



ARKANSAS
Department of Environmental Quality

**NOTICE OF INTENT
NPDES GENERAL PERMIT ARG160000
FOR CONSTRUCTION AND DISCHARGE OF UNCONTAMINATED STORMWATER FROM A
SANITARY LANDFILL SEDIMENT POND**

The attached form can be used by all persons desiring coverage under NPDES general permit ARG160000 (for Construction and Discharge of Uncontaminated Stormwater from a Sanitary Landfill Sediment Pond). The form should be completed and submitted to this Department in accordance with Part 1.3 of the general permit.

Be sure to read the permit (ARG160000), which describes coverage under this permit, effluent requirements, discharge limitations, and other standard conditions that are applicable. A copy of the permit, fact sheet, and other pertinent information can be obtained on the Department’s website:

http://www.adeg.state.ar.us/water/branch_permits/general_permits/default.htm

If you have any questions concerning the ARG160000 permit information or Notice of Intent, please contact General Permits Section of the Water Division at (501) 682-0623.

REMEMBER THE FOLLOWING:

1. The Notice of Intent (NOI) must be complete. Do not leave any question blank; use "NA" if a question is not applicable. Outfall information must be completed; it cannot be blank or "NA".
2. A Topographic map showing the location of the discharge points must be attached to the Notice of Intent at the time of submission.
3. Read the Certification.
4. A \$400.00 Check payable to ADEQ (Re: ARG160000). An additional \$500 fee is required if this permit is also covering the construction of a sedimentation pond.
5. A Disclosure form. 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. A new disclosure statement must be submitted even if one is already on file with the Department. The form may be obtained from ADEQ web site at: http://www.adeg.state.ar.us/disclosure_stmt.pdf

Please call the following number if you have any questions on this Form:

<u>Topic</u>	<u>Contact person</u>	<u>Phone Number</u>
Area Map and USGS Hydrologic Unit Code	Department of the Interior United States Geological Survey	(501)296-1877
Domestic Drinking Water Supply Intake	Department of Health	(501)661-2623
General Information	Permits Branch	(501)682-0623

WATER DIVISION
5301 NORTSHORE DRIVE / NORTH LITTLE ROCK, ARKANSAS 72118
PHONE 501-682-0623 / FAX 501-682-0880
www.adeg.state.ar.us Revised 8/2014



INSTRUCTIONS

I. How to Determine your Hydrologic Basin Code for the Facility/Outfall:

1. Locate the county of your facility on the map on Page 6.
2. Find the numbered segment overlaying the county.
3. Find the Eight Digit Hydrologic Basin Code located inside the numbered segment.

II. How to Determine your Stream Segment for the Facility/Outfall:

1. Locate the county of your facility on the map on Page 6.
2. Find the numbered Stream Segment overlaying the county. For example 2C overlays most of Saline County. 2C would be the Stream Segment for any facility located within that segment.

III. How to Determine your Ultimate Receiving Waters:

1. Locate the county of your facility on the map on Page 6.
2. Find the numbered segment overlaying the county.
3. Match the number from the segment to one of the numbered Ultimate Receiving Waters. For example: A facility located in Western Saline County is in segment 2C. The “2” determines that the Ultimate Receiving Water for the project is the Ouachita River.

IV. Signatory Requirements: The information contained in this form must be certified by a **Responsible Official** as defined in the “signatory requirements for permit applications” (40 CFR 122.22).

Responsible official is defined as follows:

For a **corporation**: by a responsible corporate officer. For purposes of this section, a responsible corporate officer means:

- 1) A president, treasurer, or vice-president of the corporation in charge of a principal business function, or any other person who performs similar policy or decision-making functions for the corporation; or
- 2) The manager of one or more manufacturing, production, or operating facilities, provided, the manager is authorized to make management decisions which govern the operation of the regulated facility including having the explicit or implicit duty of making major capital investment recommendations, and initiating and directing other comprehensive measures to ensure long term environmental compliance with environmental laws and regulations; the manager can ensure that the necessary systems are established or actions taken to gather complete and accurate information for permit application requirements; and where authority to sign documents has been assigned or delegated to the manager in accordance with corporate procedures.

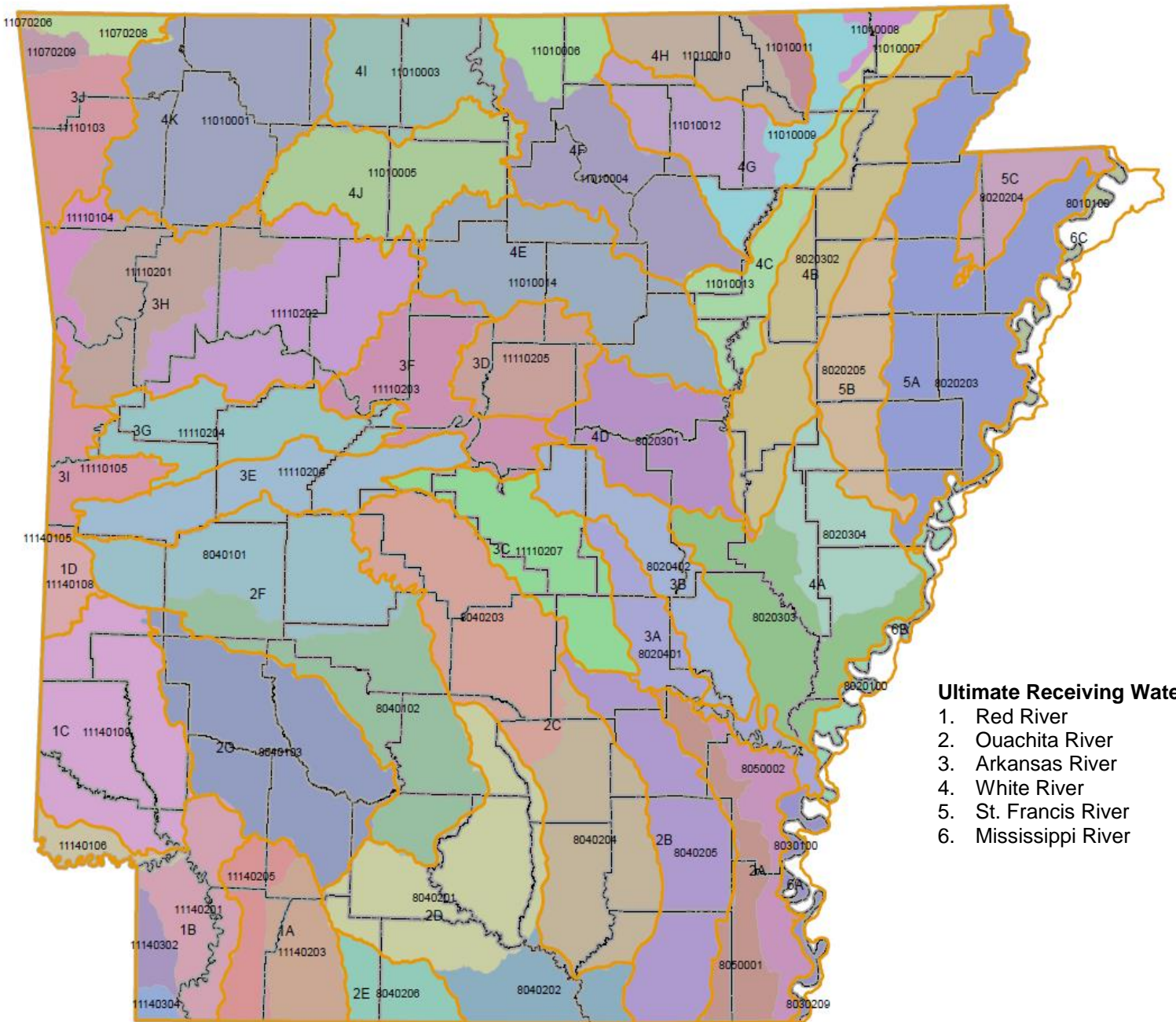
For a **partnership** or **sole proprietorship**: by a general partner or the proprietor, respectively.

For a **municipality, State, Federal, or other public agency**: by either a principal executive or ranking elected official. For purposes of this section, a principal executive officer of a Federal agency includes:

- 1) The chief executive officer of the agency; or
- 2) A senior executive officer having responsibility for the overall operations of a principal geographic unit of the agency.

ADEQ

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Ultimate Receiving Waters

1. Red River
2. Ouachita River
3. Arkansas River
4. White River
5. St. Francis River
6. Mississippi River

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**ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY
NOTICE OF INTENT
LANDFILL SANITARY DISCHARGE
NPDES GENERAL PERMIT ARG160000**

Application Type: New Renewal (Permit # ARG16_____)

I. PERMITTEE/OPERATOR INFORMATION

Permittee (Legal Name): _____ Operator Type: _____
Permittee Mailing Address: _____ State Partnership
Permittee City: _____ Federal Corporation*
Permittee State: _____ Zip: _____ Sole Proprietorship/Private
Permittee Telephone Number: _____ *State of Incorporation: _____
Permittee Fax Number: _____ The legal name of the Permittee must be
Permittee E-mail Address: _____ identical to the name listed with the Arkansas
Secretary of State.

II. INVOICE MAILING INFORMATION

Invoice Contact Person: _____ City: _____
Invoice Mailing Company: _____ State: _____ Zip: _____
Invoice Mailing Address: _____ Telephone: _____

III. FACILITY INFORMATION

Facility Name: _____ Facility Contact Person: _____
Facility Address: _____ Telephone Number: _____
Driving Directions to Facility: _____
Facility County: _____ Facility City, State & Zip: _____
Facility Latitude: _____ Deg Min Sec Facility Longitude: _____ Deg Min Sec
Facility SIC Code: _____ Facility NAICS: _____

IV. DISCHARGE INFORMATION

Outfall Number: 001 Estimated Flow: _____ MGD (Million Gallons per Day)
Outfall Description: _____
Stream Segment: _____ Hydrologic Basin Code: _____
Outfall Latitude: _____ Deg Min Sec Outfall Longitude: _____ Deg Min Sec
Receiving Stream: _____
Outfall Number: _____ Estimated Flow: _____ MGD (Million Gallons per Day)
Outfall Description: _____
Stream Segment: _____ Hydrologic Basin Code: _____
Outfall Latitude: _____ Deg Min Sec Outfall Longitude: _____ Deg Min Sec
Receiving Stream: _____

V. CONSTRUCTION REQUIREMENTS

	Yes	No
Is this permit covering the construction of a sedimentation pond?	<input type="checkbox"/>	<input type="checkbox"/>
If yes, have you included Arkansas Form 1 and design, plans and specifications (including the requirements in Part 1.3.2 of the permit) stamped by a Professional Engineer registered in the State of Arkansas?	<input type="checkbox"/>	<input type="checkbox"/>
Is this facility within the area of the Boone or St. Joe formations? Map available at : http://www.adeg.state.ar.us/water/branch_permits/general_permits/default.htm	<input type="checkbox"/>	<input type="checkbox"/>

VI. FACILITY PERMIT INFORMATION

NPDES Individual Permit Number (If Applicable): AR00

NPDES General Permit Number (If Applicable): ARG

State Construction Permit Number: _____

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

NPDES Industrial Stormwater General Permit Number: ARR00

Other Department Permits: _____

VII. OTHER INFORMATION:

Additional Location Description _____

Additional Comments: _____

Consultant Contact Name: _____

Consultant Email Address: _____

Consultant Address: _____ City: _____ State: _____ Zip: _____

Consultant Phone Number: _____ Consultant Fax Number: _____

VIII. CERTIFICATION OF OPERATOR

"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."

Responsible Official Printed Name: _____ Title: _____

Responsible Official Signature: _____ Date: _____

Responsible Official Email: _____

Cognizant Official Printed Name: _____ Title: _____

Cognizant Official Signature: _____ Telephone: _____

Cognizant Official Email: _____

IX. PERMIT REQUIREMENT VERIFICATION

Please check the following to verify completion of permit requirements. If you answer "NO" to any of questions below the application will be considered incomplete and cause a delay in the permitting process.

	Yes	No	
Submittal of Complete NOI?	<input type="checkbox"/>	<input type="checkbox"/>	
Submittal of Required Permit Fee?	<input type="checkbox"/>	<input type="checkbox"/>	New Permittees Only Check Number: _____
Submittal of Topographic Map?	<input type="checkbox"/>	<input type="checkbox"/>	
Submittal of Disclosure Statement?	<input type="checkbox"/>	<input type="checkbox"/>	
Industrial Operator's License Number:	_____		