**Industrial Stormwater General Permit Stormwater Pollution Prevention Plan (SWPPP) Template**

To help you develop a SWPPP that is consistent with the Industrial Stormwater General Permit (IGP), the Arkansas Department of Energy and Environment- Division of Environmental Quality (DEQ) has created this Industrial SWPPP Template. Use of the template will help ensure that your SWPPP addresses all the necessary elements required in the IGP.

Before completing the template, make sure you read and understand the requirements in the Industrial Stormwater General Permit (IGP). A copy of the IGP is available at the following web address:

<https://www.adeq.state.ar.us/water/permits/npdes/stormwater/pdfs/industrial/arr000000_2024-renewal-final_20231213.pdf>

**Using the Industrial SWPPP Template**

Tips for completing the template:

* **This Template is designed for use by all facilities eligible for coverage under the IGP. The Template is NOT tailored to your individual industrial sector.**
* **Read through every section thoroughly. For questions that do not apply to your facility, put N/A in the space allocated for explanation.**

DEQ has made every effort to ensure the accuracy of all instructions and guidance contained in the template, the actual obligations of regulated industrial facilities are determined by the relevant provisions of the permit, not by the template. In the event of a conflict between the template and any corresponding provision of the IGP, the permit controls. DEQ welcomes comments on the template at any time and will consider those comments in any future revision of this document.

**Stormwater Pollution Prevention Plan (SWPPP)**

For

Industrial Activity

National Pollution Discharge Elimination System

General Permit # ARR000000

Permit Tracking Number:

ARR00

Prepared for:

Insert Facility Name

Insert Facility Address

Insert City, State, Zip Code

Insert Facility Telephone Number (if applicable)

Industrial Sector -

SIC -

NAICS -

Prepared by:

SWPPP Preparation Date:

1. **SWPPP Team (see Part 4.2.2 of the permit)**

List the person(s) or position(s) responsible for developing the SWPPP and assisting the facility or plant manager in its implementation, maintenance, and revision. Clearly identify the responsibilities of each team member.

Please note that common positions (i.e. secretary, operator, etc.) may not be used. A specific position or individual’s name must be listed.

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| --- | --- | --- |
| **Name** | **Title** | **Individual SWPPP Responsibilities** |
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1. **Employee Training (see Part 2.1.8 of the permit)**

A record of employee training will be kept in Appendix A. Below are the two types of employee training required for a facility:

* Storm Water Pollution Prevention Team training, and
* Facility worker training specific to the area they work.

In the table below, designate the frequency of training for each training type (at least annually).

|  |  |  |
| --- | --- | --- |
| **Training Type** | **Frequency of Training** | **Topics Covered in Training** |
| SWPP Team training |  | Monitoring, inspection, planning, reporting, documentation requirements, and BMP maintenance |
| Work area specific training |  | BMPs and control measures used in specific work area |

1. **Facility Description**

For this section, describe everything pertaining to the stormwater drainage area covered by each outfall at your facility.

1. **Outfall Information**

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| --- | --- | --- |
| **Outfall Number:** | | **Outfall Coordinates:**  Latitude:      °      ’      ” **or**       decimal **N**  Longitude:      °      ’      ” **or**       decimal **W** |
| **Receiving Streams** |  | |
| **Outfall Number:** | | **Outfall Coordinates:**  Latitude:      °      ’      ” **or**       decimal **N**  Longitude:      °      ’      ” **or**       decimal **W** |
| **Receiving Streams** |  | |

Copy and paste the table above for each additional outfall at your facility.

If your facility discharges to a Municipal Separate Storm Sewer System (MS4), provide the MS4 name below:

|  |  |
| --- | --- |
| MS4 name: |  |

(put N/A if your facility is not located in an MS4)

1. **Industrial Activities**

In the table below, describe the industrial activities that take place at the facility, list the pollutants associated with each activity, and list the outfalls affected by the activity. This list must include all significant materials that have been handled, treated, stored, or disposed, and that have been exposed to stormwater in the three years prior to the date the SWPPP is prepared or amended.

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| --- | --- | --- |
| **Industrial Activity** | **Associated Pollutants** | **Outfall(s) Affected** |
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1. **Exposed Inventories**

In the table below, describe any tanks, bins, or piles within the outfall coverage area, list the pollutants associated with each storage entity, and list the outfalls affected by the activity. Include any inventory containing salt for deicing and any tank or storage container susceptible to spilling or leaking.

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| --- | --- | --- |
| **Inventory** | **Associated Pollutants** | **Outfall(s) Affected** |
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1. **Non-Stormwater Discharges (see Part 4.2.4.4 of the permit)**

In the table below, describe any authorized non-stormwater discharges, the pollutants associated with that discharge, and the outfalls affected by the discharge. See Part 1.6 of the permit for a list of authorized non-stormwater discharges.

**Only list non-stormwater discharges that actually occur at the facility.**

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| --- | --- | --- |
| **Non-Stormwater Discharge** | **Associated Pollutants** | **Outfall(s) Affected** |
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Part 4.2.4.4 of the permit requires identification and elimination of all illicit discharges. This section also requires that the SWPPP contain a certification that the discharge has been tested or evaluated for the presence of non-stormwater discharges and all identified unauthorized discharges have been eliminated.

Potential significant sources of non-stormwater discharges:

Description of the results of any test or evaluation for the presence of non-stormwater discharges:

Evaluation criteria and testing method used:

Date(s) of testing or evaluation:

On-site drainage points that were directly observed during a test:

If evaluation is not possible, describe why:

“I certify that the discharge has been tested or evaluated for the presence of illicit non‑stormwater discharges and that all identified unauthorized discharges have been eliminated”

“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.”

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| Responsible Official Name |  | Responsible Official Title |
|  |  |  |
| Responsible Official Signature |  | Date |

1. **Impaired Streams, TMDLs, and Outstanding Resource Waters (see Part 4.2.7 of the permit)**

In the table below, list any streams or other waterbodies downstream of the facility’s discharge that are impaired and list their impairments. Consult the documents at the links below to determine if any of your receiving streams are impaired.

The current 303(d) list may be accessed on the following web page:

<https://www.adeq.state.ar.us/water/planning/integrated/303d/>

Total Maximum Daily Load (TMDL) reports may be accessed on the following web page:

<https://www.adeq.state.ar.us/water/planning/integrated/tmdl/>

Extraordinary Resource Waters (ERWs), Natural and Scenic Waterways (NSWs), or Ecologically Sensitive Waterbodies (ESWs) are identified in APC&EC Regulation 2, which may be accessed on the following web page:

<https://www.adeq.state.ar.us/regs/>

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| --- | --- |
| **Impaired Waterbody name** | **Cause of Impairment** |
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1. **Monitoring Requirements**

In the table below, list any parameters being monitored at the outfall. Include any benchmarks or limitations required and the frequency of sampling for each parameter (at least once per year). The sampling data, including any from three years prior to the effective date of this permit, will be kept in Appendix B.

Please be aware that, per Part 5.4 of the permit, certain dischargers are only eligible for coverage under the permit if additional monitoring requirements are implemented. This includes dischargers subject to an Effluent Limitations Guideline, dischargers which are discharging into a waterbody that is on the most recently approved 303(d) list or has a TMDL, and dischargers which are discharging into an ERW, ESW, or NSW, and dischargers which are contributing to a violation of a Water Quality Standard.

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| --- | --- | --- | --- |
| **Parameter** | **Check Box if a Limitation** | **Benchmark or Limitation** | **Frequency of Monitoring** |
| pH |  | 6.0-9.0 S.U. |  |
| Total Suspended Solids (TSS) |  | 100 mg/L |  |
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Describe the procedures for gathering storm event data, as specified in Part 3.2.

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| Responsible Staff: |

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| --- |
| Logistics: |

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| --- |
| Laboratory to be used: |

1. **Best Management Practices (BMPs)**

In the table below, list the best management practices implemented and the back-up measures used if the BMP is being worked on. For industry-specific expected pollutants and recommended BMPs, please see the EPA’s website at:

<https://www.epa.gov/npdes/stormwater-discharges-industrial-activities>

Records of BMP maintenance and inspection will be kept in Appendix C.

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| **BMP 1: Minimize Exposure** |
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| **Back-up Measures** |
| **BMP 2: Good Housekeeping** |
| Waste material will be picked up every       days. |
| Routine leak inspections (drums, tanks, etc.) will be conducted every       days. |
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| **Back-up Measures** |
| **BMP 3: Preventative Maintenance** |
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| **Back-up Measures** |
| **BMP 4: Spill Prevention and Response** |
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| **Back-up Measures** |
| **BMP 5: Erosion and Sediment Controls** |
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| **Back-up Measures** |
| **BMP 6: Management of Run-on and Run-off** |
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| **Back-up Measures** |

1. **Facility Site Map (see Part 4.2.3 of the permit)**

Include a site map in Appendix F that adheres to the requirements set forth in Part 4.2.3 of the permit. You will find the same list of requirements in Appendix F.

1. **Inspection Schedule and Procedure**

In the table below, list the person(s) or position(s) responsible for inspecting, the schedule for conducting inspections, and the specific items (BMPs, outfalls, storage units, etc.) to be covered by the routine facility inspections (see Part 3.1 of the permit).

Inspection records will be kept in Appendix D.

|  |  |  |  |
| --- | --- | --- | --- |
| **Inspection Type** | **Person(s)/Position(s) Responsible** | **Inspection Frequency** | **Items Inspected** |
| Routine facility |  |  |  |

1. **Similar Outfall Designation (see Part 3.2.2 of the permit)**

Based on the information provided for each of the outfalls at the facility, list in the table below any outfalls considered to be similar, the reason why their discharges are expected to be similar, and the outfall at which monitoring will take place.

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| --- | --- | --- |
| **Similar Outfalls** | **Reasons for Similar Discharges** | **Outfall to be Monitored** |
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1. **Spill and Leak Response Plan (see Part 2.1.4 of the permit)**

Describe the procedures for preventing and responding to spills and leaks in Appendix E. List below the person(s), or position(s), responsible for contacting help during a spill or leak emergency, as well as the Agency to contact, and the Agency phone number. The agencies listed should include a “first responder”. A record of any spills and leaks, including any within three years of the effective date of this permit, will be kept in Appendix E.

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| --- | --- | --- |
| **Person(s)/Position(s) Responsible for Contacting Emergency Response Agency** | **Agency Name** | **Agency Phone Number** |
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1. **Certification / Attainment of Water Quality Standards**

The certification must be signed by the Responsible Official, in accordance with the provisions of 40 CFR 122.22, as adopted by reference in APCEC Regulation 6. **See Part 7.9 of the permit for signatory requirements.**

“I have read Part 5.5of the permit pertaining to the attainment of water quality standards after authorization and agree to adhere to its requirements.”

“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 gathered and evaluated 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.”

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| Responsible Official Name |  | Responsible Official Title |
|  |  |  |
| Responsible Official Signature |  | Date |

APPENDIX A

**Employee Training Schedule:**

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| **Person(s) or Position(s) Trained** | **Date of Training** | **Description of Training** |
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APPENDIX B

**Sampling Data:**

Include all Stormwater Annual Reports (SWAR) as attachments to this appendix. The SWAR must be attached no later than the 31st day of January of the year following the sampling (i.e., January 31st 2025 for year 2024) and must be provided within five business days of a request by the Department.

A copy of the SWAR can be found at the following web address:

<https://www.adeq.state.ar.us/water/permits/npdes/stormwater/>

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| --- | --- | --- | --- |
| **Date of Sample** | **Rainfall (inches)** | **Outfall(s) Sampled** | **Date of Last Storm Event** |
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APPENDIX C

**BMP Maintenance Records:**

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| **BMP** | **Date Issue Found** | **Date of Maintenance** | **Description of Maintenance** |
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APPENDIX D

**Inspection Records:**

Keep the completed inspection forms as an attachment to this appendix.

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| --- | --- | --- | --- |
| **Type of Inspection** | **Date of Inspection** | **Outfalls Inspected** | **Significant Findings** |
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APPENDIX E

**Spill Prevention and Response Procedures** **(See Part 3.1.4)**:

Include the procedures for preventing and responding to spills and leaks. The procedures may reference the existence of other plans for Spill Prevention Control and Countermeasure (SPCC) developed for the facility under Section 311 of the CWA or BMP programs otherwise required by an NPDES permit for the facility, provided that a copy of that other plan is kept onsite and made available for review consistent with Part 5.3.

**ATTACH THE PROCEDURE TO THIS APPENDIX**

**Spills and Leaks Records:**

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| --- | --- | --- |
| **Description of Spill or Leak** | **Date Spill or Leak Occurred** | **Outfall(s) Affected by Spill or Leak** |
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APPENDIX F

**Site Map:**

Attach a copy of the site map in this appendix. The site map must address the following at minimum:

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| --- | --- | --- |
| Yes | N/A |  |
|  |  | 1. the size of the property in acres; |
|  |  | 1. the location and extent of significant structures and impervious surfaces; |
|  |  | 1. directions of stormwater flows (use arrows); |
|  |  | 1. locations of all existing structural control measures; |
|  |  | 1. locations of all receiving waters in the immediate vicinity of the facility, |
|  |  | 1. locations of all stormwater conveyances including ditches, pipes, and swales; |
|  |  | 1. locations of potential pollutant sources; |
|  |  | 1. locations of all stormwater monitoring points; |
|  |  | 1. locations of stormwater inlets and outfalls, with a unique identification code for each outfall, indicating if one or more outfalls is being treated as “substantially identical”, and an approximate outline of the areas draining to each outfall; |
|  |  | 1. municipal separate storm sewer systems (MS4), where the stormwater discharges to them (if applicable); |
|  |  | 1. locations and descriptions of all non-stormwater discharges identified; |
|  |  | 1. locations of the following activities where such activities are exposed to precipitation: |
|  |  | * 1. fueling stations; |
|  |  | * 1. vehicle and equipment maintenance or cleaning areas; |
|  |  | * 1. loading/unloading areas; |
|  |  | * 1. locations used for the treatment, storage, or disposal of wastes; |
|  |  | * 1. liquid storage tanks; |
|  |  | * 1. processing and storage areas; |
|  |  | * 1. immediate access roads and rail lines used or traveled by carriers of raw materials, manufactured products, waste material, or by-products used or created by the facility; |
|  |  | * 1. transfer areas for substances in bulk; |
|  |  | * 1. machinery; and |
|  |  | * 1. salt storage piles; |
|  |  | 1. locations and sources of run-on to the site from adjacent property that contains significant quantities of pollutants. |