Arkansas Department of Environmental Quality Permits Branch, Water Division 5301 Northshore Drive North Little Rock, AR 72118 (501) 682-0623

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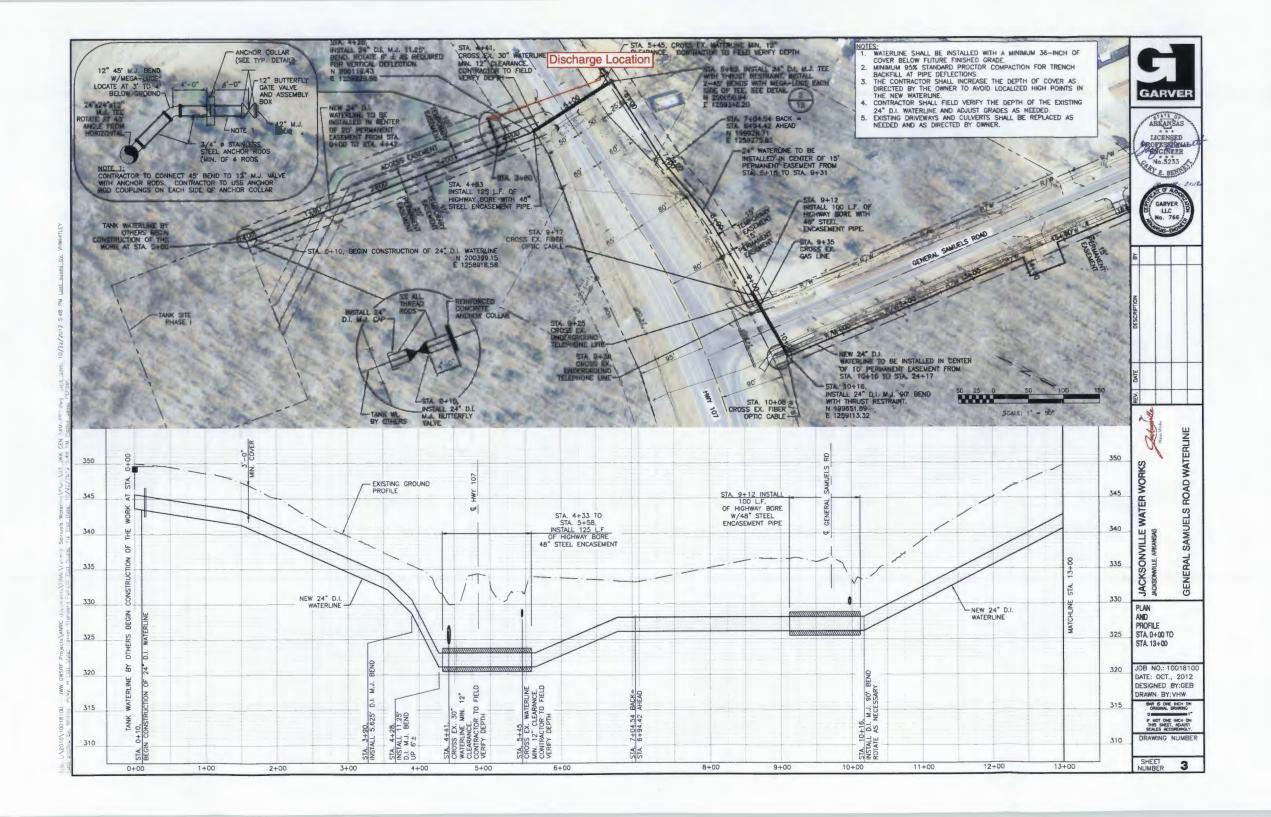
NOTICE OF INTENT PIPELINE HYDROSTATIC TESTING DISCHARGE NPDES GENERAL PERMIT ARG6700000							
APPLICANT INFORMATION	PROJECT INFORMATION						
1. Legal Name of Applicant (Operator): Water Works	I. Name of the Project: 3 MG Tank						
2. Applicant Legal Address: 1900 Marshall Rd	2. Project Physical Location: General Samuels Rd & AR Hwy. 107						
3. Applicant City: Jacksonville	3. Project City: Jacksonville						
4. State: AR Zip: 72076	4. State: AR Zip: 72076						
5. Applicant Telephone Number: 501-982-6561	6. Project Contact Person and Telephone:						
6. Applicant Type (check one): (Note Certification)	Contact Person Name: Jake Short						
X State ☐ Federal ☐ Partnership ☐ Sole Proprietorship ☐ Corporation*	Contact Person Title: General Manager						
*State of Incorporation:	Contact Person Telephone Number: 501-982-6561						
7. Permit and DMR send to: Jacksonville Water Works	10. Project Latitude: 34 ° 52 , 59 "						
ATTN: Jake Short	Longitude: 92 ° 10 , 37 "						
Address: 1900 Marshall Rd	12. Additional Project Location Information:						
City: Jacksonville	Section: Township: Range:						
State: AR Zip: 72076	Project County: Pulaski						
8. Cognizant Official: Jake Short	13. Facility/Project NAICS Codes:						
Cognizant Title: General Manager	Type of Business:						
Cognizant Telephone: 501-982-6561							
OUTFALI	INFORMATION						
I. Outfall Number: 001	4. Estimated Volume of Discharge: gallons 175,000						
(a) Stream Segment: 3B	5. Estimated Rate of Discharge: 0.1 MGD						
(b) Hydrologic Basin Code: 8020402	6. Source of Test Water: Jacksonville Water Works						
(c) Outfall Latitude: 34 ° 52 ' 59 " Longitude: 92 ° 10 ' 37 "	7. Pipeline/Vessel: USED X VIRGIN OTHER:						
(d) Section: Township: Range:	8. Describe material from which pipeline/vessel was constructed: Ductile Iron Pipe, Welded Steel Tan						
(e) County: Pulaski	9. Type of fluid normally contained/transported through pipe/vessel: Potable Water						
(f) Start Date: 8/18/14 End Date: 9/30/14 2. Name of Receiving Stream: Bayou Meto	10. Corrosion Inhibitors used: Yes No X If yes, brief description (Including any potentially toxic constituents)						
3. Are any of the Receiving Stream(s) on the latest Clean Water Act section 303(d) list of impaired waters or have an approved TMDL? [Yes X]No [N/A] If yes, list the Receiving Stream(s):							

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1. Outfall Number:	4. Estimated Volume of Discharge: gallons							
(a) Stream Segment:	5. Estimated Rate of Discharge: MGD							
(b) Hydrologic Basin Code:	6. Source of Test Water:							
(c) Outfall Latitude:°'" Longitude:°'"	7. Pipeline/Vessel: USED VIRGIN OTHER:							
(d) Section: Township: Range:	8. Describe material from which pipeline/vessel was constructed:							
(e) County:	9. Type of fluid normally contained/transported through pipe/vessel:							
(f) Start Date: End Date:	10. Corrosion Inhibitors used: Yes No If yes, brief description (Including any potentially toxic constituents)							
2. Name of Receiving Stream:								
3. Are any of the Receiving Stream(s) on the latest Clean Water Act section 303(d) list of impaired waters or have an approved TMDL? Yes No No N/A If yes, list the Receiving Stream(s):								
ADDITIONAL OUTFALLS CAN ADDED USING SEPARATE ATTACHED PAGES.								
ADDITIONAL PERMIT INFORMATION								
1. Is the permittee capable of meeting the applicable effluent lim * If the answer is NO, DO NOT submit the NOI for permit co								
2. Facility has Individual NPDES Permit: YES (Permit Number) X NO								
3. Disclosure Statement : 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								
CERTIFICATION								
"I certify that, if this facility is a corporation, it is registered with the Secretary of the State of Arkansas."								
"I certify that the cognizant official designated in this Application 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 signed only by the Applicant. 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 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."								
Typed or Printed Name: Jake Short	Title: General Manager							
Signature:	Date: 8/13/14/							

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ADDITIONAL INFORMATION										
1. Additional locati	on descr	iption:								
2. Additional Comments:										
Permittee please c	heck the	following	g:							
Complete NOI:	Yes	NO	Disclosure:	Yes	NO	Мар:	Yes	NO	Yes Fee: X	NO



General Permit Route Sheet

HUC: 8020402

	CHO MOZE							
Facility Name			3/2/1/2					
Permit Numbe	Permit Number		G OTUKO	AFIN NO	*	1-04/29		
Stream Segme	ent: 38	•	Receiving Stream:	Bayou M	uo			
Assigned			Activity	Initials		Date Complete/Entered		
Sect.	Number/F appropria folders (1				N/A			
Engineer	Review/Er	and Technical permit information into lays)			Α			
AA (Max of 5 business days)	Database (3-days) AFIN request (1-day)		17		8/14			
	PDS and	Enter AFIN and other information into PDS and NPDES database prior to requesting invoice (same day) Complete Invoice Request Form and submit Invoice Request (same day) Prepare Authorization letter and attach appropriate permit, forms (1-day) Review/organize folder for scanning (1-day)		JB)		81M.		
	•			100		5/14		
	attach ap			M		8/14		
Engineer	Review/or day)	ganiz	e folder for scanning (1-	AK		8/14		
Engineer Supervisor	perform	rechn	documents/permits/ ical review for the ect. (1-day)	a	4	8114		
Assistant Chief	1		cuments and sign the letter or the permit.					
AA	Enter Int Status/Et Input eff database	fect ectiv	ive Date. e date in access		7	3/18		
Sect.	folder an folders. I include th	d plad Ipdat iis pe	o applicant. Scan complete ce in appropriate E-drive te Zylab. Be sure to rmit in weekly report, sday by 2:00 P.M.					

REMARKS:				