NOTICE OF INTENT

National Pollutant Discharge Elimination System application for coverage under General Permit NCG080000:

STORMWATER DISCHARGES from Vehicle Maintenance Areas (including vehicle rehabilitation, mechanical repairs, painting, fueling, lubrication, and equipment cleaning operations areas) associated with activities classified as:

- SIC 40 (Standard Industrial Classification)  Railroad Transportation
- SIC 41  Local and Suburban Transit and Interurban Highway Passenger Transportation
- SIC 42  Motor Freight Transportation and Warehousing (except SIC 4221-4225)
- SIC 43  United States Postal Service

The following activities are also included:

- Other industrial activities where the vehicle maintenance area(s) is the only area requiring permitting
- Petroleum Bulk Stations and Terminals (SIC 5171) with total petroleum site storage capacity of less than 1 million gallons
- Stormwater discharges from oil water separators and/or from secondary containment structures associated with petroleum storage facilities with less than 1 million gallons of total petroleum site storage capacity.
- Discharges associated with vehicle maintenance operations at activities, which are otherwise designated on a case-by-case basis for permitting.

For questions, please contact the DEMLR Regional Office for your area. See page 4.

(Please print or type)

1) Mailing address of owner/operator (address to which all correspondence will be mailed):

   Name ____________________________________________
   Street Address __________________________________
   City __________________________ State ______ ZIP Code ______
   Telephone No. __________________ Fax: ________________

2) Location of facility producing discharge:

   Facility Name ______________________________________
   Facility Contact _____________________________________
   Street Address ______________________________________
   City __________________________ State ______ ZIP Code ______
   County ____________________________________________
   Telephone No. __________________ Fax: ________________
   Email _____________________________________________
3) Physical Location Information:
   Please provide a narrative description of how to get to the facility (use street names, state road numbers, and
distance and direction from a roadway intersection).

(A copy of a county map or USGS quad sheet with facility clearly located must be submitted with this application)

4) Latitude ___________________ Longitude ___________________ (deg, min, sec)

5) This NPDES Permit Application applies to which of the following:
   [ ] New or Proposed Facility  Date operation is to begin ________________
   [ ] Existing

6) Standard Industrial Classification:
   Provide the 4-digit Standard Industrial Classification Code (SIC Code) that describes the primary industrial
activity at this facility
   SIC Code: ___  ___  ___  ___

7) Provide a brief narrative description of the types of industrial activities and products manufactured at
   facility:

8) Discharge points / Receiving waters:
   How many discharge points (ditches, pipes, channels, etc.) convey stormwater from the property? __________
   What is the name of the body or bodies of water (creek, stream, river, lake, etc.) that the facility stormwater
discharges end up in?
   Receiving water classification: ____________________________
   Is this a 303(d) listed stream? __________ Has a TMDL been approved for this watershed? __________
   If the site stormwater discharges to a separate storm sewer system, name the operator of the separate storm
   sewer system (e.g. City of Raleigh municipal storm sewer).

9) Does this facility have any other NPDES permits?
   [ ] No
   [ ] Yes
   If yes, list the permit numbers for all current NPDES permits for this facility: ____________________________

10) Does this facility have any Non-Discharge permits (ex: recycle permit)?
    [ ] No
    [ ] Yes
    If yes, list the permit numbers for all current Non-Discharge permits for this facility: ____________________________

11) Does this facility employ any best management practices for stormwater control?
    [ ] No
    [ ] Yes  (Show any structural BMPs on the site diagram.)
    If yes, please briefly describe: ________________________________________________________________

12) Does this facility have a Stormwater Pollution Prevention Plan?
    [ ] No
    [ ] Yes
    If yes, when was it implemented? ________________________________________________________________
13) Are vehicle maintenance activities occurring at this facility?
   □ No  □ Yes

14) Hazardous Waste:
   a) Is this facility a Hazardous Waste Treatment, Storage, or Disposal Facility?
      □ No  □ Yes
   b) Is this facility a Small Quantity Generator (less than 1000 kg. of hazardous waste generated per month) of
      hazardous waste?
      □ No  □ Yes
   c) Is this facility a Large Quantity Generator (1000 kg. or more of hazardous waste generated per month) of
      hazardous waste?
      □ No  □ Yes
   d) Is hazardous waste stored in the 100-year flood plain?
      □ No  □ Yes  If yes, include information to demonstrate protection from flooding.
   e) If you answered yes to questions b. or c., please provide the following information:
      Type(s) of waste: __________________________________________________________
      How is material stored: ____________________________________________________
      Where is material stored: __________________________________________________
      How many disposal shipments per year: ______________________________________
      Name of transport / disposal vendor: _________________________________________
      Vendor address: __________________________________________________________

15) Certification:

   North Carolina General Statute 143-215.6B (i) provides that:

   Any person who knowingly makes any false statement, representation, or certification in any application, record, report,
   plan, or other document filed or required to be maintained under this Article or a rule implementing this Article; or who
   knowingly makes a false statement of a material fact in a rulemaking proceeding or contested case under this Article; or
   who falsifies, tampers with, or knowingly renders inaccurate any recording or monitoring device or method required to be
   operated or maintained under this Article or rules of the Commission implementing this Article shall be guilty of a Class
   2 misdemeanor which may include a fine not to exceed ten thousand dollars ($10,000).

   I hereby request coverage under the referenced General Permit. I understand that coverage under this permit
   will constitute the permit requirements for the discharge(s) and is enforceable in the same manner as an
   individual permit.

   I certify that I am familiar with the information contained in this application and that to the best of my
   knowledge and belief such information is true, complete, and accurate.

   Printed Name of Person Signing: ________________________________________________
   Title: _______________________________________________________________________
   ____________________________________________________                  (Date Signed)

Notice of Intent must be accompanied by a check or money order for $100.00 made payable to:

NCDENR
Final Checklist

This application will be returned as incomplete unless all of the following items have been included:

☐ Check for $100 made payable to NCDENR
☐ This completed application and all supporting documents
☐ A site diagram showing, at a minimum, (existing or proposed):
  (a) outline of drainage areas, (b) stormwater management structures, (c) location of stormwater outfalls corresponding to the drainage areas, (d) runoff conveyance features, (e) areas where materials are stored, (f) impervious areas, (g) site property lines.
☐ Copy of county map or USGS quad sheet with location of facility clearly marked on map

Mail the entire package to:

Stormwater Permitting Unit Program
Division of Energy, Mineral and Land Resources
1612 Mail Service Center
Raleigh, North Carolina 27699-1612

Note
The submission of this document does not guarantee coverage under the NPDES General Permit.

For questions, please contact the DEMLR Regional Office for your area.

DEMLR Regional Office Contact Information:

Asheville Office …… (828) 296-4500
Fayetteville Office … (910) 433-3300
Mooresville Office … (704) 663-1699
Raleigh Office ……… (919) 791-4200
Washington Office …(252) 946-6481
Wilmington Office … (910) 796-7215
Winston-Salem …… (336) 771-5000
Central Office ……..(919) 807-6300