

3M Industrial Mineral Products 3M

PO Box 165860 Little Rock, AR 72216 - 5860 Phone (501) 490-1509

June 26, 2017

Arkansas Department of Environmental Quality Office of Water 5301 North Shore Drive North Little Rock, Arkansas 72118-5317 Email: Water.permit.application@aden.state.ar.us RECEIVED

JUL - \$2017

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Subject:

Outfall 003 Non-contact Cooling Water Permit Renewal - Notice of Intent

3M Company – College Station Granule Plant - Little Rock. NPDES Permit Number ARG250015, AFIN 60-00003

Dear Sir or Madam:

Please find the enclosed 3M College Station Granule Plant Notice of Intent (NOI). permit fee (\$200), site map, and disclosure statement information for renewing the Outfall 003 Non-Contact Cooling Water NPDES General Permit ARG250015. The Outfall 003 non-contact cooling discharge is once through cooling water with no additives. The cooling water source is drinking water supplied by Central Arkansas Water.

3M is providing the internet web link listed below, which has Disclosure Information/Statements for the company and its facilities: http://investors.3m.com/financials/annual-reports-and-proxy-statements/default.aspx

Please contact Steven Srebalus at 501-490-8731 or <u>SSSrebalus@MMM.com</u>), if ADEQ has questions or comments regarding the submitted information.

Respectfully submitted,

EHS / Manufacturing Technology Manager

3M Industrial Minerals Products Division

Little Rock, AR

Enclosures

General Permit – NOI

General Permit – Permit Fee

Site Maps



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Respectfully submitted,

John Lowrey
EHS / Manufacturing Technology Manager
3M Industrial Minerals Products Division
Little Rock, AR

Enclosures

- General Permit NOI
- General Permit Permit Fee
- Site Maps

ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY NOTICE OF INTENT

NON-CONTACT COOLING WATER, COOLING TOWER AND BOILER BLOW DOWN NPDES GENERAL PERMIT ARG250000

Application Type: New Renewal Renewal	Permit # ARG25 <u>0015</u>
I. PERMITTEE/OPERATOR INFORMATION	AFIN# <u>60-00003</u>
Permittee (Legal Name): 3M Company	Operator Type:
Permittee Mailing Address: PO Box 165860	_
	State Partnership
Permittee City: Little Rock	☐ Federal ☐ Corporation*
Permittee State: Arkansas Zip: 72216	Sole Proprietorship/Private
Permittee Telephone Number: 501-490-8731	*State of Incorporation: MN
Permittee Fax Number: 501-490-4116	The legal name of the Permittee must be identical to the name listed with the
Permittee E-mail Address: SSSrebalus@MMM.com	Arkansas Secretary of State.
II. INVOICE MAILING INFORMATION	
Invoice Contact Person: Mr. Steven Srebalus	City: Little Rock
Invoice Mailing Company: 3M Company	State: Arkansas Zip: 72216
Invoice Mailing Address: PO Box 165860	Telephone: 501-490-8731
Facility Address: 3110 Walters Road Facility County: Pulaski Confidence of Confidence	Contact Person: Contact Title: Intact Telephone Contact E-mail: Contact E-mail: Clay, Ceramic, and
	of Business: Refractory Mineral Mining
Facility Latitude: 34 Deg 42 Min 27.9 Sec Facility Longitum NAD	The state of the s
Accuracy: 10 meters Method: USGS Datum: 83 S Section: 18 Township: 1 North Range: West	cale: 1:24,000 Description: Main Gate
Stream Segment: 3C Hydrologic Basin Outfall Latitude: 34 Deg 42 Min 34.46 Sec Outfall Longitude 11.1 Interpolatio	94,000 Average Flow: 450,000 Max gpd (Gallons per Day) Code: 11110207 92 Deg 14 Min 14.14 Sec 10 Outfall ale: meters Description: Weir Box
Accuracy: meter Method: n-Satellite Datum: 83 Scarting Type of Treatment: Cooling Tower when needed.	meters Description. Well BOX
Receiving Stream: Unnamed Tridutary of Fourche Creek, thence to Four	urche Creek, thence to Arkansas River

WATER DIVISION

5301 NORTHSHORE DRIVE / NORTH LITTLE ROCK, ARKANSAS 72118

PHONE 501-682-0623 / FAX 501-682-0880

-	NA			Industraia Das	Flow:	§	gpd (Gallons	per D	ay)
Stream Segment: _ Outfall Latitude:	Deg	Min		Hydrologic Bas Dutfall Longitu		Deg	Min	Se	20
Accuracy:	Method:		Datum		Scale:	Deg	Description		
Type of Treatment:			Datuii		scare.		Description		
Receiving Stream:									
V. FACILITY PER	RMIT INFORM	ATION		-					
	NPDES Ind	vidual Permit	Numbe	r (If Applicable	e): AR00	0			
				r (If Applicable		250015			
	State Const	ruction Permi	t Numbe	er(If Applicable	e): NA				
NPDES General C					-	15			
VI. OTHER INFO	DRMATION:								
VII. OTHER INIC									
Additional Location				Exchange, Tak /aters Road to				er, go	0.9
Additional Location	n Descriptionn	niles, turn left	t onto W		the Plant	t Entranc	e.		
Additional Location	n Descriptionn al Comments:L	niles, turn left ast 5 years	t onto W of Outf	laters Road to	the Plant ge DMR	t Entranc	e.		
Additional Location	n Description nl Comments: Lontact Name: F	niles, turn left ast 5 years	of Outf tes, Ltd	/aters Road to fall 003 avera d – Nathan Si	the Plant ge DMR	t Entranc	e.		
Additional Location Additiona Consultant Co	n Description _n nl Comments: _L ontact Name: _F nail Address:	niles, turn left ast 5 years TN Associa IJS@FTN-A Innwood	of Outf tes, Ltd	/aters Road to fall 003 avera d – Nathan Si om	the Plant ge DMR	t Entranc	e.		
Additional Location Additiona Consultant Co	n Description _n l Comments: _L contact Name: _F mail Address:	niles, turn left ast 5 years TN Associa IJS@FTN-A	of Outf tes, Ltd	/aters Road to fall 003 avera d – Nathan Si om Little	the Plant ige DMR iria	t Entranc	ce. presented i		

Disclosure Statements:

Arkansas Code Annotated Section 8-1-106 requires that all applicants for the issuance or transfer of any permit, license, certification or operational authority issued by the Arkansas Department of Environmental Quality (ADEQ) file a disclosure statement with their applications. The filing of a disclosure statement is mandatory. No application can be considered complete without one. You must submit a new disclosure statement even if you have one on file with the Department. The form may be obtained from ADEQ web site at: http://www.adeq.state.ar.us/disclosure_stmt.pdf.

VII. EFFLUENT CHARACTERISTICS:

- A. Existing Source- Provide measurements for the parameters listed in the table below.
- B. New Discharges- Provide estimates for the parameters listed in the table below.

Туре	Analyses						Additives * Yes/No
	Flow, MGD	COD, mg/l	TSS, mg/l	Temperature, ° F	O &G, mg/l	pH, s.u.	
Non-Contact Cooling Water	0.094	<12	<6.0	75.1	<5.0	6.9	No
Cooling Tower Blowdown	NA						
Boiler Blowdown	NA						

^{*} Enclose MSDS Sheets for Additives *

understand that the Dej "I certify under penalty supervision in accorda evaluate the informatio gathering the informatio and complete. I am av	ne provisions of 40 CFR 122.22(b). If no cognizar partment will accept reports signed only by the Application of law that this document and all attachments we make with a system designed to assure that qualified in submitted. Based on my inquiry of the person on, the information submitted is, to the best of my known ware that there are significant penalties for submitting mprisonment for knowing violations."	re prepared under my direction or ed personnel properly gather and or persons directly responsible for nowledge and belief, true, accurate,
Responsible Official Printed Name: Responsible Official Signature: Responsible Official Email:	111111111111111111111111111111111111111	facturing Technology Manager
Cognizant Official Printed Name:	Mr. Martin J. Green Title:	EHS/PE Manager
Cognizant Official Signature:	Martin J. Corgen Date:	6-27-17
Cognizant Official Email:	MJGreen1@MMM.com Telephone:	<u>501-490-8731</u>
X. PERMIT REQUIREMENT VE Please check the following to veri	RIFICATION fy completion of permit requirements. Yes No * If No is answered for any of the questi	ons, then a permit cannot be issued!
Submittal of Complete NOI? Submittal of Required Permit Fee?	 □ Check Number: 100211 	

Unitial) "I certify that, if this facility is a corporation, it is registered with the Secretary of the State of Arkansas."

(Initial) "I certify that the cognizant official designated in this Application is qualified to act as a duly authorized

CERTIFICATION OF OPERATOR

Submittal of Site Map?

Submittal of Disclosure

Statement?

 \boxtimes

X



