraham.com

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Ray Folgeman		PO Drawer 357, Graham, NC 27253-0357	336-570-6721	336-513-5502	wtp@netpath.net

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110022

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Monroe WWTP

Facility Address1: 775 Treeway Dr

Facility Address2:

City, State & Zip: Monroe, NC 28110

Owner Information Details:

Owner Name: City of Monroe

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Russell G Colbath **Title:** dir of resources water

Address1: PO Box 69

Address2:

City, State & Zip: Monroe, NC 28111

Work Phone: 704-282-4624 **Fax:** 704-282-5764

Email Address: rcolbath@monroenc.org

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Chris Costner		PO Box 69, Monroe, NC 28111	704-282-4537		ccostner@monroenc.org
Russell G Colbath	dir of resources water	PO Box 69, Monroe, NC 28111	704-282-4624	704-282-5764	rcolbath@monroenc.org

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Kyle Ketchum	super wwtp	PO Box 69, Monroe, NC 28111	704-282-4612	704-283-2820	kketchum@monroenc.org

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110023

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Belmont WWTP

Facility Address1: 298 Parkdale Rd

Facility Address2:

City, State & Zip: Belmont, NC 28012

Owner Information Details:

Owner Name: City of Belmont

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Barry L Webb **Title:** city manager

Address1: PO Box 431

Address2:

City, State & Zip: Belmont, NC 28012-0431

Work Phone: 704-825-5586 **Fax:** 704-825-0514

Email Address: bwebb@cityofbelmont.org

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Barry L Webb	city manager	PO Box 431, Belmont, NC 28012-0431	704-825-5586	704-825-0514	bwebb@cityofbelmont.org

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Sandra Marie Craft		Belmont WWTP, PO Box 431, Belmont, NC 28012-0431	704-825-3791	704-825-0514	scraft@cityofbelmont.org

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Chad Waldrup	coord stormwater	PO Box 431, Belmont, NC 28012-0431	704-901-2076	704-825-6502	cwaldrup@cityofbelmont.org

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110024

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Goldsboro City-Biosolids Compost Facility

Facility Address1: 200 Westbrook Rd

Facility Address2:

City, State & Zip: Goldsboro, NC 27530

Owner Information Details:

Owner Name: City of Goldsboro

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Scott A Stevens **Title:** City Manager

Address1: PO Drawer A

Address2:

City, State & Zip: Goldsboro, NC 27533-9701

Work Phone: 919-580-4330 **Fax:** 919-580-4344

Email Address: sstevens@goldsboronc.gov

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Karen H Brashear		PO Drawer A, Goldsboro, NC 27533-9701	919-735-3329 Ext. 101	919-735-8907	kbrashear@ci.goldsboro.nc.us

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Karen H Brashear		PO Drawer A, Goldsboro, NC 27533-9701	919-735-3329	919-735-8907	kbrashear@goldsboronc.gov

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110025

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Mebane City-WWTP

Facility Address1: 701 Corrigidor Rd

Facility Address2:

City, State & Zip: Elon College, NC 27244

Owner Information Details:

Owner Name: City of Mebane

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: David S Cheek **Title:** city mgr

Address1: 106 E Washington St

Address2:

City, State & Zip: Mebane, NC 27302

Work Phone: 919-563-5901 **Fax:**

Email Address: dcheek@cityofmebane.com

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Dennis Hodge		106 E Washington St, Mebane, NC 27302	919-563-6141	919-563-1007	

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110029

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Williamston WWTP

Facility Address1: 1581 Willow Dr

Facility Address2:

City, State & Zip: Williamston, NC 27892

Owner Information Details:

Owner Name: Town of Williamston

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Donald W. Christoper **Title:**

Address1: PO Box 506

Address2:

City, State & Zip: Williamston, NC 27892-0506

Work Phone: 252-792-5142 **Fax:**

Email Address:

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Gene Reed	ORC	PO Box 506, Williamston, NC 27892-0506	252-792-4744	252-792-6449	

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Gene Reed	ORC	PO Box 506, Williamston, NC 27892-0506	252-792-4744	252-792-6449	

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110030

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Tar River Regional WWTP

Facility Address1: 3031 Water Treatment Plant Rd

Facility Address2: NC Hwy 97 E

City, State & Zip: Rocky Mount, NC 27802

Owner Information Details:

Owner Name: City of Rocky Mount

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Charles W Penny **Title:** City Manager

Address1: PO Box 1180

Address2:

City, State & Zip: Rocky Mount, NC 27802-1180

Work Phone: 252-972-1325 **Fax:**

Email Address:

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Jonathan Boone	Director Public Works of	PO Box 1180, Rocky Mount, NC 27802-1180	252-972-1299	252-972-1295	jonathan.boone@rockymountnc.gov

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Leon Bass	Superintendent	3031 Treatment Plant Rd, Rocky Mount, NC 27801	252-972-1400	252-972-1424	

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Wayne A Hollowell		PO Box 1180, Rocky Mount, NC 27802-1180	252-972-1291	252-972-1173	wayne.hollowell@rockymountnc.gov

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110031

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: wilkesboro - Cub Creek WWTP

Facility Address1: 701 Snyder St

Facility Address2:

City, State & Zip: Wilkesboro, NC 28697

Owner Information Details:

Owner Name: Town of Wilkesboro

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Kenneth D Noland **Title:** manager town

Address1: PO Box 1056

Address2:

City, State & Zip: Wilkesboro, NC 28697-1056

Work Phone: 336-838-3951 **Fax:** 336-838-7616

Email Address: townmanager@wilkesboronorthcarolina.org

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Kenneth D Noland	manager town	PO Box 1056, Wilkesboro, NC 28697-1056	336-838-3951	336-838-7616	townmanager@wilkesboronorthcarolina.org
Brenda Welborn			336-667-2391		

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Sam Call	mgr utility	PO Box 1056, Wilkesboro, NC 28697-1056	336-828-4631	336-828-7616	scall@wilkesboronc.org

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Sam Call	mgr utility	PO Box 1056, Wilkesboro, NC 28697-1056	336-828-4631	336-828-7616	scall@wilkesboronc.org

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110032

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Sanford City - Big Buffalo WWTP

Facility Address1: 5324 Iron Furnace Rd

Facility Address2:

City, State & Zip: Sanford, NC 27330

Owner Information Details:

Owner Name: City Of Sanford

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Victor I Czar **Title:** PE

Address1: PO Box 3729

Address2:

City, State & Zip: Sanford, NC 27330-3729

Work Phone: 919-775-8232 **Fax:** 919-774-8179

Email Address: victor.czar@sanford.nc.net

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Jay Grainger		PO Box 338, Sanford, NC 27331-3729	919-775-8305	919-776-5037	jay.grainger@sanfordnc.net

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Victor I Czar	PE	PO Box 3729, Sanford, NC 27330-3729	919-775-8232	919-774-8179	

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110033

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Clark Creek WWTP

Facility Address1: 1407 McKay Rd

Facility Address2: NCSR 2014

City, State & Zip: Newton, NC 28658

Owner Information Details:

Owner Name: City of Newton

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Wilce Martin **Title:** Director Public Works

Address1: PO Box 550

Address2:

City, State & Zip: Newton, NC 28658

Work Phone: 828-695-4310 **Fax:** 828-465-7422

Email Address: wmartin@newtonnc.gov

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Glenn Pattishall		PO Box 550, Newton, NC 28658	828-464-7400		gpattishall@newtonnc.gov

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Danny Sigmon		PO Box 550, Newton, NC 28658	828-465-7460	828-465-7422	

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Angie Harris		PO Box 550, Newton, NC 28658	828-695-4288	838-465-7422	

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110034

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Hickory City - Regional Compost Facility

Facility Address1: 3200 20th Ave SE

Facility Address2:

City, State & Zip: Hickory, NC 28602

Owner Information Details:

Owner Name: City of Hickory

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Mick Berry **Title:**

Address1: PO Box 398

Address2:

City, State & Zip: Hickory, NC 28601-0398

Work Phone: 828-323-7412 **Fax:** 828-323-7550

Email Address: mberry@hickory.nc.gov

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Kevin B Greer	Asst Director Public Services	PO Box 398, Hickory, NC 28601-0398	828-323-7427	828-322-1405	kgreer@hickorync.gov

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Wayne Carroll		3200 20th Ave SE, Newton, NC 28658	828-465-1401	828-465-6551	donald.carroll@veoliawaterna.com

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Kevin Greer	Director Public Services sst	PO Box 398, Hickory, NC 28601-0398	828-323-7427	828-322-1405	kgreer@hickorync.gov

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110035

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Brevard WWTP

Facility Address1: 3226 Wilson Rd

Facility Address2:

City, State & Zip: Pisgah Forest, NC 28768

Owner Information Details:

Owner Name: City of Brevard

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Joseph M Moore **Title:** E P

Address1: 95 W Main St

Address2:

City, State & Zip: Brevard, NC 28712

Work Phone: 828-885-5601 **Fax:** 828-883-2853

Email Address:

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110036

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Tarboro WWTP

Facility Address1: US Hwy 64 Bypass

Facility Address2:

City, State & Zip: Tarboro, NC 27886

Owner Information Details:

Owner Name: Town of Tarboro

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: M Alan Thornton **Title:** Manager Town

Address1: 500 Main St

Address2:

City, State & Zip: Tarboro, NC 27886-0220

Work Phone: 252-641-4250 **Fax:** 252-641-4286

Email Address: alanthornton@tarboro-nc.com

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
M Alan Thornton	Manager Town	500 Main St, Tarboro, NC 27886-0220	252-641-4250	252-641-4286	alanthornton@tarboro-nc.com

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Michael Allen	super wwtp	PO Box 220, Tarboro, NC 27886-0220	252-641-4251	252-641-4230	mallen@tarboro-nc.com

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Michael Allen	super wwtp	PO Box 220, Tarboro, NC 27886-0220	252-641-4251	252-641-4230	mallen@tarboro-nc.com

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110037

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Hickory City-Henry Fork WWTP

Facility Address1: 4014 River Rd

Facility Address2:

City, State & Zip: Hickory, NC 28602

Owner Information Details:

Owner Name: City of Hickory

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Mick Berry **Title:**

Address1: PO Box 398

Address2:

City, State & Zip: Hickory, NC 28601-0398

Work Phone: 828-323-7412 **Fax:** 828-323-7550

Email Address: mberry@hickory.nc.gov

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Kevin B Greer	Asst Director Public Services	PO Box 398, Hickory, NC 28601-0398	828-323-7427	828-322-1405	kgreer@hickorync.gov

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Robert P Shaver		PO Box 398, Hickory, NC 28601-0398	828-294-0861		rshaver@hickorync.gov

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Kevin Greer	Director Public Services sst	PO Box 398, Hickory, NC 28601-0398	828-323-7427	828-322-1405	kgreer@hickorync.gov

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110038

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Hickory City-Northeast WWTP

Facility Address1: 310 Cloninger Mill Rd

Facility Address2:

City, State & Zip: Hickory, NC 28601

Owner Information Details:

Owner Name: City of Hickory

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Mick Berry **Title:**

Address1: PO Box 398

Address2:

City, State & Zip: Hickory, NC 28601-0398

Work Phone: 828-323-7412 **Fax:** 828-323-7550

Email Address: mberry@hickory.nc.gov

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Kevin B Greer	Asst Director Public Services	PO Box 398, Hickory, NC 28601-0398	828-323-7427	828-322-1405	kgreer@hickorync.gov

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Keith Douglas Rhyne		PO Box 398, Hickory, NC 28601-0398	828-322-5075		krhyne@hickorync.gov

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Kevin B Greer	Asst Director Public Services	PO Box 398, Hickory, NC 28601-0398	828-323-7427	828-322-1405	kgreer@hickorync.gov

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110039

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Clinton City - Larkins Water Pollution Control Facility

Facility Address1: 123 Millbranch Rd

Facility Address2:

City, State & Zip: Clinton, NC 28329-0199

Owner Information Details:

Owner Name: City of Clinton

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: John F Connet **Title:**

Address1: PO Box 199

Address2: 221 Lisbon St

City, State & Zip: Clinton, NC 28329-0199

Work Phone: 910-592-1961 **Fax:** 910-590-3127

Email Address:

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Jeff Vreugdenhil		PO Box 199, Clinton, NC 28328-0199	910-299-4905 Ext. 3052		vreugdenhil@cityofclinton.us

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Neil Carroll		PO Box 199, Clinton, NC 28328-0199	910-299-4908	910-590-2387	wpcf@cityofclintonnc.us

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110040

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: First Broad River WWTP

Facility Address1: 1940 S Lafayette St

Facility Address2:

City, State & Zip: Shelby, NC 28152

Owner Information Details:

Owner Name: City of Shelby

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Brad R Cornwell **Title:**

Address1: PO Box 207

Address2:

City, State & Zip: Shelby, NC 28151-0207

Work Phone: 704-484-6840 **Fax:**

Email Address:

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Brad R Cornwell		PO Box 207, Shelby, NC 28151-0207			

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
David William Hux		718 Cedar Hill Dr, Shelby, NC 28152	704-484-6840		davidh@cityofgastonia.com

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110041

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Spring Lake WWTP

Facility Address1: 350 Harps St

Facility Address2:

City, State & Zip: Spring Lake, NC 28390

Owner Information Details:

Owner Name: Town of Spring Lake

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Tommy Burns **Title:** Manager Town

Address1: PO Box 617

Address2:

City, State & Zip: Spring Lake, NC 28390-0617

Work Phone: 910-436-0241 Ext. 1306 **Fax:** 910-436-2667

Email Address: tburns@spring-lake.org

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Tommy Burns	Manager Town	PO Box 617, Spring Lake, NC 28390-0617	910-436-0241 Ext. 1306	910-436-2667	tburns@spring-lake.org

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Byron Wayne Blumenfeld		PO Box 617 Spring Lk, Spring Lake, NC 28390-3191	910-436-0241		bblumenfeld@spring-lake.org
Richard Mendez	orc wwtp	PO Box 617, Spring Lake, NC 28390-0617	910-497-5748	910-436-2667	rmendez@spring-lake.org

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Byron Wayne Blumenfeld		PO Box 617 Spring Lk, Spring Lake, NC 28390-3191	910-436-0241		bblumenfeld@spring-lake.org

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110042

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Roxboro WWTP

Facility Address1: 902 Cavel-Chub Lake Rd

Facility Address2:

City, State & Zip: Roxboro, NC 27573

Owner Information Details:

Owner Name: City of Roxboro

Owner Type: Government - County **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Ronnie G Bugnar **Title:**

Address1: 304 S Morgan St

Address2:

City, State & Zip: Roxboro, NC 27573

Work Phone: 336-599-2191 **Fax:**

Email Address:

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Jonathan Barlow		105 N Lamar St, Roxboro, NC 27573	336-599-3116	336-503-0588	jbarlow@cityofroxboro.com
Andrew M Oakley	Director Public Works	PO Box 128, Roxboro, NC 27573-0128	336-599-5658	336-503-0588	aoakley@cityofroxboro.com
Andrew M Oakley	Director Public Works	PO Box 128, Roxboro, NC 27573-0128	336-599-5658	336-599-0588	aoakley@cityofroxboro.com
Thomas S Warren		PO Box 128, Roxboro, NC 27573-0128	336-503-0489	336-503-0588	thomas.warren@person.net
Johnathan R Barlow	City Manager	PO Box 128, Roxboro, NC 27573-0128	336-503-3116	336-599-3774	
Sammy B Yarboro		PO Box 128, Roxboro, NC 27573-0128	336-503-0489		

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110043

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Kinston Regional Water Reclamation Facility

Facility Address1: 2131 Becton Farm Rd

Facility Address2:

City, State & Zip: Kinston, NC 28501

Owner Information Details:

Owner Name: City of Kinston

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Stephen Miller **Title:**

Address1: PO Drawer 339

Address2:

City, State & Zip: Kinston, NC 28501

Work Phone: 252-939-3285 **Fax:** 252-939-3279

Email Address: steve.miller@ci.kinston.nc.us

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Rhonda Barwick	asst dir of public services	PO Drawer 339, Kinston, NC 28501	252-939-3303		

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Kenneth R Stevens	plant super	2101 Becton Farm Rd, Kinston, NC 28501	252-939-3375	252-939-3741	kenneth.stevens@ci.kinston.nc.us

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Brian Lucas	mgr resources water				brian.lucas@ci.konston.nc.us

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110045

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Edenton Town WWTP

Facility Address1: 614 Macedonia Rd

Facility Address2:

City, State & Zip: Edenton, NC 27932

Owner Information Details:

Owner Name: Town of Edenton

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Anne-Marie Marie Knighton **Title:**

Address1: 400 S Broad St

Address2:

City, State & Zip: Edenton, NC 27932

Work Phone: 252-482-7352 **Fax:** 252-482-7377

Email Address:

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Bobby Williams		614 Macedonia Rd, Edenton, NC 27932	252-482-7883		

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Anne-Marie Marie Knighton		PO Box 300, Edenton, NC 27932	919-482-7352		

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110047

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Apex (Town of) Water Reclamation Facility

Facility Address1: 300 Pristine Waters Dr

Facility Address2:

City, State & Zip: Apex, NC 27502

Owner Information Details:

Owner Name: Town of Apex

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Bruce A Radford **Title:** Manager Town

Address1: PO Box 250

Address2:

City, State & Zip: Apex, NC 27502-0250

Work Phone: 919-249-3301 **Fax:** 919-249-3305

Email Address: bruce.radford@apexnc.org

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Bruce A Radford	Manager Town	PO Box 250, Apex, NC 27502-0250	919-249-3301	919-249-3305	bruce.radford@apexnc.org
Adam Stephenson					

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
John Cratch	Manager WRF	300 Pristine Waters Dr, Apex, NC 27502	919-249-3360	919-363-8780	john.cratch@apexnc.org

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Michael Deaton		PO Box 250, Apex, NC 27502-0250	919-249-3413		michael.deaton@apexnc.org

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110048

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Mason Farm WWTP

Facility Address1: 170 Old Mason Farm Rd

Facility Address2:

City, State & Zip: Chapel Hill, NC 27514

Owner Information Details:

Owner Name: Orange Water And Sewer Authority

Owner Type: Government - County **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Ed Kerwin **Title:** Director Executive

Address1: 400 Jones Ferry Rd

Address2:

City, State & Zip: Carrboro, NC 27510-2001

Work Phone: 919-968-4421 **Fax:** 919-968-4464

Email Address: ekerwin@owasa.org

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
John Kiviniemi	& biosolids mgr recycling treatment wastewater		919-537-4352		jkiviniemi@owasa.org

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110049

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Little Creek WWTP

Facility Address1: 1419 NC Hwy 39

Facility Address2:

City, State & Zip: Zebulon, NC 27597

Owner Information Details:

Owner Name: City of Raleigh Public Utilities Department

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: John R Carman **Title:** Director Public Utilities

Address1: PO Box 590

Address2:

City, State & Zip: Raleigh, NC 27602-0590

Work Phone: 919-857-4540 **Fax:** 919-857-4545

Email Address: john.carman@raleighnc.gov

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
John R Carman	Director Public Utilities	PO Box 590, Raleigh, NC 27602-0590	919-857-4540	919-857-4545	john.carman@raleighnc.gov

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Brian C Gay		1419 Highway 39, Zebulon, NC 27597	919-269-4082	919-269-2113	brian.gay@ci.raleigh.nc.us

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Tim W Woody	Resue Superintendent Wastewater and	PO Box 590, Raleigh, NC 27602-0590	919-996-3700	919-662-5707	tim.woody@raleighnc.gov

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110050

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Long Creek WWTP

Facility Address1: 1040 Coble Ave Extension

Facility Address2:

City, State & Zip: Albemarle, NC 28002

Owner Information Details:

Owner Name: City of Albemarle

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Ellen Huntley **Title:** Director Public Utilities of

Address1: PO Box 190

Address2:

City, State & Zip: Albemarle, NC 28002-0190

Work Phone: 704-984-9405 **Fax:** 704-984-9406

Email Address: rallen@ci.albemarle.nc.us

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Karen A Allan		PO Box 190, Albemarle, NC 28002-0190	704-984-9630		

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110052

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Elizabethtown WWTP

Facility Address1: 699 Scout Ln

Facility Address2:

City, State & Zip: Elizabethtown, NC 28337

Owner Information Details:

Owner Name: Town of Elizabethtown

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Eddie Madden **Title:**

Address1: PO Box 700

Address2:

City, State & Zip: Elizabethtown, NC 28337

Work Phone: 910-862-2035 **Fax:** 910-862-6151

Email Address: pubserv@elizabethtownnc.org

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Pat DeVane	dir public utilities	PO Box 700, Elizabethtown, NC 28337	910-862-6151	910-862-7117	pdevane@elizabethtown.org

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Hugh Bledsoe	mgr wwtp	PO Box 700, Elizabethtown, NC 28337	910-874-1961	910-862-2612	wwtp@elizabethtownnc.org

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110054

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Triangle WWTP

Facility Address1: 5926 NC Hwy 55 E

Facility Address2:

City, State & Zip: Durham, NC 27701

Owner Information Details:

Owner Name: Durham County

Owner Type: Government - County **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Glen E Whisler **Title:** County Engineer

Address1: 120 E Parrish St 1st Floor

Address2:

City, State & Zip: Durham, NC 27701

Work Phone: 919-560-0735 **Fax:** 919-560-0740

Email Address:

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Joseph R Pearce	Division Manger Utility	120 E Parrish St, Durham, NC 27701	919-201-3356		
Robert Stewart	ORC	Triangle WWTP, 5926 NC Hwy 55e, Durham, NC 27701	919-544-8823		

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110055

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Crowders Creek WWTP

Facility Address1: 5642 S York Rd

Facility Address2:

City, State & Zip: Gastonia, NC 28054

Owner Information Details:

Owner Name: City of Gastonia

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Debby Key **Title:**

Address1: PO Box 1748

Address2:

City, State & Zip: Gastonia, NC 28053-1748

Work Phone: 704-866-6854 **Fax:**

Email Address: debbyk@cityofgastonia.com

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Adrian C Sims	admin stormwater utility	1300 N Broad St, PO Box 1748, Gastonia, NC 28053	704-869-1013	704-869-1945	adrians@cityofgastonia.com

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Michael Charles Graham		520 Montana Dr, Gastonia, NC 28056-8917	704-854-6657		

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Adrian C Sims	admin stormwater utility	1300 N Broad St, PO Box 1748, Gastonia, NC 28053	704-869-1013	704-869-1945	adrians@cityofgastonia.com

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110056

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Long Creek WWTP

Facility Address1: 3000 Long Creek Disposal Plant Rd

Facility Address2:

City, State & Zip: Dallas, NC 28034

Owner Information Details:

Owner Name: City of Gastonia

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Debby Key **Title:**

Address1: PO Box 1748

Address2:

City, State & Zip: Gastonia, NC 28053-1748

Work Phone: 704-866-6854 **Fax:**

Email Address: debbyk@cityofgastonia.com

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Adrian C Sims	admin stormwater utility	1300 N Broad St, PO Box 1748, Gastonia, NC 28053	704-869-1013	704-869-1945	adrians@cityofgastonia.com

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Adrian C Sims	admin stormwater utility	1300 N Broad St, PO Box 1748, Gastonia, NC 28053	704-869-1013	704-869-1945	adrians@cityofgastonia.com
David Vance Morgan		5642 S York Rd, Gastonia, NC 28054	704-854-6655	704-866-9405	

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Adrian C Sims	admin stormwater utility	1300 N Broad St, PO Box 1748, Gastonia, NC 28053	704-869-1013	704-869-1945	adrians@cityofgastonia.com

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110057

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Tryon WWTP

Facility Address1: 1526 E Howard St

Facility Address2:

City, State & Zip: Tryon, NC 28782

Owner Information Details:

Owner Name: Town of Tryon

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Jim Fatland **Title:**

Address1: 301 N Trade St

Address2:

City, State & Zip: Tryon, NC 28782

Work Phone: 828-859-6654 **Fax:** 828-859-6653

Email Address:

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Joel B Burrell	Director Public Works	301 N Trade St, Ste 100, Tryon, NC 28782	828-859-6654		

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Joel B Burrell	Director Public Works	301 N Trade St, Tryon, NC 28782	828-859-6654		

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110058

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Greenville Utilities WWTP

Facility Address1: 240 Aqua Ln

Facility Address2:

City, State & Zip: Greenville, NC 27834

Owner Information Details:

Owner Name: Greenville Utilities Commission

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Randall D Emory **Title:** PE

Address1: PO Box 1847

Address2:

City, State & Zip: Greenville, NC 27835-1847

Work Phone: 252-551-1554 **Fax:** 252-551-1598

Email Address: emoryrd@guc.com

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Daniel Tracy		PO Box 1847, Greenville, NC 27835-1847	252-551-1542	252-551-2067	tracyd@guc.com

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Daniel Tracy		PO Box 1847, Greenville, NC 27835-1847	252-551-1542	252-551-2067	tracyd@guc.com

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110059

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Robersonville WWTP

Facility Address1: 1149 Rogerson Rd

Facility Address2:

City, State & Zip: Robersonville, NC 27871

Owner Information Details:

Owner Name: Town of Robersonville

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Elizabeth Jenkins **Title:** Manager Town

Address1: PO Box 487

Address2:

City, State & Zip: Robersonville, NC 27871

Work Phone: 252-508-0311 **Fax:**

Email Address: lwjenkins@suddenlinkmail.com

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Elizabeth Jenkins	Manager Town	PO Box 487, Robersonville, NC 27871	252-508-0311		lwjenkins@suddenlinkmail.com

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Elizabeth Jenkins	Manager Town	PO Box 487, Robersonville, NC 27871	252-508-0311		lwjenkins@suddenlinkmail.com

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110060

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Contentnea Sewerage District WWTP

Facility Address1: 900 Wiley Gaskins Rd

Facility Address2:

City, State & Zip: Grifton, NC 28530

Owner Information Details:

Owner Name: Contentnea Metropolitan Sewerage District

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Charles M. Smithwick **Title:** Dist Manager

Address1: PO Box 477

Address2:

City, State & Zip: Grifton, NC 28530-0477

Work Phone: 252-524-5584 **Fax:** 252-524-3491

Email Address: cmsd100@embarqmail.com

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110061

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Beaufort WWTP

Facility Address1: 301 Freedom Park Rd

Facility Address2:

City, State & Zip: Beaufort, NC 28516

Owner Information Details:

Owner Name: Town of Beaufort

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Richard L Stanley **Title:**

Address1: PO Box 390

Address2:

City, State & Zip: Beaufort, NC 28516-0390

Work Phone: 252-728-2141 **Fax:** 252-728-3982

Email Address: bftstanley@beaufortnc.org

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
John N Young	Director Public Works	PO Box 360, Beaufort, NC 28516-0360	252-728-7166 Ext. 21	252-728-7931	j.young@beaufortnc.org
Charles W Burgess		PO Box 390, Beaufort, NC 28516-0390	252-728-2141	252-728-3982	c.burgess@beaufortnc.org

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Larry G Third		PO Box 390, Beaufort, NC 28516-0390	252-838-0286		bftwwtp@beaufortnc.org
Donovan H Willis		PO Box 390, Beaufort, NC 28516-0390	252-838-0197		D.Willis@beaufortnc.org

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110062

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Benson WWTP

Facility Address1: 770 Hannah Creek Rd

Facility Address2:

City, State & Zip: Four Oaks, NC 27524

Owner Information Details:

Owner Name: Town of Benson

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Matthew Zapp **Title:** Manager Town

Address1: PO Box 69

Address2:

City, State & Zip: Benson, NC 27504-0069

Work Phone: 919-894-3553 **Fax:**

Email Address:

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Martin A Morris		PO Box 69, Benson, NC 27504-0069	919-894-2373	919-894-5808	

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110063

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Wilmington Northside WWTP

Facility Address1: 2311 N 23rd St

Facility Address2:

City, State & Zip: Wilmington, NC 28401

Owner Information Details:

Owner Name: Cape Fear Public Utility Authority

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Matthew W Jordan **Title:**

Address1: 235 Government Center Dr

Address2:

City, State & Zip: Wilmington, NC 28403

Work Phone: 910-332-6654 **Fax:** 910-332-6352

Email Address: matt.jordan@cfpua.org

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Beth Eckert		235 Government Center Dr, Wilmington, NC 28403	910-332-6646	910-332-6730	beth.eckert@cfpua.org
Joel E Bing		235 Government Center Dr, Wilmington, NC 28403	910-332-6551	910-332-6730	joel.bing@cfpua.org

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Geoffrey D Cermak		235 Govenment Ctr Dr, Wilmington, NC 28403	910-332-6562	910-341-4659	jeff.cermak@cfpua.org
Roger S Colee			910-332-6563		roger.colee@cfpua.org
Northside WWTP Main Number			910-332-6739		

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Kenneth Leonard Vogt		235 Government Center Dr, Wilmington, NC 28403	910-332-6586	910-332-6731	Ken.Vogt@cfpua.org

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110064

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Erwin WWTP

Facility Address1: 411 S 20th St

Facility Address2:

City, State & Zip: Erwin, NC 28339

Owner Information Details:

Owner Name: Harnett County Public Utilities

Owner Type: Government - County **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Steve Ward **Title:** Director

Address1: PO Box 1119

Address2:

City, State & Zip: Lillington, NC 27546-1119

Work Phone: 910-893-7575 **Fax:** 910-893-0302

Email Address: sward@harnett.org

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Kenneth W Fail		411 S 20th St, Erwin, NC 28339	910-893-2424		kfail@harnett.org

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110065

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Mooresville WWTP

Facility Address1: 369 Johnson Dairy Rd

Facility Address2:

City, State & Zip: Mooresville, NC 28115

Owner Information Details:

Owner Name: Town of Mooresville

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Erskine Smith **Title:**

Address1: PO Box 878

Address2:

City, State & Zip: Mooresville, NC 28115-0878

Work Phone: 704-662-3186 **Fax:** 704-663-4616

Email Address: esmith@ci.mooresville.nc.us

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Ryan Rase	Dept Eng Mgr	PO Box 878, Mooresville, NC 28115-0878	704-663-4510	704-662-6298	rrase@ci.mooresville.nc.us

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Mike Lamberth	super wastewater	369 Johnson Dairy Rd, Mooresville, NC 28115	704-662-8470		mlamberth@ci.mooresville.nc.us

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Barry McKennon	Director Utilities of	PO Box 878, Mooresville, NC 28115-0878	704-663-7282		

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110067

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: South Burlington WWTP

Facility Address1: 2471 Boy Wood Rd

Facility Address2:

City, State & Zip: Graham, NC 27253

Owner Information Details:

Owner Name: City of Burlington

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Harold T. Owen **Title:** City Manager

Address1: PO Box 1358

Address2:

City, State & Zip: Burlington, NC 27216-1358

Work Phone: 336-222-5020 **Fax:** 336-513-5452

Email Address: howen@ci.burlington.nc.us

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Richard Asher	cheif operator	PO Box 1358, Burlington, NC 27216-1358	336-227-6261	336-227-6262	rasher@ci.burlington.nc.us

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Robert Patterson	director resources water	PO Box 1358, Burlington, NC 27216-1358	336-222-5130	336-570-6175	bpatterson@ci.burlington.nc.us

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110068

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: East Burlington WWTP

Facility Address1: 225 Stone Quarry Rd

Facility Address2:

City, State & Zip: Burlington, NC 27216

Owner Information Details:

Owner Name: City of Burlington

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Harold T. Owen **Title:** City Manager

Address1: PO Box 1358

Address2:

City, State & Zip: Burlington, NC 27216-1358

Work Phone: 336-222-5020 **Fax:** 336-513-5452

Email Address: howen@ci.burlington.nc.us

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Darrin Allred	chief operator	PO Box 1358, Burlington, NC 27216-1358	336-578-0515	336-578-0516	dallred@ci.burlington.nc.us

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Robert Patterson	director resources water	PO Box 1358, Burlington, NC 27216-1358	336-222-5130	336-570-6175	bpatterson@ci.burlington.nc.us

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110069

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Rocky River WWTP

Facility Address1: PO Box 428

Facility Address2:

City, State & Zip: Concord, NC 28026-0428

Owner Information Details:

Owner Name: Water and Sewer Authority of Cabarrus County

Owner Type: Non-Government **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Coleman M Keeter **Title:** Director Executive

Address1: PO Box 428

Address2:

City, State & Zip: Concord, NC 28026-0428

Work Phone: 704-786-1783 **Fax:** 704-795-1564

Email Address:

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Thomas Lynn Bishop		PO Box 562, Granite Qry, NC 28072-6972	704-788-4164 Ext. 13	704-786-1967	lbishop@wsacc.com
Timothy H Mauldin		PO Box 562, Granite Qry, NC 28072-6972	704-788-4164	704-786-1967	

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Douglas Triece	ORC acting	PO Box 428, Concord, NC 28026-0428	704-788-4164	704-786-1967	dougtriece@wsacc.org
Coleman M Keeter	Director Executive	PO Box 428, Concord, NC 28026-0428	704-786-1783	704-795-1564	

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110070

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Crooked Creek WWTP #2

Facility Address1: 4015 Sardis Church Rd

Facility Address2:

City, State & Zip: Monroe, NC 28110

Owner Information Details:

Owner Name: Union County Public Works

Owner Type: Government - County **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Edward Goscicki **Title:** Director Public Works

Address1: 500 N Main St -Ste 500

Address2:

City, State & Zip: Monroe, NC 28112-4730

Work Phone: 704-296-4212 **Fax:** 704-296-4232

Email Address: edward.goscicki@co.union.nc.us

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Josh Ryan Brooks		5120 New Salem Rd, Marshville, NC 28103	704-296-4210		

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Mark Eugene Tye		500 N Church St, Ste 500, Monroe, NC 28112-4804	704-296-4210	704-296-4232	

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Edward Goscicki	Director Public Works	500 N Main St -Ste 500, Monroe, NC 28112-4730	704-296-4212	704-296-4232	edward.goscicki@co.union.nc.us

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110071

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Twelve Mile Creek WWTP

Facility Address1: 4104 Providence Rd S

Facility Address2:

City, State & Zip: Waxhaw, NC 28173

Owner Information Details:

Owner Name: Union County Public Works

Owner Type: Government - County **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Edward Goscicki **Title:** Director Public Works

Address1: 500 N Main St -Ste 500

Address2:

City, State & Zip: Monroe, NC 28112-4730

Work Phone: 704-296-4212 **Fax:** 704-296-4232

Email Address: edward.goscicki@co.union.nc.us

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Josh Ryan Brooks		5120 New Salem Rd, Marshville, NC 28103	704-296-4210		

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Michael Moler	& div mgr operatins wastewater water	500 N Main St -Ste 500, Monroe, NC 28112-4730	704-296-4215	704-296-4232	michael.moler@co.union.nc.us

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110072

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Lake Rhodiss WWTP

Facility Address1: 2100 Lake Rhodhiss Dr

Facility Address2:

City, State & Zip: Valdese, NC 28690

Owner Information Details:

Owner Name: Town of Valdese

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Jeffery V Morse **Title:**

Address1: PO Box 339

Address2:

City, State & Zip: Valdese, NC 28690

Work Phone: 828-879-2116 **Fax:**

Email Address:

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Christopher John Bortnick		PO Box 339, Valdese, NC 28690	828-879-2131	828-874-5915	

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110073

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Wilmington Southside WWTP

Facility Address1: 3436 River Rd

Facility Address2:

City, State & Zip: Wilmington, NC 28402

Owner Information Details:

Owner Name: Cape Fear Public Utility Authority

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Matthew W Jordan **Title:**

Address1: 235 Government Center Dr

Address2:

City, State & Zip: Wilmington, NC 28403

Work Phone: 910-332-6654 **Fax:** 910-332-6352

Email Address: matt.jordan@cfpua.org

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Beth Eckert		235 Government Center Dr, Wilmington, NC 28403	910-332-6646	910-332-6730	beth.eckert@cfpua.org
Joel E Bing		235 Government Center Dr, Wilmington, NC 28403	910-332-6551	910-332-6730	joel.bing@cfpua.org

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Donald Charles Keyes		PO Box 6685, Ocean Isle Beach, NC 28469-6685	910-332-6578		donald.keyes@cfpua.org
Milton S Vann			910-332-6585		Milton.Vann@cfpua.org
Southside WWTP Main Number			910-332-6735		

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Kenneth Leonard Vogt		PO Box 1810, Wilmington, NC 28402-1810	910-341-7890		Ken.Vogt@wilmingtonnc.gov

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110075

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Nutbush Creek WWTP

Facility Address1: 1646 W Andrews Ave

Facility Address2:

City, State & Zip: Henderson, NC 27536

Owner Information Details:

Owner Name: City of Henderson

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Frank Frazier **Title:** Assistant City Manager

Address1: PO Box 1434

Address2:

City, State & Zip: Henderson, NC 27536-1434

Work Phone: 252-430-5703 **Fax:** 252-492-7935

Email Address: ffrazier@ci.henderson.nc.us

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Thomas A Spain		PO Box 1434, Henderson, NC 27536-1434	252-431-6081	252-492-3324	tspain@ci.henderson.nc.us

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Thomas A Spain		PO Box 1434, Henderson, NC 27536-1434	252-431-6081	252-492-3324	tspain@ci.henderson.nc.us

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Thomas A Spain		PO Box 1434, Henderson, NC 27536-1434	252-431-6081	252-492-3324	tspain@ci.henderson.nc.us

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110076

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Louisburg Water Reclamation Facility

Facility Address1: Treatment Plant Rd Off Hwy 56

Facility Address2:

City, State & Zip: Louisburg, NC 27549-2526

Owner Information Details:

Owner Name: Town of Louisburg

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Karl T Pernell **Title:** Mayor

Address1: 110 W Nash St

Address2:

City, State & Zip: Louisburg, NC 27549-2526

Work Phone: 919-496-3405 **Fax:** 919-496-6319

Email Address:

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
James M Ellington		110 W Nash St, Louisburg, NC 27549-2526	919-496-2677	919-496-6319	fedleyforest@yahoo.com

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110077

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Central Johnston County WWTP

Facility Address1: E Huntley St

Facility Address2:

City, State & Zip: Smithfield, NC 27577

Owner Information Details:

Owner Name: Johnston County Department Of Public Utilities

Owner Type: Government - County **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Timothy G Broome **Title:** Director Public Utilities of

Address1: PO Box 2263

Address2:

City, State & Zip: Smithfield, NC 27577-2263

Work Phone: 919-209-8333 **Fax:** 919-934-7174

Email Address: tim.broome@johnstonnc.com

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Haywood M Phthisic		PO Box 2733, Smithfield, NC 27577	919-989-5075		

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110078

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Oxford City WWTP

Facility Address1: 1649 New Commerce Dr

Facility Address2:

City, State & Zip: Oxford, NC 27565

Owner Information Details:

Owner Name: City of Oxford

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Larry Thomas **Title:** director public works

Address1: PO Box 506

Address2:

City, State & Zip: Oxford, NC 27565

Work Phone: 919-603-1113 **Fax:**

Email Address: lpthomas@oxfordnc.org

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Larry Thomas	director public works	PO Box 506, Oxford, NC 27565	919-603-1113		lpthomas@oxfordnc.org

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Dennis McCoy Wilson		PO Box 1307, Oxford, NC 27565-1307	919-693-8783		

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110079

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Anson County Regional WWTP

Facility Address1: NCSR 1121

Facility Address2:

City, State & Zip: Wadesboro, NC 28170

Owner Information Details:

Owner Name: Anson County

Owner Type: Government - State **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Mike Sessions **Title:** director utilities

Address1: 907 N Washington St

Address2:

City, State & Zip: Wadesboro, NC 28170

Work Phone: 704-694-5208 **Fax:** 704-694-2972

Email Address: msessions@co.anson.nc.us

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Mike Sessions	director utilities	907 N Washington St, Wadesboro, NC 28170	704-694-5208	704-694-2972	msessions@co.anson.nc.us

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Leon Gatewood		PO Box 553, Wadesboro, NC 28170	704-694-5293	704-694-2972	lgatewood@co.anson.nc.us

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110080

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Little Creek Water Reclamation

Facility Address1: 1000 Durham St

Facility Address2:

City, State & Zip: Clayton, NC 27520

Owner Information Details:

Owner Name: Town of Clayton

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Jody McLeod **Title:** Mayor

Address1: PO Box 879

Address2:

City, State & Zip: Clayton, NC 27520

Work Phone: 919-553-5002 **Fax:**

Email Address:

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
James O Warren		PO Box 879, Clayton, NC 27520	919-553-1536	919-553-1918	jowarren@townofclaytonnc.org

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110081

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Hominy Creek WWTP

Facility Address1: 3100 Old Stantonsburg Rd

Facility Address2:

City, State & Zip: Wilson, NC 27893

Owner Information Details:

Owner Name: City of Wilson

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Grant W Goings **Title:** City Manager

Address1: PO Box 10

Address2:

City, State & Zip: Wilson, NC 27894-0010

Work Phone: 252-399-2200 **Fax:**

Email Address: ggoings@wilsonnc.org

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Harry Tyson	City Deputy Manager	PO Box 10, Wilson, NC 27894-0010	252-399-2461	252-399-2453	htyson@wilsonnc.org

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Jimmy Pridgen	mgr reclamation water				

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Jimmy Pridgen	mgr reclamation water				

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110082

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: South Durham WRF

Facility Address1: 6605 Farrington Rd

Facility Address2:

City, State & Zip: Chapel Hill, NC 27514

Owner Information Details:

Owner Name: City of Durham

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: William V Bell **Title:** Mayor

Address1: 101 City Hall Plz

Address2:

City, State & Zip: Durham, NC 27701-3329

Work Phone: 919-560-4333 **Fax:** 919-560-4801

Email Address: Bill.Bell@durhamnc.gov

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Laura Adcock		101 City Hall Plz, 3rd Floor, Durham, NC 27701			

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Charles Cocker	plant super	6605 Farrington Rd, Chapel Hill, NC 27514	919-560-4386	919-560-4418	charles.cocker@durhamnc.gov

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110083

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Catawba River Pollution Control Facility

Facility Address1: 1000 Vine Arden Rd

Facility Address2:

City, State & Zip: Morganton, NC 28680

Owner Information Details:

Owner Name: City of Morganton

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Mel S Cohen **Title:**

Address1: PO Box 3448

Address2:

City, State & Zip: Morganton, NC 28655-9850

Work Phone: 828-438-5228 **Fax:** 828-432-2669

Email Address:

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Brad E Boris		PO Box 3448, Morganton, NC 28655-9850	828-438-5285		bboris@ci.morganton.nc.us
Lee Anderson		PO Box 3448, Morganton, NC 28655-9850			

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Jeremy Edward Rees		City Of Morganton, PO Box 3448, Morganton, NC 28680-3448	828-438-5375	828-433-8593	jeremyrees@yahoo.com

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110084

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Franklin County WWTP

Facility Address1: 1099 Ln Store Rd

Facility Address2:

City, State & Zip: Franklinton, NC 27525

Owner Information Details:

Owner Name: Franklin County Public Utilities

Owner Type: Government - County **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Bryce Mendenhall **Title:**

Address1: 1630 U S Hwy 1

Address2:

City, State & Zip: Youngsville, NC 27596-9661

Work Phone: 919-556-6617 **Fax:** 919-556-6709

Email Address: bmendenhall@franklincountync.us

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Mark Lynn Prowell		5 W Mason St, Franklinton, NC 27525	919-494-5850		

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110085

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Siler City Wastewater Treatment Plant

Facility Address1: 370 Waste Treatment Plant Rd

Facility Address2:

City, State & Zip: Siler City, NC 27344

Owner Information Details:

Owner Name: Town of Siler City

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Bryan Thompson **Title:** mgr town

Address1: PO Box 769

Address2:

City, State & Zip: Siler City, NC 27344

Work Phone: 919-742-4731 **Fax:** 919-663-3874

Email Address: bthompson@silercitync.org

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Bryan Thompson	mgr town	PO Box 769, Siler City, NC 27344	919-742-4731	919-663-3874	bthompson@silercitync.org

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Terry Green	& dir of public untilities works	PO Box 769, Siler City, NC 27344	919-742-2323 Ext. 225	919-663-3874	tgreen@silercitync.org

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Chris McCorquodale	super wwtp	PO Box 769, Siler City, NC 27344	919-742-4581	919-742-5499	scwastwewater@silercitync.org

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110086

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Town of Weldon WWTP

Facility Address1: 525 River Rd

Facility Address2:

City, State & Zip: Weldon, NC 27890

Owner Information Details:

Owner Name: Town of Weldon

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Julia M Meacham **Title:** Mayor

Address1: PO Box 551

Address2:

City, State & Zip: Weldon, NC 27890-0551

Work Phone: 252-536-4836 **Fax:**

Email Address:

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Donald L Crowder		PO Box 551, Weldon, NC 27890-0551	252-536-3478	252-536-4104	publicworks@historicweldonnc.com

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Jeff Elks		PO Box 551, Weldon, NC 27890-0551	252-536-2478	252-536-4935	jeffelks@hotmail.com

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Jeff Elks		PO Box 551, Weldon, NC 27890-0551	252-536-2478	252-536-4935	jeffelks@hotmail.com

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110087

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Warren County Wasterwater Treatment Plant

Facility Address1: 738 US Hwy 401 S

Facility Address2:

City, State & Zip: Warrenton, NC 27589

Owner Information Details:

Owner Name: Town of Warrenton

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: John Freeman **Title:**

Address1: PO Box 281

Address2:

City, State & Zip: Warrenton, NC 27589-0281

Work Phone: 919-257-3315 **Fax:** 919-257-9219

Email Address:

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Robert Davie	admin town	PO Box 281, Warrenton, NC 27589-0281	252-257-1122	252-257-9219	townadministrator@ warrenton.nc.gov

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
William Robert Perkinson		PO Box 281, Warrenton, NC 27589-0281	252-257-1776	252-257-0188	publicworksdirector@ warrenton.nc.gov

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
William Robert Perkinson		PO Box 281, Warrenton, NC 27589-0281	252-257-1776		

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110090

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Enfield WWTP

Facility Address1: 18270 US Hwy 301

Facility Address2:

City, State & Zip: Enfield, NC 27823

Owner Information Details:

Owner Name: Town of Enfield

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Barbara S Simmons **Title:** Mayor

Address1: PO Box 699

Address2:

City, State & Zip: Enfield, NC 27823

Work Phone: 252-445-3146 **Fax:** 252-445-1019

Email Address:

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Tony Gorham	/ orc super wwtp	PO Box 699, Enfield, NC 27823	252-445-2385	252-445-1019	antonio.gorham@unitedwater.com

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Greg Griffin	Public Works	PO Box 699, Enfield, NC 27823	252-445-3146	252-445-1019	ggriffin@enfieldnc.org

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110091

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Roanoke Rapids WWTP

Facility Address1: 135 Aqueduct Rd

Facility Address2:

City, State & Zip: Weldon, NC 27890

Owner Information Details:

Owner Name: Roanoke Rapids Sanitary District

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: R Danieley Brown **Title:** CEO PE

Address1: PO Box 308

Address2:

City, State & Zip: Roanoke Rapids, NC 27870

Work Phone: 252-537-9137 Ext. 225 **Fax:** 252-537-3064

Email Address: dbrown@rrsd.org

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Gregg Camp		PO Box 308, Roanoke Rapids, NC 27870	252-536-4884		

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110092

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: North Durham Water Reclamation Facility

Facility Address1: 1900 E Club Blvd

Facility Address2:

City, State & Zip: Durham, NC 27704

Owner Information Details:

Owner Name: City of Durham

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Thomas Bonfield **Title:** City Manager

Address1: 101 City Hall Plz

Address2:

City, State & Zip: Durham, NC 27701-3329

Work Phone: 919-560-4222 **Fax:**

Email Address: tom.bonfield@durhamnc.gov

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Thomas Bonfield	City Manager	101 City Hall Plz, Durham, NC 27701-3329	919-560-4222		tom.bonfield@durhamnc.gov

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
John Dodson		101 City Hall Plz, Durham, NC 27701-3329	919-560-4384	919-560-4648	john.dodson@durhamnc.gov

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110093

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Lexington Regional WWTP

Facility Address1: 500 Glendale Rd

Facility Address2:

City, State & Zip: Lexington, NC 27292

Owner Information Details:

Owner Name: City of Lexington

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Roger Allen Spach **Title:**

Address1: 28 W Center St

Address2:

City, State & Zip: Lexington, NC 27292-3099

Work Phone: 336-357-5090 **Fax:**

Email Address: rogers@lexingtonnc.net

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Roger Allen Spach		28 W Center St, Lexington, NC 27292-3099	336-248-3970	336-249-3584	roger@lexingtonnc.net

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110094

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Hamby Creek WWTP

Facility Address1: 110 Optimist Park Rd

Facility Address2:

City, State & Zip: Thomasville, NC 27360

Owner Information Details:

Owner Name: City of Thomasville

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Kelly Craver **Title:**

Address1: PO Box 368

Address2:

City, State & Zip: Thomasville, NC 27361-0368

Work Phone: 336-475-4220 **Fax:** 336-475-4283

Email Address: kelly.craver@thomasville-nc.gov

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Kelly Craver		PO Box 368, Thomasville, NC 27361-0368	336-475-4220	336-475-4283	kelly.craver@thomasville-nc.gov

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Allen Beck	super wwtp		336-475-4246	336-476-0130	allen.beck@thomasville-nc.gov

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Allen Beck	super wwtp		336-475-4246	336-476-0130	allen.beck@thomasville-nc.gov

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110096

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Town of Holly Springs/Utley Creek WWTP

Facility Address1: 850 W Ballentine St

Facility Address2:

City, State & Zip: Holly Springs, NC 27540

Owner Information Details:

Owner Name: Town of Holly Springs

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Carl Dean **Title:**

Address1: PO Box 8

Address2:

City, State & Zip: Holly Springs, NC 27540-0008

Work Phone: 919-552-6221 **Fax:** 919-567-1472

Email Address: Holly.Springs@hollyspringsnc.us

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Seann Byrd	dir reclamation water	PO Box 8, Holly Springs, NC 27540-0008	919-577-1090	919-577-2280	seannbyrd@hollyspringsnc.us

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Jeff Peters	rexlaimed tillage	PO Box 8, Holly Springs, NC 27540-0008	919-577-1090	919-577-2280	jeff.peters@hollyspringsnc.us

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110097

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Spruce Pine WWTP

Facility Address1: 909 Creed Pitman Rd

Facility Address2:

City, State & Zip: Spruce Pine, NC 28777

Owner Information Details:

Owner Name: Town of Spruce Pine

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Richard Canipe **Title:**

Address1: PO Box 189

Address2:

City, State & Zip: Spruce Pine, NC 28777

Work Phone: 828-765-3000 **Fax:** 828-765-3014

Email Address: spmgr@bellsouth.net

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Darrell Graham	orc	PO Box 189, Spruce Pine, NC 28777	828-765-3007	828-765-3013	

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Richard Canipe		PO Box 189, Spruce Pine, NC 28777	828-765-3000	828-765-3014	spmgr@bellsouth.net

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110100

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Town of Old Fort WWTP

Facility Address1: 1174 E Main St

Facility Address2:

City, State & Zip: Old Fort, NC 28762

Owner Information Details:

Owner Name: Town of Old Fort

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Garland Norton **Title:** Mayor

Address1: 38 Catawba Ave

Address2:

City, State & Zip: Old Fort, NC 28762-0520

Work Phone: 828-668-4244 **Fax:** 828-668-2007

Email Address: mayor@oldfortnc.com

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Garland Norton	Mayor	38 Catawba Ave, Old Fort, NC 28762-0520	828-668-4244	828-668-2007	mayor@oldfortnc.com

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Tony West	orc wwtp	38 S Catawba Ave, Old Fort, NC 28762-0520	828-668-4561	828-668-2007	twest@oldfortnc.com

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Tony West	orc wwtp	38 S Catawba Ave, Old Fort, NC 28762-0520	828-668-4561	828-668-2007	twest@oldfortnc.com

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110101

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Murphy WWTP

Facility Address1: Payne St

Facility Address2:

City, State & Zip: Murphy, NC 28906

Owner Information Details:

Owner Name: Town of Murphy

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: William N Hughes **Title:**

Address1: PO Box 130

Address2:

City, State & Zip: Murphy, NC 28906-0130

Work Phone: 828-837-2510 **Fax:** 828-837-9612

Email Address: townofmurphy@grove.net

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Matthew Scott Helton		PO Box 130, Murphy, NC 28906-0130	828-837-5035		murphywwtp@cablet vonline.net

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Anna A Payne		PO Box 130, Murphy, NC 28906-0130	828-837-2510		

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110102

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Corpening Creek WWTP

Facility Address1: NC Hwy 226 S

Facility Address2:

City, State & Zip: Marion, NC 28752

Owner Information Details:

Owner Name: City of Marion

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: J Robert Boyette **Title:**

Address1: PO Drawer 700

Address2:

City, State & Zip: Marion, NC 28752

Work Phone: 828-652-3551 **Fax:** 828-652-1983

Email Address: boyette@wnclink.com

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Larry Carver		PO Box 700, Marion, NC 28752	828-652-8843	828-659-1943	lcarver@marionnc.org

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110103

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Forest City Water Reclamation Facility

Facility Address1: Riverside Dr

Facility Address2:

City, State & Zip: Forest City, NC 28043

Owner Information Details:

Owner Name: Town of Forest City

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: John Condrey **Title:** City Manager

Address1: PO Box 728

Address2:

City, State & Zip: Forest City, NC 28043-0728

Work Phone: 828-245-4747 **Fax:** 828-245-6143

Email Address: johncondrey@townofforestcity.com

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Jeffery W Dotson		PO Box 728, Forest City, NC 28043-0728	828-248-5217	828-247-1626	jeffdotson@townofforestcity.com

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Sonny Penson	ORC	PO Box 728, Forest City, NC 28043-0728	828-248-5217	828-247-4626	sonnypenson@townofforestcity.com

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Sonny Penson	ORC	PO Box 728, Forest City, NC 28043-0728	828-248-5217	828-247-4626	sonnypenson@townofforestcity.com

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110104

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Highlands WWTP

Facility Address1: Arnold Rd

Facility Address2:

City, State & Zip: Highlands, NC 28741

Owner Information Details:

Owner Name: Town of Highlands

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: **Title:**

Address1: 210 N Fourth St

Address2:

City, State & Zip: Highlands, NC 28741

Work Phone: 828-526-5266 **Fax:** 828-526-2595

Email Address: Jim.Fatland@HighlandsNC.org

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Alec Templeton		PO Box 460, Highlands, NC 28741-2063	828-526-0504	828-526-2595	

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Lamar Nix		PO Box 460, Highlands, NC 28741-2063	828-526-2118	828-526-2595	highend@earthlink.net

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110105

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Town of Rutherfordton WWTP

Facility Address1: 1021 S Main St

Facility Address2:

City, State & Zip: Rutherfordton, NC 28139

Owner Information Details:

Owner Name: Town of Rutherfordton

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Karen E Andrews **Title:** Manager Town

Address1: 129 N Main St

Address2:

City, State & Zip: Rutherfordton, NC 28139

Work Phone: 828-287-3520 **Fax:** 828-286-8054

Email Address: kandrews@rutherfordton.net

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Karen E Andrews	Manager Town	129 N Main St, Rutherfordton, NC 28139	828-287-3520		

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Jerry Alexander		PO Box 1925, Rutherfordton, NC 28139	828-287-2141		

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110106

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Town of Maggie Valley WWTP

Facility Address1: 5320 Jonathan Creek Rd

Facility Address2:

City, State & Zip: Waynesville, NC 28785

Owner Information Details:

Owner Name: Town of Maggie Valley

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Timothy Barth **Title:** ManagerTown

Address1: 3987 Soco Rd

Address2:

City, State & Zip: Maggie Valley, NC 28751

Work Phone: 828-926-0866 **Fax:**

Email Address:

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Michael Lee Mehaffey		3987 Soco Rd, Maggie Valley, NC 28751	828-926-0866	828-926-3576	

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110107

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Spindale WWTP

Facility Address1: Ecology St

Facility Address2:

City, State & Zip: Spindale, NC 28160

Owner Information Details:

Owner Name: Town of Spindale

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Cameron McHargue **Title:** mgr town

Address1: PO Box 186

Address2:

City, State & Zip: Spindale, NC 28160

Work Phone: 828-286-2541 **Fax:** 828-286-3305

Email Address: rcmchargue@spindale.net

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Cameron McHargue	mgr town	PO Box 186, Spindale, NC 28160	828-286-2541	828-286-3305	rcmchargue@spindale.net

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Lance Mundy		327 Ecology St, Spindale, NC 28160	828-286-3407	828-286-3352	lmundy@spindalenc.net
Bill Hodge		PO Box 186, Spindale, NC 28160	828-286-3407	828-286-3352	hodge97@yahoo.com

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Lance Mundy		327 Ecology St, Spindale, NC 28160	828-286-3407	828-286-3352	lmundy@spindalenc.net

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110108

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Tabor City WWTP

Facility Address1: 244 US Hwy 701 Bypass N

Facility Address2:

City, State & Zip: Tabor City, NC 28463

Owner Information Details:

Owner Name: Town of Tabor City

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Royce Harper **Title:**

Address1: PO Box 655

Address2:

City, State & Zip: Tabor City, NC 28463-0655

Work Phone: 910-653-3458 **Fax:** 910-653-3970

Email Address:

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Al Jack Leonard		PO Box 655, Tabor City, NC 28463-0655	910-653-3458	910-653-3970	yamman@embarqmail.com

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Richard M Davis		124 Ne 16th St, Oak Island, NC 28465	919-672-4247		rmdnascar@live.com
Stephanie Moore		4240 Committee Dr SE, Southport, NC 28461-1519	910-457-0289		stephaniem1950@gmail.com

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Al Jack Leonard		PO Box 655, Tabor City, NC 28463-0655	910-653-3458	910-653-3970	yamman@embarqmail.com

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110109

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Chadbourn WWTP

Facility Address1: 5275 Chadbourn Hwy

Facility Address2: NC Hwy 130

City, State & Zip: Chadbourn, NC 28431

Owner Information Details:

Owner Name: Town of Chadbourn

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Stevie L Cox **Title:**

Address1: 602 N Brown St

Address2:

City, State & Zip: Chadbourn, NC 28431

Work Phone: 910-654-4148 **Fax:** 910-654-4147

Email Address: steviecox@bizec.rr.com

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Michael Foss		602 N Brown St, Chadbourn, NC 28431	910-654-4148	910-654-4147	tocpw@bizec.rr.com

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Clint Ward		602 N Brown St, Chadbourn, NC 28431	910-645-3045		wwtptoc@gmail.com

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Michael Foss		602 N Brown St, Chadbourn, NC 28431	910-654-4148	910-654-4147	tocpw@bizec.rr.com

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110110

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Morehead City WWTP

Facility Address1: 1000 Treatment Plant Rd

Facility Address2:

City, State & Zip: Morehead City, NC 28557

Owner Information Details:

Owner Name: Town of Morehead City

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Gerald A Jones **Title:**

Address1: 706 Arendell St

Address2:

City, State & Zip: Morehead City, NC 28557-4234

Work Phone: 252-726-6848 Ext. 135 **Fax:** 252-726-2267

Email Address: mayorjones@bizec.rr.com

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
David S Whitlow		706 Arendell St, Morehead City, NC 28557-4234	252-726-6848 Ext. 113	252-726-6627	david.whitlow@bizec.rr.com

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Carl D Dangerfield		706 Arendell St, Morehead City, NC 28557-4234	252-726-6237	252-247-6190	mcwwtp@bizec.rr.com

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Daniel K Williams		706 Arendell St, Morehead City, NC 28557-4234	252-726-6848 Ext. 133	252-726-2267	mcwater@bizec.rr.com

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110111

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: TWSA Class A EQ Residuals Production Facility and Distribution Program

Facility Address1: 1871 N River Rd

Facility Address2:

City, State & Zip: Sylva, NC 28779

Owner Information Details:

Owner Name: Tuckaseigee Water & Sewer Authority

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Dan Harbaugh **Title:**

Address1: 1246 W Main St

Address2:

City, State & Zip: Sylva, NC 28779

Work Phone: 828-586-5189 **Fax:** 828-631-9089

Email Address: dharbaugh@twsanc.us

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Stan D Bryson		1246 W Main St, Sylva, NC 28779	828-586-9318		

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110112

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Statesville-4th Creek WWTP

Facility Address1: 693 Bell Farm Rd

Facility Address2:

City, State & Zip: Statesville, NC 28625

Owner Information Details:

Owner Name: City of Statesville

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Larry P Pressley **Title:** PE

Address1: City Of Statesville

Address2: PO Box 1111

City, State & Zip: Statesville, NC 28687-1111

Work Phone: 704-878-3551 **Fax:**

Email Address: lpressley@statesvillenc.net

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Larry P Pressley	PE	City Of Statesville, PO Box 1111, Statesville, NC 28687-1111	704-878-3551		lpressley@statesvillenc.net

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Andy Smith	Residuals Supervisor	PO Box 1111, Statesville, NC 28687-1111	704-878-3438		

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110113

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Statesville-3rd Creek WWTP

Facility Address1: 444 Third Creek Rd

Facility Address2:

City, State & Zip: Statesville, NC 28677

Owner Information Details:

Owner Name: City of Statesville

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Larry P Pressley **Title:** PE

Address1: City Of Statesville

Address2: PO Box 1111

City, State & Zip: Statesville, NC 28687-1111

Work Phone: 704-878-3551 **Fax:**

Email Address: lpressley@statesvillenc.net

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Larry P Pressley	PE	City Of Statesville, PO Box 1111, Statesville, NC 28687-1111	704-878-3551		lpressley@statesvillenc.net

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Scott Austin	plant super	PO Box 1111, Statesville, NC 28687-1111	704-872-9621	704-878-3537	saustin@statesvillenc.net

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Scott Austin		148 Wildlife Haven Dr, Statesville, NC 28625	704-878-3438		

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110114

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Mallard Creek Water Reclamation Facility (WRF)

Facility Address1: 12400 US Hwy 29 N

Facility Address2:

City, State & Zip: Charlotte, NC 28262

Owner Information Details:

Owner Name: Charlotte-Mecklenburg Utilities

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Jacqueline A Jarrell **Title:** PE

Address1: 4222 Westmont Dr

Address2:

City, State & Zip: Charlotte, NC 28217-1030

Work Phone: 704-336-4460 **Fax:** 704-336-5081

Email Address: jjarrell@ci.charlotte.nc.us

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Jacqueline A Jarrell	PE	4222 Westmont Dr, Charlotte, NC 28217-1030	704-336-4460	704-336-5081	jjarrell@ci.charlotte.nc.us

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Darrell Dewitt	ORC	12400 US Hwy 29, Charlotte, NC 28262	704-547-0680	704-549-4949	ddewitt@ci.charlotte.nc.us

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Jacqueline A Jarrell	PE	4222 Westmont Dr, Charlotte, NC 28217-1030	704-336-4460	704-336-5081	jjarrell@ci.charlotte.nc.us

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110115

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Town of Hillsborugh WWTP

Facility Address1: 355 Elizabeth Brady Rd

Facility Address2:

City, State & Zip: Hillsborough, NC 27278

Owner Information Details:

Owner Name: Town of Hillsborough

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Eric J Peterson **Title:**

Address1: PO Box 429

Address2:

City, State & Zip: Hillsborough, NC 27278-2131

Work Phone: 919-732-1270 **Fax:** 919-644-2390

Email Address:

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Jeff Mahagan		PO Box 429, Hillsborough, NC 27278-2131	919-732-2681		

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110116

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: North Cary Water Reclamation Facility

Facility Address1: 1900 Old Reedy Creek Rd

Facility Address2:

City, State & Zip: Cary, NC 27513

Owner Information Details:

Owner Name: Town of Cary

Owner Type: Non-Government **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Jamie Revels **Title:** E P

Address1: 400 James Jackson Ave

Address2:

City, State & Zip: Cary, NC 27512-8005

Work Phone: 919-469-4090 **Fax:** 919-469-4304

Email Address: jamie.revels@townofcary.org

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Paul D Ray		1900 Old Reedy Creek Rd, Cary, NC 27513	919-677-0850		paul.ray@townofcary.org

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110117

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: South Cary Water Reclamation Facility

Facility Address1: 4900 W Lake Rd

Facility Address2:

City, State & Zip: Apex, NC 27502

Owner Information Details:

Owner Name: South Cary Water Reclamation Facility

Owner Type: Non-Government **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Jamie Revels **Title:** Director Utilities

Address1: PO Box 8005

Address2:

City, State & Zip: Cary, NC 27512-8005

Work Phone: 919-469-4303 **Fax:**

Email Address: jamie.revels@townofcary.org

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Jamie Revels	Director Utilities	PO Box 8005, Cary, NC 27512-8005	919-469-4303		jamie.revels@townofcary.org

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Chris Parisher	mgr plant	PO Box 8005, Cary, NC 27512-8005	919-779-0697	919-662-8118	chris.parisher@townofcary.org

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Kelly Martin	lab super	PO Box 8005, Cary, NC 27512-8005	919-779-0697	919-662-8118	kelly.spainhour@townofcary.org

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110118

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: South Granville Water & Sewer Authority

Facility Address1: 1000 H St

Facility Address2:

City, State & Zip: Butner, NC 27509

Owner Information Details:

Owner Name: South Granville Water & Sewer Authority

Owner Type: Non-Government **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Lindsay L Mize **Title:** Director Executive

Address1: 415 Central Ave

Address2: Ste B

City, State & Zip: Butner, NC 27509

Work Phone: 919-575-3367 Ext. 312 **Fax:** 919-575-4547

Email Address: lmize@sgwasa.org

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Willmer Lawson	chief operator plant	415 Central Ave Ste B, Butner, NC 27509-1915	919-575-3111	919-575-0029	wlawson@sgwasa.org
Jarvis Koonces		415 Central Ave Ste B, Butner, NC 27509-1915	919-575-3111	919-575-0029	

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110119

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Salisbury-Rowan WWTP (Grant Creek Treatment Train)

Facility Address1: 1915 Grubb Ferry Rd

Facility Address2:

City, State & Zip: Salisbury, NC 28144-4261

Owner Information Details:

Owner Name: Salisbury-Rowan Utilities

Owner Type: Non-Government **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Sonja Basinger **Title:** Env Manager Services

Address1: 1915 Grubb Ferry Rd

Address2:

City, State & Zip: Salisbury, NC 28144-4261

Work Phone: 704-638-5375 **Fax:**

Email Address:

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Sonja Basinger	Env Manager Services	1915 Grubb Ferry Rd, Salisbury, NC 28144-4261	704-638-5375		

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110120

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Salisbury-Rowan WWTP (Town Creek Treatment Train)

Facility Address1: 850 Heiligtown Rd

Facility Address2:

City, State & Zip: East Spencer, NC 28039

Owner Information Details:

Owner Name: Salisbury-Rowan Utilities

Owner Type: Non-Government **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Sonja Basinger **Title:** Env Manager Services

Address1: 1915 Grubb Ferry Rd

Address2:

City, State & Zip: Salisbury, NC 28144-4261

Work Phone: 704-638-5375 **Fax:**

Email Address:

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Sonja Basinger	Env Manager Services	1915 Grubb Ferry Rd, Salisbury, NC 28144-4261	704-638-5375		

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110121

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: North Harnett Regional WWTP

Facility Address1: 607 Edwards Dr

Facility Address2:

City, State & Zip: Lillington, NC 27546

Owner Information Details:

Owner Name: Harnett County Public Utilities

Owner Type: Government - County **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Steve Ward **Title:** Director

Address1: PO Box 1119

Address2:

City, State & Zip: Lillington, NC 27546-1119

Work Phone: 910-893-7575 **Fax:** 910-893-0302

Email Address: sward@harnett.org

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110122

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Whiteville WWTP

Facility Address1: 1000 Nolan Ave

Facility Address2:

City, State & Zip: Whiteville, NC 28472

Owner Information Details:

Owner Name: City of Whiteville

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Edward L Faison **Title:**

Address1: PO Box 607

Address2:

City, State & Zip: Whiteville, NC 28472-0607

Work Phone: 910-642-8046 **Fax:** 910-642-8048

Email Address: lfaison@ci.whiteville.nc.us

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Debbie Smith		PO Box 607, Whiteville, NC 28472-0607	910-642-8046	910-642-8048	dsmith@ci.whiteville.nc.us

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Newlyn McCullen		PO Box 607, Whiteville, NC 28472-0607	910-642-5818	910-642-3094	nmccullen@ci.whiteville.nc.us

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Newlyn McCullen		PO Box 607, Whiteville, NC 28472-0607	910-642-5818	910-642-3094	nmccullen@ci.whiteville.nc.us

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110123

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Leith Creek WWTP

Facility Address1: Hall St Extension

Facility Address2:

City, State & Zip: Laurinburg, NC 28352

Owner Information Details:

Owner Name: City of Laurinburg

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Edward F Burchins **Title:** City Manager

Address1: PO Box 249

Address2:

City, State & Zip: Laurinburg, NC 28353

Work Phone: **Fax:**

Email Address:

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Robert A. Ellis		PO Box 249, Laurinburg, NC 28353	910-276-9374	910-277-3633	

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110124

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Mount Holly WWTP

Facility Address1: PO Box 406

Facility Address2:

City, State & Zip: Mount Holly, NC 28120

Owner Information Details:

Owner Name: Mount Holly WWTP

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Danny Jackson **Title:** City Manager

Address1: PO Box 406

Address2:

City, State & Zip: Mt Holly, NC 28120

Work Phone: 704-827-3931 **Fax:** 704-827-5672

Email Address: danny.jackson@ntholly.us

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Danny Jackson	City Manager	PO Box 406, Mt Holly, NC 28120	704-827-3931	704-827-5672	danny.jackson@ntholly.us

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Ralph Douglas		PO Box 406, Mt Holly, NC 28120	704-827-4261	704-827-6306	ralph.douglas@mtholly.us

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Ralph Douglas		PO Box 406, Mt Holly, NC 28120	704-827-4261	704-827-6306	ralph.douglas@mtholly.us

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110125

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Eagle Road WWTP

Facility Address1: 659 Eagle Rd

Facility Address2:

City, State & Zip: Cramerton, NC 28032

Owner Information Details:

Owner Name: City of Gastonia

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Debby Key **Title:**

Address1: PO Box 1748

Address2:

City, State & Zip: Gastonia, NC 28053-1748

Work Phone: 704-866-6854 **Fax:**

Email Address: debbyk@cityofgastonia.com

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Adrian C Sims	admin stormwater utility	1300 N Broad St, PO Box 1748, Gastonia, NC 28053	704-869-1013	704-869-1945	adrians@cityofgastonia.com

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Adrian C Sims	admin stormwater utility	1300 N Broad St, PO Box 1748, Gastonia, NC 28053	704-869-1013	704-869-1945	adrians@cityofgastonia.com
Hubert Harold Hampton		2226 Old Hickory Grove Rd, Mount Holly, NC 28120-9694	704-825-7499		

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Adrian Sims	Administrator Stormwater Utility	PO Box 1748, Gastonia, NC 28053-1748	704-869-1013		

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110126

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: City of Hamlet WWTP

Facility Address1: 790 Freeman Mill Rd

Facility Address2:

City, State & Zip: Hamlet, NC 28345

Owner Information Details:

Owner Name: City of Hamlet

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Marchell Adams David **Title:**

Address1: PO Box 1229

Address2:

City, State & Zip: Hamlet, NC 28345

Work Phone: 910-582-2651 **Fax:** 910-582-5815

Email Address:

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Earl G Dunn		303 Ann St, Hamlet, NC 28345	910-582-6074		

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110127

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: City of Lumberton-WWTP

Facility Address1: 700 Lafayette St

Facility Address2:

City, State & Zip: Lumberton, NC 28358

Owner Information Details:

Owner Name: City of Lumberton

Owner Type: Non-Government **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Jim Walters **Title:**

Address1: 700 Lafayette St

Address2:

City, State & Zip: Lumberton, NC 28358

Work Phone: 910-671-3859 **Fax:** 910-737-3965

Email Address: jwalters@ci.lumberton.nc.us

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Jim Walters		700 Lafayette St, Lumberton, NC 28358	910-671-3859	910-737-3965	jwalters@ci.lumberton.nc.us

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Jon Locklear		700 Lafayette St, Lumberton, NC 28358	910-671-3859	910-737-3965	jlocklear@ci.lumberton.nc.us

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110128

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Town of Cleveland WWTP

Facility Address1: 625 Third Creek Church Rd

Facility Address2:

City, State & Zip: Cleveland, NC 27013

Owner Information Details:

Owner Name: Town of Cleveland

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: John Steele **Title:** Mayor

Address1: PO Box 429

Address2:

City, State & Zip: Cleveland, NC 27013

Work Phone: 704-278-4777 **Fax:**

Email Address:

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Cathy G Payne		PO Box 429, Cleveland, NC 27013	704-278-4777	704-278-0078	clevelandclerk@bellsouth.net

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
John Steele	Mayor	PO Box 429, Cleveland, NC 27013	704-278-4777		

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110129

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Pilot Creek WWTP

Facility Address1: 200 Potts Creek Rd

Facility Address2:

City, State & Zip: Kings Mountain, NC 28086

Owner Information Details:

Owner Name: City of Kings Mountain

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Marilyn Sellers **Title:**

Address1: PO Box 429

Address2:

City, State & Zip: Kings Mountain, NC 28086-0429

Work Phone: 704-734-4531 **Fax:** 704-730-2152

Email Address:

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Dennis Wells	Director	PO Box 429, Kings Mountain, NC 28086-0429	704-734-4531	704-734-2152	dennisw@cityofkm.com

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Kim Teresa Moss		PO Box 429, Kings Mountain, NC 28086-0429	704-739-7131	704-734-4528	kimm@cityofkn.com

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110130

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Town of Stanley WWTP

Facility Address1: 109 Lola St

Facility Address2:

City, State & Zip: Stanley, NC 28164

Owner Information Details:

Owner Name: Town of Stanley

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Thomas E Datt **Title:**

Address1: PO Box 279

Address2:

City, State & Zip: Stanley, NC 28164

Work Phone: 704-263-4779 **Fax:** 704-263-9699

Email Address:

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
John Woods	dir public works	PO Box 279, Stanley, NC 28164	704-263-0298	704-263-1049	johnwoods@charlotte.twcbc.com
Thomas E Datt		PO Box 279, Stanley, NC 28164	704-263-4779	704-263-9699	

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Thomas E Datt		PO Box 279, Stanley, NC 28164	704-263-4779	704-263-9699	

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110132

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Town of Maiden WWTP

Facility Address1: Finger St

Facility Address2:

City, State & Zip: Maiden, NC 28650

Owner Information Details:

Owner Name: Town of Maiden

Owner Type: Non-Government **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Randy L Smith **Title:**

Address1: 113 W Main St

Address2:

City, State & Zip: Maiden, NC 28650

Work Phone: 828-428-5032 **Fax:** 828-528-5606

Email Address:

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Randy L Smith		113 W Main St, Maiden, NC 28650	828-428-5032	828-528-5606	

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110133

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Muddy Creek WWTP

Facility Address1: 4561 Cooper Rd

Facility Address2:

City, State & Zip: Winston Salem, NC 27102

Owner Information Details:

Owner Name: City of Winston-Salem

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: James F Crump **Title:**

Address1: 2801 Griffith Rd

Address2:

City, State & Zip: Winston Salem, NC 27103-6417

Work Phone: 336-765-0165 **Fax:**

Email Address:

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Ozie K Jones		4561 Cooper Rd, Winston Salem, NC 27102	336-397-7679		keithj@cityofws.org

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110134

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: City of Lincolnton WWTP

Facility Address1: 550 W Hwy 150 Bypass

Facility Address2:

City, State & Zip: Lincolnton, NC 28092

Owner Information Details:

Owner Name: City of Lincolnton

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Jeff B Emory **Title:**

Address1: PO Box 617

Address2:

City, State & Zip: Lincolnton, NC 28093-0617

Work Phone: 704-732-2281 **Fax:** 704-736-8959

Email Address:

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Donald Burkey	interim super	PO Box 617, Lincolnton, NC 28093-0617	704-736-8960	704-732-6137	donaldburkey@ci.lincolnton.nc.us

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Stephen H Peeler	Director Public Works	PO Box 617, Lincolnton, NC 28093-0617	704-736-8940	704-736-8959	

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110135

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Cherryville WWTP

Facility Address1: 736 Tot Dellinger Rd

Facility Address2:

City, State & Zip: Cherryville, NC 28021

Owner Information Details:

Owner Name: Cherryville WWTP

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Ben Blackburn **Title:** city mgr

Address1: 116 S Mountain St

Address2:

City, State & Zip: Cherryville, NC 28021-3421

Work Phone: 704-435-1711 **Fax:** 704-435-9933

Email Address: lwright@cityofcherryville.com

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Ben Blackburn	city mgr	116 S Mountain St, Cherryville, NC 28021-3421	704-435-1711	704-435-9933	lwright@cityofcherryville.com

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Larry Wright		116 S Mountain St, Cherryville, NC 28021-3421	704-435-1739	704-435-1713	lwright@cityofcherryville.com

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Larry Wright		116 S Mountain St, Cherryville, NC 28021-3421	704-435-1739	704-435-1713	lwright@cityofcherryville.com

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110136

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Black River Wastewater Treatment Plant

Facility Address1: 580 Jw Edwards Ln

Facility Address2:

City, State & Zip: Dunn, NC 28334

Owner Information Details:

Owner Name: City of Dunn

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Ronald D Autry **Title:**

Address1: PO Box 1065

Address2:

City, State & Zip: Dunn, NC 28335

Work Phone: 910-230-3500 **Fax:** 910-230-3590

Email Address: rautry@dunn-nc.org

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Donrie Eldridge Dukes		8456 Rhodes Pond Rd, Dunn, NC 28334	910-892-8162		

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110138

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: City of Randleman WWTP

Facility Address1: 3475 Applewood Rd

Facility Address2:

City, State & Zip: Randleman, NC 27317

Owner Information Details:

Owner Name: City of Randleman

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Tony Sears **Title:** City Manager

Address1: 101 Hillary St

Address2:

City, State & Zip: Randleman, NC 27317

Work Phone: 336-498-7500 **Fax:** 336-495-7503

Email Address: tsears@randleman.org

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Frankie Brewer		101 Hillary St, Randleman, NC 27317	336-498-2254		

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110139

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Yadkin Valley Sewer Authority WWTP

Facility Address1: 211 Marion Rd

Facility Address2:

City, State & Zip: Elkin, NC 28621

Owner Information Details:

Owner Name: Yadkin Valley Sewer Authority Inc

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Nicole Johnston **Title:** Director Executive

Address1: PO Box 828

Address2:

City, State & Zip: Elkin, NC 28621

Work Phone: 336-835-9840 **Fax:** 336-835-1284

Email Address: nicole.johnston@yvsa.org

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Hal Transou			336-835-9817		hal.transou@unitedwater.com

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110140

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: City of Mount Airy WWTP

Facility Address1: 1750 Andy Griffith Pkwy

Facility Address2:

City, State & Zip: Mount Airy, NC 27030

Owner Information Details:

Owner Name: City of Mount Airy

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Barbara Jones **Title:** City Manager

Address1: 300 S Main St

Address2:

City, State & Zip: Mount Airy, NC 27030

Work Phone: 336-786-3501 **Fax:** 336-719-7506

Email Address: bajones@mountairy.org

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Chris Marion		City Of Mount Airy, PO Box 70, Mount Airy, NC 27030			cmarion@mountairy.org

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Chris Marion		City Of Mount Airy, PO Box 70, Mount Airy, NC 27030			cmarion@mountairy.org

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110141

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: City of Asheboro WWTP

Facility Address1: 1032 Bonkemeyer Dr

Facility Address2:

City, State & Zip: Asheboro, NC 27203

Owner Information Details:

Owner Name: City of Asheboro

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: John N Ogburn **Title:**

Address1: PO Box 1106

Address2:

City, State & Zip: Asheboro, NC 27204-1106

Work Phone: 336-626-1213 **Fax:** 336-626-1218

Email Address:

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Michael R Wiseman		PO Box 1106, Asheboro, NC 27204-1106	336-672-0392		

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110142

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Mayodan Wastewater Treatment Plant

Facility Address1: 293 Cardwell Rd

Facility Address2:

City, State & Zip: Mayodan, NC 27027

Owner Information Details:

Owner Name: Town of Mayodan

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Michael Brandt **Title:**

Address1: 210 W Main St

Address2:

City, State & Zip: Mayodan, NC 27027-2019

Work Phone: 336-427-0241 **Fax:** 336-643-8654

Email Address:

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Debra E Cardwell		210 W Main St, Mayodan, NC 27027-2019	336-427-0241	336-427-7592	dcardwell@townofmayodan.org

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110143

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Reidsville WWTP

Facility Address1: 407 Broad St

Facility Address2:

City, State & Zip: Reidsville, NC 27320

Owner Information Details:

Owner Name: City of Reidsville

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Kevin Eason **Title:** Director Public Works

Address1: 1100 Vance St

Address2:

City, State & Zip: Reidsville, NC 27320

Work Phone: 336-349-1070 **Fax:** 336-634-1738

Email Address: keason@ci.reidsville.nc.us

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110144

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Denton WWTP

Facility Address1: 300 Council Access Rd

Facility Address2:

City, State & Zip: Denton, NC 27239

Owner Information Details:

Owner Name: Denton WWTP

Owner Type: Non-Government **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Victor Pizzurro **Title:** mgr town

Address1: 201 W Salisbury St

Address2:

City, State & Zip: Denton, NC 27239

Work Phone: 336-859-3082 **Fax:** 336-859-3381

Email Address: dentontm@triad.rr.com

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Victor Pizzurro	mgr town	201 W Salisbury St, Denton, NC 27239	336-859-3082	336-859-3381	dentontm@triad.rr.com

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Troy B Branch		PO Box 306, Denton, NC 27239-0306	336-859-4460	336-859-3381	

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110145

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: City of Conover NE WWTP

Facility Address1: 3680 Hillview Dr Ne

Facility Address2:

City, State & Zip: Conover, NC 28613

Owner Information Details:

Owner Name: City of Conover

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Michael Lee Fox **Title:**

Address1: PO Box 549

Address2:

City, State & Zip: Conover, NC 28613

Work Phone: 828-465-2279 **Fax:** 828-466-5106

Email Address:

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Michael Lee Fox		PO Box 549, Conover, NC 28613	828-465-2279	828-466-5106	

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110146

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Jefferson WWTP

Facility Address1: 1233 NC Hwy 16 S

Facility Address2:

City, State & Zip: Jefferson, NC 28640

Owner Information Details:

Owner Name: Town of Jefferson

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: D E Hightower **Title:**

Address1: PO Box 67

Address2:

City, State & Zip: Jefferson, NC 28640-0067

Work Phone: 336-246-2165 **Fax:**

Email Address:

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110147

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Northeast Brunswick Regional WWTP

Facility Address1: 10480 Royster Rd

Facility Address2:

City, State & Zip: Navassa, NC 28451

Owner Information Details:

Owner Name: Brunswick County

Owner Type: Government - County **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Steve Stone **Title:**

Address1: PO Box 249

Address2:

City, State & Zip: Bolivia, NC 28422-0249

Work Phone: 910-253-2015 **Fax:** 910-253-2022

Email Address: sstone@brunsco.net

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
John Nichols		PO Box 249, Bolivia, NC 28422-0249	910-253-2653	910-253-2581	jnichols@brunsco.net
24 Hour Emergency Contact			910-755-7921		

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Donald Bernard Dixon		PO Box 249, Bolivia, NC 28422-0249	910-253-2659		ddixon@brunsco.net
Matt Heyer			910-512-4616		mheyer@brunsco.net

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110148

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Town of West Jefferson WWTP

Facility Address1: 335 Clear Weater Dr

Facility Address2:

City, State & Zip: West Jefferson, NC 28694

Owner Information Details:

Owner Name: Town of West Jefferson

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Brantley Price **Title:**

Address1: PO Box 490

Address2:

City, State & Zip: W Jefferson, NC 28694

Work Phone: 336-246-3551 **Fax:** 336-246-4409

Email Address:

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
David Hamilton		PO Box 490, West Jefferson, NC 28694	336-246-3558	336-246-3558	wwtp@townofwj.com

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110149

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Northwest Regional Water Reclamation Facility

Facility Address1: Gum Branch Rd

Facility Address2:

City, State & Zip: Richlands, NC 28574

Owner Information Details:

Owner Name: Onslow Water and Sewer Authority

Owner Type: Government - County **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Billy Joe Farmer **Title:** dir executive

Address1: PO Box 1415

Address2:

City, State & Zip: Jacksonville, NC 28540-1415

Work Phone: 910-937-7532 **Fax:** 910-347-0793

Email Address: bfarmer@onwasa.com

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Billy Joe Farmer	dir executive	PO Box 1415, Jacksonville, NC 28540-1415	910-937-7532	910-347-0793	bfarmer@onwasa.com

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Tim Webb		228 Georgetown Rd, Jacksonville, NC 28541-1066	910-937-7509	910-455-5607	twebb@onwasa.com

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Tim Webb		228 Georgetown Rd, Jacksonville, NC 28541-1066	910-937-7509	910-455-5607	twebb@onwasa.com

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110150

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Wallace Regional WWTP

Facility Address1: 851 Old Wilmington Rd

Facility Address2:

City, State & Zip: Wallace, NC 28466

Owner Information Details:

Owner Name: Town of Wallace

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Charles C Farrior **Title:**

Address1: PO Box 849

Address2:

City, State & Zip: Wallace, NC 28466-0849

Work Phone: 910-285-2812 **Fax:** 910-285-7224

Email Address: charley@farriors.com

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Gerald F James		311 E Murray St, Wallace, NC 28466-0849	910-285-2812	910-285-7224	jjames@townofwallace.com
Matthew Livingston		PO Box 849, Wallace, NC 28466-0849	910-285-4136	910-285-5135	mlivingston@townofwallace.com

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Brent M Dean			910-285-5927		bdean@townofwallace.com

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110151

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: West Brunswick Regional WWTF

Facility Address1: 390 Green Swamp Rd

Facility Address2:

City, State & Zip: Supply, NC 28462

Owner Information Details:

Owner Name: Brunswick County

Owner Type: Government - County **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Steve Stone **Title:**

Address1: PO Box 249

Address2:

City, State & Zip: Bolivia, NC 28422-0249

Work Phone: 910-253-2015 **Fax:** 910-253-2022

Email Address: sstone@brunsco.net

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
John Nichols		PO Box 249, Bolivia, NC 28422-0249	910-253-2653	910-253-2581	jnichols@brunsco.net
24 Hour Emergency Contact			910-755-7921		

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Donald B Dixon	Superintendent Wastewater	PO Box 249, Bolivia, NC 28422-0249	910-755-7921	910-755-7927	ddixon@brunsco.net
Ronald B Worthington			910-612-2079	910-755-7927	rworthington@brunsco.net

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110152

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Jacksonville WWTF

Facility Address1: 716 Firetower Rd

Facility Address2:

City, State & Zip: Jacksonville, NC 28540

Owner Information Details:

Owner Name: City of Jacksonville

Owner Type: Government - Municipal **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Ronald Massey **Title:**

Address1: PO Box 128

Address2:

City, State & Zip: Jacksonville, NC 28541-0128

Work Phone: 910-938-5220 **Fax:** 910-455-6761

Email Address: rmassey@ci.jacksonville.nc.us

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Pat Donovan-Potts		PO Box 128, Jacksonville, NC 28541-0128	910-938-6446		pdonovan-potts@ci.jacksonville.nc.us

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Pat Donovan-Potts		PO Box 128, Jacksonville, NC 28541-0128	910-938-6446		pdonovan-potts@ci.jacksonville.nc.us

NC Division of Water Quality
NPDES Stormwater Permit Contacts Summary

NC DWQ has the following contact information in our Permit Database for your permit as of 5/28/2013.

Permit Number: NCG110153

Permit Type: Municipal WWTP > 1MGD, Stormwater Discharge, COC

Facility Name: Lincoln County Killian Creek WWTP

Facility Address1: 7085 Old Plank Rd

Facility Address2:

City, State & Zip: Stanley, NC 28164

Owner Information Details:

Owner Name: LIncoln County Public Works

Owner Type: Government - County **Owner Type Group:** Organization

***** Legally Responsible for Permit *****

(Responsible corporate officer/principle executive officer or ranking elected official/general partner or proprietor; or any other person with delegated signatory authority from the legally responsible person.)

Owner Affiliation: Stephen A Gilbert **Title:**

Address1: 115 W Main St

Address2:

City, State & Zip: Lincolnton, NC 28092

Work Phone: 704-736-8495 **Fax:** 704-736-8499

Email Address:

Owner Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email

Facility Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email
Tommy Drum		7085 Old Plank Rd, Stanley, NC 28164	704-748-2314		

Permit Contact Person(s)

Contact Name	Title	Address	Phone	Fax	Email