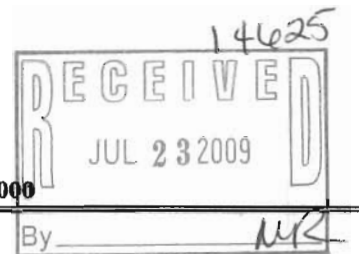


NOTICE OF INTENT (NOI)  
FOR DISCHARGERS OF STORMWATER RUNOFF  
ASSOCIATED WITH INDUSTRIAL ACTIVITY  
AUTHORIZED UNDER NPDES GENERAL PERMIT ARR000000



Application Type: New  Renewal  Permit No. ARR00\_A175

I. PERMITTEE/OPERATOR INFORMATION

Permittee (Legal Name)\*: Glad Manufacturing Company Operator Type:  
Permittee Mailing Address: 1700 North 13<sup>th</sup> Street  STATE  PARTNERSHIP  
Permittee City: Rogers  FEDERAL  CORPORATION<sup>#</sup>  
Permittee State: AR Zip: 72756  SOLE PROPRIETORSHIP  
Permittee Telephone Number: 479-636-2845  PUBLIC  
Permittee Fax Number: 479-659-6426  OTHER: \_\_\_\_\_  
Permittee E-mail Address: N/A <sup>#</sup>State of Incorporation: DE

\* The legal name of the Permittee must be identical to the name listed with the Arkansas Secretary of State.

II. INVOICE MAILING INFORMATION (if different from facility mailing address)

Invoice Contact Person: Mike Watkins City: \_\_\_\_\_  
Invoice Mailing Company: Same as above State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Invoice Mailing Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

III. FACILITY INFORMATION

Facility Name (if different from Permittee) \_\_\_\_\_  
Facility Physical Address: 1700 North 13<sup>th</sup> Street Contact Person: Mike Watkins  
Facility County: Benton Contact Title: Environmental Coordinator  
Facility City: Rogers Zip: 72756 Telephone Number: 479-246-6331  
Exit east off I-540 from exit 83, 3 miles east on Hudson Road, turn south on 13<sup>th</sup> St 1/2 mile, facility on west side of street.  
Directions to the Facility: \_\_\_\_\_ Fax Number: 479-659-6426  
AFIN (if known): 04-00100 Email Address: Mike.watkins@clorox.com

Is mailing address different from facility address?  Yes  No If yes, provide mailing address in the space provided.  
Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip: \_\_\_\_\_

Type of Business: Manufacturing Facility SIC Code(s): 2673 NAICS Code (s): 326111

Description of Major Process(es) at Facility:

Manufacture plastic bags and wrap

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List of Chemicals Used in the  
Process:

Polyethelene resin, Domino ink.

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**III. FACILITY INFORMATION CONT.**

Facility Latitude: \*    36 degrees    21 minutes    1.0 seconds  
Facility Longitude: \*    -94 degrees    8 minutes    8.3 seconds  
Accuracy:    1    Scale:    U    Datum:    U    Method:    7  
Description:    01099

\* Facility coordinates should be taken at the entrance to the facility.

**IV. OUTFALL INFORMATION**

Outfall number should be assigned sequentially to stormwater discharge locations if the facility has more than one outfall. (i.e. 001, 002, etc.) These should coincide with the Outfall locations on the site map for the facility.

Outfall:    001  
Outfall Latitude:    36 degrees    21 minutes    7.2 seconds  
Outfall Longitude:    -94 degrees    8 minutes    32.4 seconds  
Accuracy:    1    Scale:    U    Datum:    U    Method:    7  
Description:    01099

Receiving Stream:    Unnamed tributary of Osage Creek, thence Osage Creek, thence Arkansas River  
Stream Segment:    31    Hydrologic Basin Code:    11110103

Outfall:    002  
Outfall Latitude:    36 degrees    21 minutes    13.89 seconds  
Outfall Longitude:    -94 degrees    8 minutes    12.50 seconds  
Accuracy:    1    Scale:    U    Datum:    U    Method:    7  
Description:    01099

Receiving Stream:    Unnamed tributary of Osage Creek, thence Osage Creek, thence Arkansas River  
Stream Segment:    31    Hydrologic Basin Code:    11110103

Outfall:    003  
Outfall Latitude:    36 degrees    21 minutes    7.25 seconds  
Outfall Longitude:    -94 degrees    8 minutes    36.48 seconds  
Accuracy:    1    Scale:    U    Datum:    U    Method:    7  
Description:    01099

Receiving Stream:    Unnamed tributary of Osage Creek, thence Osage Creek, thence Arkansas River  
Stream Segment:    31    Hydrologic Basin Code:    11110103

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**V. DISCHARGE INFORMATION**

Is this a new discharge?  Yes  No If yes, date coverage desired: \_\_\_\_\_

Does the stormwater discharge adversely affect a listed endangered or threatened species or its critical habitat?  Yes  No\*

\* Source: \_\_\_\_\_

Does the facility have a stormwater pollution prevention plan?  Yes  No  
(NEW DISCHARGERS MUST SUBMIT A COPY OF THE PLAN WITH NOI)

For existing dischargers, date SWPPP was last updated? 07/29/2008

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**VI. FACILITY PERMIT INFORMATION**

List any additional permits from the Water Division that the facility may have coverage under.

NPDES Individual Permit Number (If Applicable): AR00A175

NPDES General Permit Number (If Applicable): ARG

NPDES General Construction Stormwater Permit Number (If Applicable): ARR15

No Discharge Permit Number (If Applicable): \_\_\_\_\_

List any permits the facility has from another division within ADEQ: 0407-AR-12

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**VII. CONSULTANT INFORMATION (If applicable)**

Consultant Company: N/A

Consultant Contact Name: \_\_\_\_\_

Consultant Email Address: \_\_\_\_\_

Consultant Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Consultant Phone Number: \_\_\_\_\_ Consultant Fax Number: \_\_\_\_\_

Consultant E-mail: \_\_\_\_\_

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**NOTICE OF INTENT (NOI)  
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**VIII. NO EXPOSURE EXCLUSION CERTIFICATION (Only permittees seeking a No Exposure Exclusion needs to fill out this section. See instructions for additional information.)**

Submission of this No Exposure Certification constitutes notice that the entity identified in Section I does not require permit authorization for its stormwater discharges associated with industrial activity in the State as identified in Section III under ADEQ's Stormwater General Permit due to the existence of a condition of No Exposure. A condition of No Exposure exists at an industrial facility when all industrial materials and activities are protected by a storm resistant shelter to prevent exposure to rain, snow, snowmelt, and/or runoff. Industrial materials or activities include, but are not limited to, material handling equipment or activities, industrial machinery, raw materials, intermediate products, by-products, final products, or waste products. Material handling activities include the storage, loading and unloading, transportation, or conveyance of any raw material, intermediate product, final product, or waste product. A storm resistant shelter is not required for the following industrial materials and activities:

1. Drums, barrels, tanks, and similar containers that are tightly sealed, provided those containers are not deteriorated and do not leak. "Sealed" means banded or otherwise secured and without operational taps or valves;
2. Adequately maintained vehicles used in material handling; and
3. Final products, other than those products that would be mobilized in stormwater discharges (e.g., rock salt).

A No Exposure Certification must be provided for each facility qualifying for the No Exposure Exclusion. In addition, the exclusion from NPDES permitting is available on a facility-wide basis only, not for individual outfalls. If any industrial activities or materials are or will be exposed to precipitation, the facility is not eligible for the "no exposure" exclusion.

By signing and submitting this No Exposure Certification form, the entity in Section A is certifying that a condition of No Exposure exists at its facility or site, and is obligated to comply with the terms and conditions of 40 CFR 122.26(g).

**EXPOSURE CHECKLIST**

Are any of the following materials or activities exposed to precipitation, now or in the foreseeable future? (Please check either "Yes" or "No" in the appropriate box.) **If you answer "Yes" to any of the questions (a) through (k), you are not eligible for the No Exposure Exclusion. If you answer "No" to questions (a) through (k) and "Yes" to question (l), determination of a No Exposure Exclusion will be made on a case-by-case basis.**

	Yes	No
a. Using, storing, or cleaning industrial machinery or equipment, and areas where residuals from using, storing, or cleaning industrial machinery or equipment remain and are exposed to stormwater.	<input type="checkbox"/>	<input type="checkbox"/>
b. Are materials or residuals on the ground or in stormwater inlets from spills/leaks.	<input type="checkbox"/>	<input type="checkbox"/>
c. Are materials or products from past industrial activity exposed.	<input type="checkbox"/>	<input type="checkbox"/>
d. Is material handling equipment exposed (except adequately maintained vehicles).	<input type="checkbox"/>	<input type="checkbox"/>
e. Are materials or products during loading/unloading or transporting activities exposed.	<input type="checkbox"/>	<input type="checkbox"/>
f. Materials or products stored outdoors (except final products intended for outside use [e.g., new cars] where exposure to stormwater does not result in the discharge of pollutants).	<input type="checkbox"/>	<input type="checkbox"/>
g. Materials contained in open, deteriorated, or leaking storage drums, barrels, tanks, and similar containers.	<input type="checkbox"/>	<input type="checkbox"/>
h. Materials or products handled/stored on roads or railways owned or maintained by the discharger.	<input type="checkbox"/>	<input type="checkbox"/>

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- |   | Yes                        | No                       |
|---|----------------------------|--------------------------|
| i. Waste materials exposed (except waste in covered, non-leaking containers [e.g., dumpsters]).   | <input type="checkbox"/>   | <input type="checkbox"/> |
| j. Application or disposal of process wastewater (unless otherwise permitted).  | <input type="checkbox"/>   | <input type="checkbox"/> |
| k. Particulate matter or visible deposits of residuals from roof stacks and/or vents not otherwise regulated (i.e., under an air quality control permit) and evident in the stormwater outflow. | <input type="checkbox"/>   | <input type="checkbox"/> |
| l. Allowed non-stormwater discharges go through any outfall(s).   | <input type="checkbox"/> * | <input type="checkbox"/> |

\* List all allowed non-stormwater discharges going through Outfall: \_\_\_\_\_

**CERTIFICATION STATEMENT**

**This statement must only be signed if a No Exposure Exclusion is being requested.**

“I certify under penalty of law that I have read and understand the eligibility requirements for claiming a condition of “No Exposure” and obtaining an exclusion from NPDES stormwater permitting; I certify under penalty of law that there are no discharges of stormwater contaminated by exposure to industrial activities or materials from the industrial facility or site identified in this document (except as allowed under 40 CFR 122.26(g)(2)); I understand that I am obligated to submit a No Exposure Certification form once every five years to the NPDES permitting authority and, if requested, to the operator of the local municipal separate storm sewer system (MS4) into which the facility discharges (where applicable). I understand that I must allow the NPDES permitting authority, or MS4 operator where the discharge is into the local MS4, to perform inspections to confirm the condition of No Exposure and to make such inspection reports publicly available upon request. I understand that I must obtain coverage under an NPDES permit prior to any point source discharge of stormwater from the facility; Additionally, I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.”

N/A

Typed or Printed Name: \_\_\_\_\_

Title: \_\_\_\_\_

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

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

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**IX. CERTIFICATION OF OPERATOR**

(This statement must be completed for all applicants requesting coverage under the ARR000000 (including No Exposure Exclusions. The Certification must be initialed and signed.)

WC "I certify that, if this facility is a corporation, it is registered with the Secretary of State of Arkansas. Please provide the full name of corporation if different than that listed in Section I above."

WC "I certify that a request has been sent to U.S. Fish and Wildlife and that the facility will comply with the Endangered Species Act. (Not applicable for No Exposure Exclusions)"

WC "I certify that a stormwater pollution prevention plan has been developed in accordance with Part 4 of the general permit. (Not applicable for No Exposure Exclusions)"

WC "I certify that the cognizant official designated in Part IX of this Notice of Intent is qualified to act as a duly authorized representative under the provisions of 40 CFR 122.22(b). If no cognizant official has been designated, I understand that the Department will accept reports only signed by the applicant."

WC "I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations."

Responsible Official Printed Name: Wayne Clive Title: Plant Manager  
Responsible Official Signature: *Wayne Clive* Date: 7/22/09

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**X. COGNIZANT OFFICIAL**

Cognizant Official Printed Name: Wayne Clive Title: Plant Manager  
Cognizant Official Signature: *Wayne Clive* Telephone: 479/ 636-2845  
Cognizant Official E-mail: Wayne.clive@clorox.com

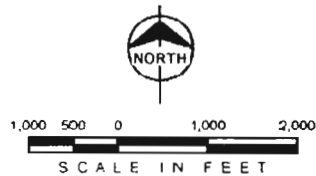
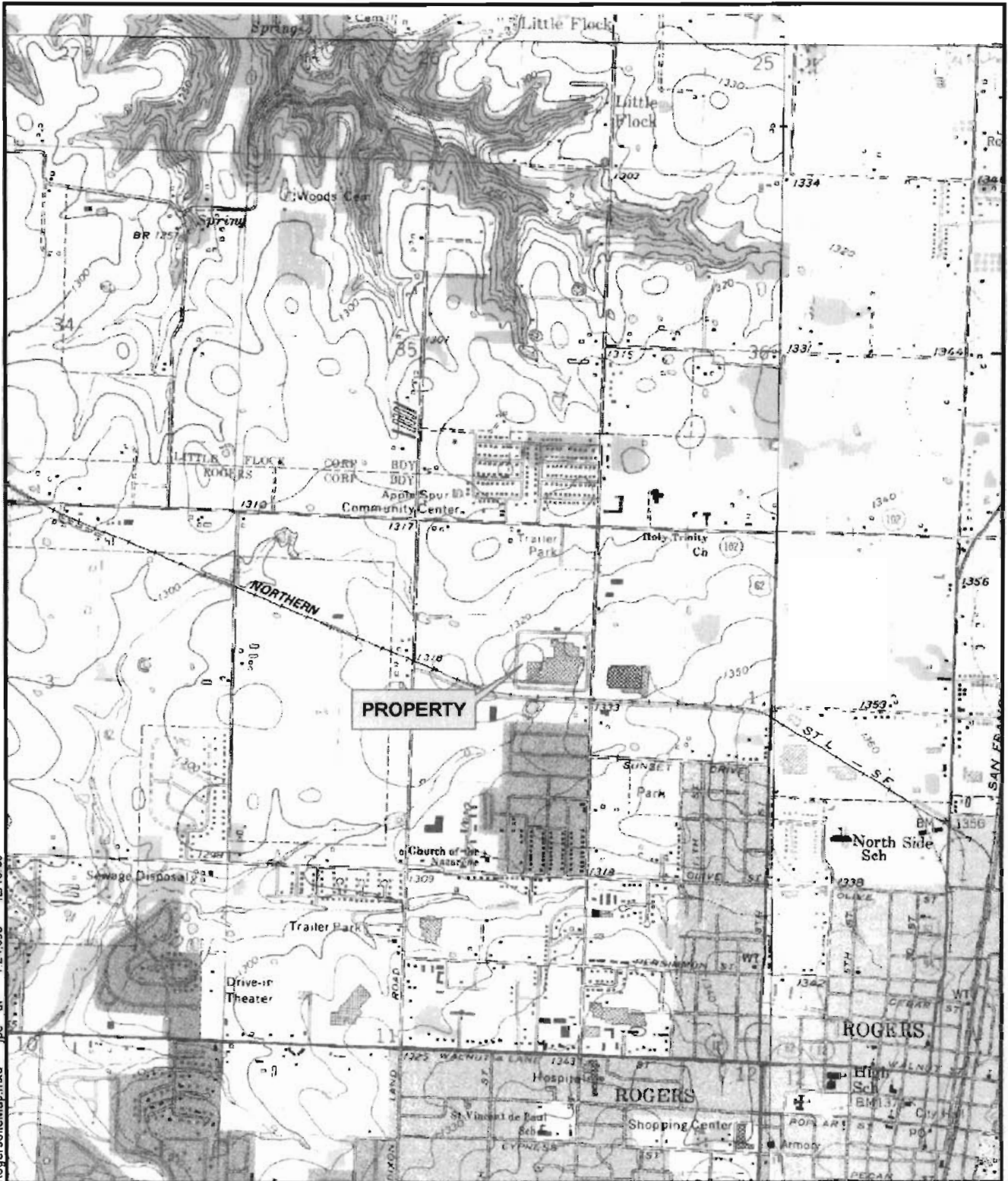
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**XI. PERMIT REQUIREMENT VERIFICATION**

Please check the following to verify completion of permit requirements.

	Yes	No
Submittal of Complete NOI?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Submittal of Required Permit Fee? (New Discharger Only) <u>N/A</u>	<input type="checkbox"/>	<input type="checkbox"/>
Check Number: _____		
Submittal of SWPPP (for new dischargers only) <u>N/A</u>	<input type="checkbox"/>	<input type="checkbox"/>
Submittal of Site Map (for existing dischargers only)	<input checked="" type="checkbox"/>	<input type="checkbox"/>

U:\wcdmaps\40812\ArcDocs\RogersSiteMap.mxd jpe ar 1:24,000 12/15/05



**NOTES:**

Source:  
USGS 7.5' Series  
Topographic Maps  
Rogers, AR Quadrangle, 1980



**SITE VICINITY MAP  
GLAD MANUFACTURING CO.  
1700 NORTH 13TH STREET  
ROGERS, ARKANSAS**



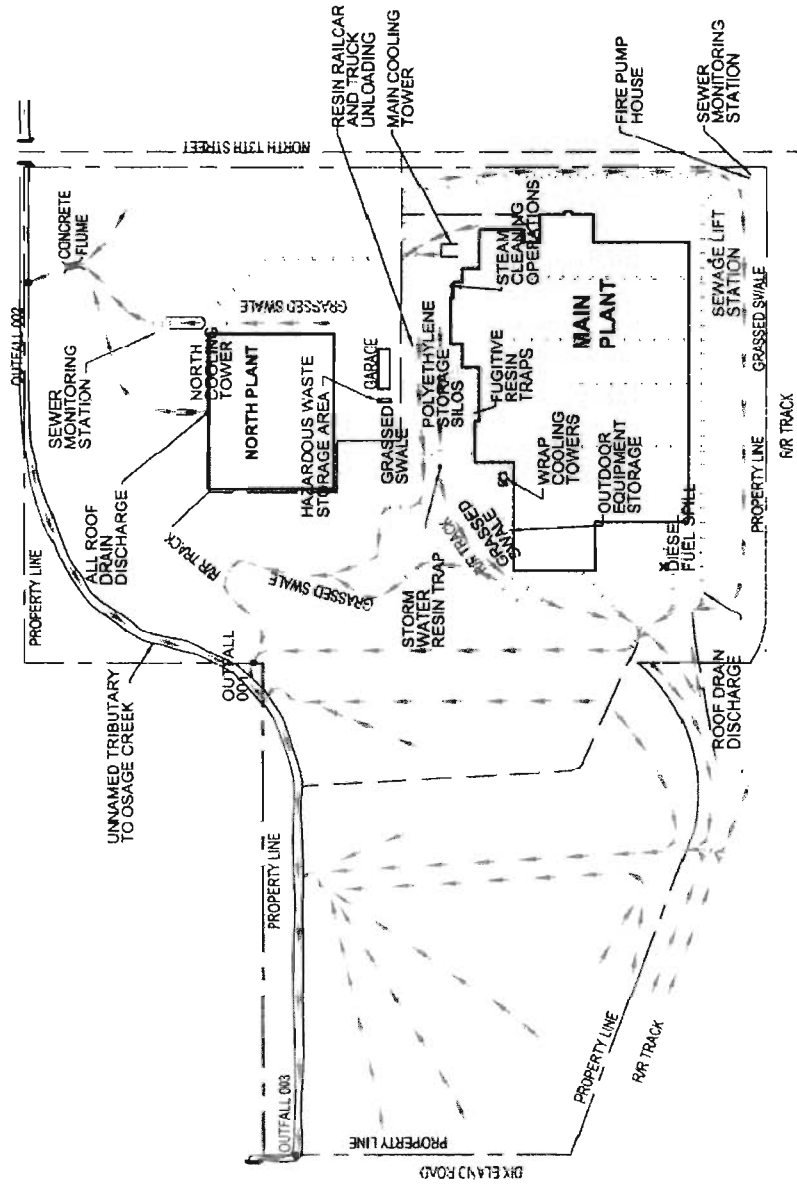
**NOTE:**  
1. FIGURE PROVIDED BY  
GLAD MANUFACTURING  
COMPANY.

- LEGEND**
- PROPERTY LINE
  - - - DRAINAGE BOUNDARY
  - FLOW LINES
  - - - RAILROAD TRACKS
  - CONCRETE OR ASPHALT PAVEMENT
  - GRAVEL



**BURNS & MCDONNELL**

Figure 2-2  
SITE MAP  
GLAD MANUFACTURING CO.,  
ROGER, ARKANSAS



## Rice, Melinda

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**From:** mike.watkins@clorox.com  
**Sent:** Wednesday, July 22, 2009 11:52 AM  
**To:** Water Permit Application  
**Subject:** Renewal documents for Glad Manufacturing Co.

**Importance:** High



NPDES Renewal july  
22 2009.pdf...

General Permits Engineer,

Attached is the Notice of Intent for NPDES Stormwater Permit Renewal. Site maps have also been included.

(See attached file: NPDES Renewal july 22 2009.pdf)

Any questions or additional information needed please don't hesitate the writer.

Mike Watkins, SSH  
Environmental, Health, and Safety Department  
Glad Manufacturing Company  
479/ 246-6331 (Office)  
479/ 366-1862 (Cell)  
479/ 659-6426 (Fax)

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