NO DISCHARGE CERTIFICATION FORM

for Exclusion from the Industrial Storm Water Permit (1-23)

STATE OF UTAH, DEPARTMENT OF ENVIRONMENTAL QUALITY, DIVISION OF WATER QUALITY

195 North 1950 West, P.O. BOX 144870, SALT LAKE CITY, UTAH 84114-4870

Industrial facilities required to comply with the Utah Pollutant Discharge Elimination System (UPDES) requirements include mines (including gravel pits), cement plants, wood mills, airports, scrap yards, trucking yards, bulk fueling stations, and other manufacturing facilities. Coverage is required for facilities that operate under qualifying Standard Industrial Classification (SIC) Codes found in Appendix I of the Multi-Sector General Permit on the Division of Water Quality's website at http:// waterquality.utah.gov.

An industrial facility with a SIC code that requires coverage but does not discharge storm water to waters of the state may formally opt for an exclusion. By definition, a discharge to waters of the state includes discharges to surface water or groundwater (UAC R317-8-1.5(59)). A no discharge exclusion is obtained by completing and submitting this form with appropriate supporting documentation to demonstrate that no storm water can discharge from the site via surface runoff or sub-surface infiltration. This exclusion is available on a facility-wide basis only and is not applicable to individual outfalls.

A no discharge exclusion cannot be obtained if the facility discharges storm water, even if storm water is not exposed to industrial materials or activities. In this situation a No Exposure Certification form may be appropriate.

The form is non-transferable. If a new operator takes over the facility, the new operator must complete and submit a new form to claim no discharge.

A. Owner Information

1. Name: |_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|

2. a. Street Address: |_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|

b. City: |_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_| c. County: |_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|

d. State: |_|_| e. Zip Code: |_|_|_|_|_|_|_|_|_|_|

Owner Point of Contact

3. Name: |_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|

4. Title: |_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|

5. Phone: |_|_|_|_|_|_|_|_|_|_|

6. Email: |_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|

B. Operator Information

1. Name: |_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|

2. a. Street Address: |_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|

b. City: |_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_| c. County: |_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|

d. State: |_|_| e. Zip Code: |_|_|_|_|_|_|_|_|_|_|

Operator Point of Contact

3. Name: |__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|

4. Title: |__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|

5. Phone: |__|__|__|__|__|__|__|__|__|__|

6. Email: |__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|

C. Facility/Site Location Information

1. Facility Name: |__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|

2. a. Street Address: |__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|

b. City: |__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__| c. County: |__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|

d. State: |__|__| e. Zip Code: |__|__|__|__|__|__|__|__|__|__|

3. Is the facility located on Indian Lands? Yes ☐ No ☐

4. a. Latitude: |__|__| ° |__|__|' |__|__|" b. Longitude: |__|__|__| ° |__|__|' |__|__|"

5. a. Was the facility or site previously covered under a UPDES storm water permit? Yes ☐ No ☐

b. If yes, enter UPDES Permit number: ______________________________

6. a. SIC/Activity Codes: Primary: |__|__|__|__| Secondary (if applicable): |__|__|__|__|

D. Basis for Seeking No Discharge Exclusion

Provide a detailed description of your facility and operations including the best management practices (BMPs) and/or control measures used to ensure that storm water does not discharge from your facility. Examples include using lined / impervious evaporation basins to prevent storm water discharge via surface runoff or infiltration and re-use of storm water and discharge to a separately permitted outfall. Include a map of the facility which shows storm water flow directions, BMP locations, and location of wells. Also include proper citations and documentation for statements made include well logs, a description of the underlying water quality, and if there are any drinking water wells in the area. Note that infiltration of storm water to groundwater is considered a discharge.

E. No Discharge Certification

I certify under penalty of law that the information submitted is, to the best of my knowledge and belief, true, accurate, and complete based on my inquiry of the person(s) who manage the system, or those persons directly responsible for gathering the information. I am aware that there are significant penalties for submitting false information, including the possibility of fine or imprisonment for knowing violations.

I understand that if conditions change and the facility no longer operates without discharging storm water, that I must obtain coverage under a UPDES permit prior to any point source discharge of storm water from the facility.

Name:______________________________ **Title:**______________________________

Signature: ____ **Date:** ______________