Appendix A: NPDES 1200-C Permit Application Form

DEQ/WQ/SWM-JEB-444.doc (11/02)



Please answer all questions. An incomplete application will not be processed. If the information requested is not applicable or not yet available, please indicate as such.

A. REFERENCE INFORMATION

A1 Enter the legal name of the applicant. Permit coverage will be issued to this entity. This is the person, business, public organization, or other entity responsible for assuring that erosion and sediment controls are in place and in working order through the life of the project. This must be the **legal** Oregon name (i.e., Acme Products, Inc.) or the **legal** representative of the company if it operates under an assumed business name (i.e., John Smith, dba Acme Products). The name must be a legal, active name registered with the Oregon Department of Commerce, Corporation Division in Salem at 503-378-4752 or http://www.filinginoregon.com , unless otherwise exempted by their rules.

To streamline administration and provide continuous permit coverage, the permit may be transferred from one party to another. For example, if a contractor feels that they will not be able to get a permit before the projected start date, the developer may apply for a permit and then transfer the permit over to the contractor. The transfer fee is \$60. Transfer forms are available from DEQ or at http://www.deq.state.or.us/wq/wqpermit/PmtTfrAppl.pdf.

- A2–4 Complete as indicated.
- A5 Enter invoicing information for annual compliance determination fee billing purposes if different from the Applicant in A1 (e.g., "Invoice To: Business Office Accounts Payable").

B. PROJECT SITE INFORMATION

- B1-4 Complete as indicated.
- B5 Enter the latitude and longitude of the approximate center of the facility or site in degrees/minutes/seconds. Latitude and longitude can be obtained from DEQ's location finder web site at <u>http://deq12.deq.state.or.us/website/findloc/</u> or from United States Geological Survey (USGS) quadrangle topographic maps by calling toll-free at 1-888-ASK-USGS (1-888-275-8747). For obtaining latitude and longitude from USGS maps, instructions may be obtained from DEQ's web site at <u>http://www.deq.state.or.us/wq/wqpermit/LatLongInstr.pdf</u>.
- B6-7 Complete as indicated.
- B8 Complete as indicated. If storm water will discharge to municipally owned storm sewer, authorization from the municipality must accompany this application. This authorization may be in the form of a preliminary approval letter from the city or county. The authorization does not have to be addressed directly to DEQ. It may be a preliminary review document developed by the city or county indicating that the project is approved in concept.

C. EROSION AND SEDIMENT CONTROL PLAN

C1 Complete as indicated. A detailed Erosion and Sediment Control Plan must be approved by DEQ before any activities may begin. Instructions on how to complete a plan may be found in DEQ's guidance document *NPDES Storm Water Regulations for Construction Projects* or at

 $\underline{http://www.deq.state.or.us/wq/wqpermit/genpermits/npdes1200c/Gen1200CGuidance.pdf}$

The plan must be submitted to DEQ at least thirty days before beginning any activities. Plan approval by DEQ will be in writing or by default (no response from DEQ thirty days after submitting plan). DEQ's agents may follow a different schedule.

C2 Complete as indicated.

D. LAND USE COMPATIBILITY STATEMENT

A Land Use Compatibility Statement (LUCS) must be signed by local planning department. If there are any conditions placed on the land use approval, the findings must be included. The LUCS form may be obtained from DEQ, found at http://www.deq.state.or.us/pubs/permithandbook/generallucs.pdf.

E. SIGNATURE

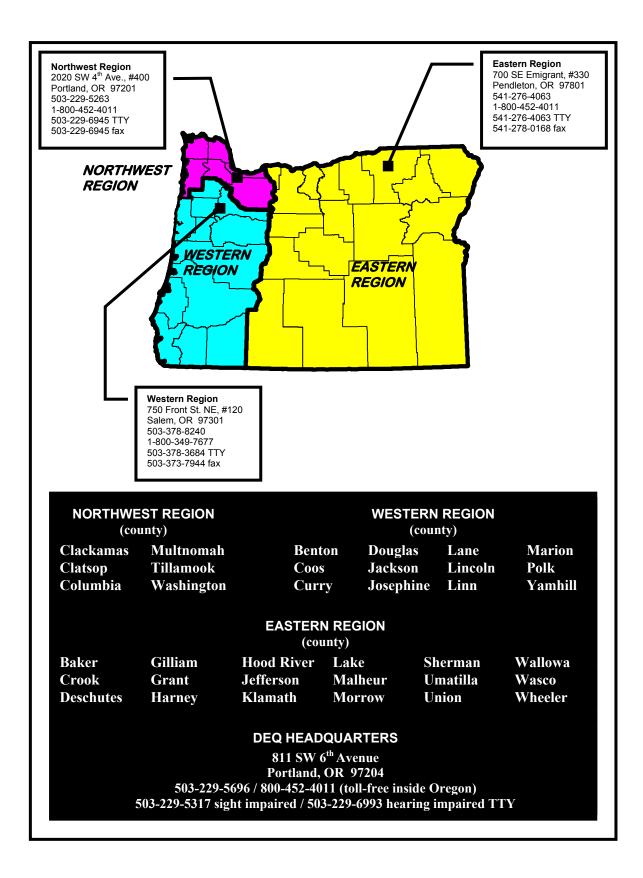
The legally authorized representative must sign the application. Please see the application form for more information.

FEE AND APPLICATION SUBMITTAL

The permit application fee total is **\$670**. The permittee will also be billed an annual compliance fee of \$330 in June for every year the permit is in effect. Please see the next page and the application form for the location to submit your fee and application.

DEQ MAIN REGIONAL OFFICES

If you have any questions, please contact the Water Quality Permit Coordinator in the DEQ regional office responsible for your county.



| DEQ USE ONLY Application #: | | TION FOR RAL PERMIT 1200-C | DEQ USE ON Received: | | | |
|---------------------------------------------------------------------------------------|--------------------------------------------|---------------------------------------|--------------------------------------------|-----------------|--|--|
| File #: | | | Amount Received: | | | |
| Mail ID #2/#9: | DEO | | Check #: Deposit #: | | | |
| LLID/RM: | Oregon Department of Environmental Quality | | \square IND \square DOM \square UIC: | | | |
| DOC Conf.: | For construction activities, inclu | | Notes: | | | |
| Notes: | Note: more acres over time as part of a c | | | | | |
| (For 1 or more acres of disturbance starting 12/01/2002) A. REFERENCE INFORMATION | | | | | | |
| | | | | | | |
| 1Applicant (Owner, Developer, or General Contractor) | | 2 Owner (if different from applicant) | | | | |
| Contact Name | | Contact Name | | | | |
| Address | | | Address | | | |
| City St | ate Zip | City | State | Zip | | |
| Telephone | E-Mail Address | Telephone | E-Mail Add | lress | | |
| 2 | | 4 | | | | |
| 3Architect/Engine | eering Firm | 4. Applicant's Designated Erc | osion and Sediment Cor | ntrol Inspector | | |
| Project Manager | | Со | Contact Name | | | |
| Address | | | Address | | | |
| City St | ate Zip | City — | State | Zip | | |
| Telephone | E-Mail Address | Telephone | E-Mail Addre | SS | | |
| 5. Invoice to: | | Telephone #: | | | | |
| Billing Address: | | City, State, Zip Code: | | | | |
| | B. PROJECT | INFORMATION | | | | |
| 1. Name of Project: | | 2. Proposed Start Date: | | | | |
| 3. General Property Description | | 4. Legal Description | | | | |
| Street Address: | | Tax Lot No.: | | | | |
| Cross Street: | | Section: Tow | nship Rar | nge | | |
| City: Zip | | Site Size (acres): | | | | |
| County: | | | Disturbed Area (acres): | | | |

| Name of Applicant: | | Name of Project: | | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| B. PROJECT INFORMATION continued | | | | | | |
| 5. Site Location by Latitude and Longitude Latitude: / Degrees / Longitude: / Degrees / | | Commercial Industrial Subdivision, N Utilities: | struction Activity Duplex Residential Jumber of Lots: | | | |
| 7. Existing Site Runoff Creek/Stream: Ditch: Municipal Storm Sewer or Drainage S Other: | System | 8. Proposed Site Runoff Creek/Stream: Ditch: Municipal Storm Sewer or Drainage System (See Note) Other: Note: If storm water discharges to a municipally owned storm sewer, authorization from the municipality must accompany this application. | | | | |
| C. EROSION AND SEDIMENT CONTROL PLAN | | | | | | |
| Erosion and Sediment Control Plan Subm Included with this application To be provided at a later date, approx. | | | | | | |
| The legally authorized representative must signeeded). Also, please also provide the inform Corporation — president, secretary, treamanager of one or more facilities employing million that is authorized in accordance to Partnership — General partner [list of Sole Proprietorship — Owner(s) [each City, County, State, Federal, or other Limited Liability Company — Member Trusts — Acting trustee [list of trustees] | TURE OF LEGALLY A gn the application. Ple mation requested in bra- asurer, vice-president, ing more than 250 perso- o corporate procedure to general partners, the nowner must sign the Public Facility — P [articles of organization s, their addresses and sined in this application determination fee investigation | AUTHORIZED REPRES ase see the following def ackets []. or any person who perfor sons or having gross ann o sign such documents <i>ir addresses and teleph</i> <i>application</i>] rincipal executive officer <i>tion</i>] <i>telephone numbers</i>] on is true and correct of ministrative Rules 340 | ENTATIVE finitions (see 40 CFR 122.22 for more detail it forms principal business functions; or a fual sales or expenditures exceeding \$25 <i>none numbers]</i> for or ranking elected official to the best of my knowledge and belief. In 0-045. This includes a renewal application | | | |
| Name of Legally Authorized Representa | tive (Type of Print) | | | | | |
| Signature of Legally Authorized R | | | Date | | | |
| Send this form, Land Use Compatibility Statement, and \$670 fee to the appropriate DEQ regional office: Make your check payable to the Department of Environmental Quality | | | | | | |
| DEQ Northwest Region 2020 SW 4 th Ave., Suite 400 Portland, OR 97201-4987 503-229-5263 or 1-800-452-4011 | 750 Front S Salem, OF | stern Region t. NE, Suite 120 R 97301-1039 or 1-800-349-7677 | DEQ Eastern Region 700 SE Emigrant, Suite 330 Pendleton, OR 97801 541-276-4063 or 1-800-452-4011 | | | |