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DIRECTOR



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GOVERNOR

Alabama Department of Environmental Management
adem.alabama.gov

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Montgomery, Alabama 36130-1463
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NOVEMBER 9, 2020

LTC ROBERT J. GRIGGS, TRAINING CENTER DIRECTOR
ALABAMA ARMY NATIONAL GUARD-PELHAM RANGE
PO BOX 5280 BUILDING 1060
FT. MCCLELLAN, AL 36205

RE: DRAFT PERMIT
NPDES PERMIT NUMBER AL0083941

Dear Lieutenant Colonel Griggs:

Transmitted herein is a draft of the referenced permit.

We would appreciate your comments on the permit within **30 days** of the date of this letter. Please direct any comments of a technical or administrative nature to the undersigned.

By copy of this letter and the draft permit, we are also requesting comments within the same time frame from EPA.

Our records indicate that you are currently utilizing the Department's web-based electronic environmental (E2) reporting system for submittal of discharge monitoring reports (DMRs). Your E2 DMRs will automatically update on the effective date of this permit, if issued.

The Alabama Department of Environmental Management encourages you to voluntarily consider pollution prevention practices and alternatives at your facility. Pollution Prevention may assist you in complying with effluent limitations, and possibly reduce or eliminate monitoring requirements.

If you have questions regarding this permit or monitoring requirements, please contact Rachel Lounsberry by e-mail at restanaland@adem.alabama.gov or by phone at **(334) 279-3065**.

Sincerely,

Scott Ramsey, Chief
Industrial Section
Industrial/Municipal Branch
Water Division

Enclosure: Draft Permit

pc via website:

Montgomery Field Office
EPA Region IV
U.S. Fish & Wildlife Service
AL Historical Commission
Advisory Council on Historic Preservation
Department of Conservation and Natural Resources

Birmingham Branch
110 Vulcan Road
Birmingham, AL 35209-4702
(205) 942-6168
(205) 941-1603 (FAX)

Decatur Branch
2715 Sandlin Road, S.W.
Decatur, AL 35603-1333
(256) 353-1713
(256) 340-9359 (FAX)



Mobile Branch
2204 Perimeter Road
Mobile, AL 36615-1131
(251) 450-3400
(251) 479-2593 (FAX)

Mobile-Coastal
3664 Dauphin Street, Suite B
Mobile, AL 36608
(251) 304-1176
(251) 304-1189 (FAX)



NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM PERMIT

PERMITTEE: ALABAMA ARMY NATIONAL GUARD

FACILITY: PELHAM RANGE
GATE 3 ROAD
ALEXANDRIA, AL 36250

PERMIT NUMBER: AL0083941

RECEIVING WATERS: 001: CANE CREEK
002-010: UNNAMED TRIBUTARY TO CANE CREEK

In accordance with and subject to the provisions of the Federal Water Pollution Control Act, as amended, 33 U.S.C. §§1251-1388 (the "FWPCA"), the Alabama Water Pollution Control Act, as amended, Code of Alabama 1975, §§ 22-22-1 to 22-22-14 (the "AWPCA"), the Alabama Environmental Management Act, as amended, Code of Alabama 1975, §§22-22A-1 to 22-22A-17, and rules and regulations adopted thereunder, and subject further to the terms and conditions set forth in this permit, the Permittee is hereby authorized to discharge into the above-named receiving waters.

ISSUANCE DATE:

EFFECTIVE DATE:

EXPIRATION DATE:

Draft

Alabama Department of Environmental Management

INDUSTRIAL SECTION
NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) PERMIT

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PART I DISCHARGE LIMITATIONS, CONDITIONS, AND REQUIREMENTS**A. DISCHARGE LIMITATIONS AND MONITORING REQUIREMENTS**

During the period beginning on the effective date of this permit and lasting through the expiration date of this permit, the permittee is authorized to discharge from the following point source(s) outfall(s), described more fully in the permittee's application:

DSN001Q:Storm water and wash water from equipment maintenance and washing from UTES #1 3/

Such discharge shall be limited and monitored by the permittee as specified below:

<u>EFFLUENT CHARACTERISTIC</u>	<u>DISCHARGE LIMITATIONS</u>			<u>MONITORING REQUIREMENTS 1/</u>				
	<u>Monthly Average</u>	<u>Daily Maximum</u>	<u>Daily Minimum</u>	<u>Monthly Average</u>	<u>Daily Maximum</u>	<u>Measurement Frequency 2/</u>	<u>Sample Type</u>	<u>Seasonal</u>
pH	-	-	6.0 S.U.	-	8.5 S.U.	Quarterly	Grab	-
Solids, Total Suspended	-	-	-	-	REPORT mg/l	Quarterly	Grab	-
Oil & Grease	-	-	-	-	15 mg/l	Quarterly	Grab	-
Phosphorus, Total (As P)	-	-	-	-	REPORT mg/l	Quarterly	Grab	-
Toluene	-	-	-	-	8723 ug/l	Quarterly	Grab	-
Benzene	-	-	-	-	15.4 ug/l	Quarterly	Grab	-
Naphthalene	-	-	-	-	620 ug/l	Quarterly	Grab	-
Flow, In Conduit or Thru Treatment Plant	REPORT MGD	REPORT MGD	-	-	-	Quarterly	Instantaneous	-

THE DISCHARGE SHALL HAVE NO SHEEN, AND THERE SHALL BE NO DISCHARGE OF VISIBLE OIL, FLOATING SOLIDS OR VISIBLE FOAM IN OTHER THAN TRACE AMOUNTS.

- 1/ Samples collected to comply with the monitoring requirements specified above shall be collected at the following location: At the nearest accessible location just prior to discharge and after final treatment. Unless otherwise specified, composite samples shall be time composite samples collected using automatic sampling equipment or a minimum of eight (8) equal volume grab samples collected over equal time intervals. All composite samples shall be collected for the total period of discharge not to exceed 24 hours.
- 2/ If only one sampling event occurs during a month, the sample result shall be reported on the discharge monitoring report as both the monthly average and daily maximum value for all parameters with a monthly average limitation.
- 3/ See Part IV.A for Best Management Practices (BMP) Plan Requirements.
- 4/ See Part IV.B for Stormwater Measurement and Sampling Requirements.

During the period beginning on the effective date of this permit and lasting through the expiration date of this permit, the permittee is authorized to discharge from the following point source(s) outfall(s), described more fully in the permittee's application:

DSN001Q (continued):Storm water and wash water from equipment maintenance and washing from UTES #1 3/

Such discharge shall be limited and monitored by the permittee as specified below:

<u>EFFLUENT CHARACTERISTIC</u>	<u>DISCHARGE LIMITATIONS</u>				<u>MONITORING REQUIREMENTS 1/</u>			
	<u>Monthly Average</u>	<u>Daily Maximum</u>	<u>Daily Minimum</u>	<u>Monthly Average</u>	<u>Daily Maximum</u>	<u>Measurement Frequency 2/</u>	<u>Sample Type</u>	<u>Seasonal</u>
Chlorine, Total Residual 5/	-	-	-	0.011 mg/l	0.019 mg/l	Quarterly	Grab	-
Xylene	-	-	-	-	REPORT mg/l	Quarterly	Grab	-

THE DISCHARGE SHALL HAVE NO SHEEN, AND THERE SHALL BE NO DISCHARGE OF VISIBLE OIL, FLOATING SOLIDS OR VISIBLE FOAM IN OTHER THAN TRACE AMOUNTS.

- 1/ Samples collected to comply with the monitoring requirements specified above shall be collected at the following location: At the nearest accessible location just prior to discharge and after final treatment. Unless otherwise specified, composite samples shall be time composite samples collected using automatic sampling equipment or a minimum of eight (8) equal volume grab samples collected over equal time intervals. All composite samples shall be collected for the total period of discharge not to exceed 24 hours.
- 2/ If only one sampling event occurs during a month, the sample result shall be reported on the discharge monitoring report as both the monthly average and daily maximum value for all parameters with a monthly average limitation.
- 3/ See Part IV.A for Best Management Practices (BMP) Plan Requirements.
- 4/ See Part IV.B for Stormwater Measurement and Sampling Requirements.
- 5/ A measurement of Total Residual Chlorine below 0.05 mg/L will be considered in compliance with the permit limitations above and should be reported as NODI=B or *B on the discharge monitoring reports.

During the period beginning on the effective date of this permit and lasting through the expiration date of this permit, the permittee is authorized to discharge from the following point source(s) outfall(s), described more fully in the permittee's application:

DSN002Q:Storm water and wash water from equipment maintenance and washing from UTES #1 3/

Such discharge shall be limited and monitored by the permittee as specified below:

<u>EFLUENT CHARACTERISTIC</u>	<u>DISCHARGE LIMITATIONS</u>			<u>MONITORING REQUIREMENTS 1/</u>				
	<u>Monthly Average</u>	<u>Daily Maximum</u>	<u>Daily Minimum</u>	<u>Monthly Average</u>	<u>Daily Maximum</u>	<u>Measurement Frequency 2/</u>	<u>Sample Type</u>	<u>Seasonal</u>
pH	-	-	6.0 S.U.	-	8.5 S.U.	Quarterly	Grab	-
Solids, Total Suspended	-	-	-	-	REPORT mg/l	Quarterly	Grab	-
Oil & Grease	-	-	-	-	15 mg/l	Quarterly	Grab	-
Phosphorus, Total (As P)	-	-	-	-	REPORT mg/l	Quarterly	Grab	-
Toluene	-	-	-	-	8723 ug/l	Quarterly	Grab	-
Benzene	-	-	-	-	15.4 ug/l	Quarterly	Grab	-
Naphthalene	-	-	-	-	620 ug/l	Quarterly	Grab	-
Flow, In Conduit or Thru Treatment Plant	REPORT MGD	REPORT MGD	-	-	-	Quarterly	Instantaneous	-

THE DISCHARGE SHALL HAVE NO SHEEN, AND THERE SHALL BE NO DISCHARGE OF VISIBLE OIL, FLOATING SOLIDS OR VISIBLE FOAM IN OTHER THAN TRACE AMOUNTS.

- 1/ Samples collected to comply with the monitoring requirements specified above shall be collected at the following location: At the nearest accessible location just prior to discharge and after final treatment. Unless otherwise specified, composite samples shall be time composite samples collected using automatic sampling equipment or a minimum of eight (8) equal volume grab samples collected over equal time intervals. All composite samples shall be collected for the total period of discharge not to exceed 24 hours.
- 2/ If only one sampling event occurs during a month, the sample result shall be reported on the discharge monitoring report as both the monthly average and daily maximum value for all parameters with a monthly average limitation.
- 3/ See Part IV.A for Best Management Practices (BMP) Plan Requirements.
- 4/ See Part IV.B for Stormwater Measurement and Sampling Requirements.

During the period beginning on the effective date of this permit and lasting through the expiration date of this permit, the permittee is authorized to discharge from the following point source(s) outfall(s), described more fully in the permittee's application:

DSN002Q (continued):Storm water and wash water from equipment maintenance and washing from UTES #1 3/

Such discharge shall be limited and monitored by the permittee as specified below:

<u>EFFLUENT CHARACTERISTIC</u>	<u>DISCHARGE LIMITATIONS</u>			<u>MONITORING REQUIREMENTS 1/</u>				
	<u>Monthly Average</u>	<u>Daily Maximum</u>	<u>Daily Minimum</u>	<u>Monthly Average</u>	<u>Daily Maximum</u>	<u>Measurement Frequency 2/</u>	<u>Sample Type</u>	<u>Seasonal</u>
Chlorine, Total Residual 5/	-	-	-	0.011 mg/l	0.019 mg/l	Quarterly	Grab	-
Xylene	-	-	-	-	REPORT mg/l	Quarterly	Grab	-

THE DISCHARGE SHALL HAVE NO SHEEN, AND THERE SHALL BE NO DISCHARGE OF VISIBLE OIL, FLOATING SOLIDS OR VISIBLE FOAM IN OTHER THAN TRACE AMOUNTS.

- 1/ Samples collected to comply with the monitoring requirements specified above shall be collected at the following location: At the nearest accessible location just prior to discharge and after final treatment. Unless otherwise specified, composite samples shall be time composite samples collected using automatic sampling equipment or a minimum of eight (8) equal volume grab samples collected over equal time intervals. All composite samples shall be collected for the total period of discharge not to exceed 24 hours.
- 2/ If only one sampling event occurs during a month, the sample result shall be reported on the discharge monitoring report as both the monthly average and daily maximum value for all parameters with a monthly average limitation.
- 3/ See Part IV.A for Best Management Practices (BMP) Plan Requirements.
- 4/ See Part IV.B for Stormwater Measurement and Sampling Requirements.
- 5/ A measurement of Total Residual Chlorine below 0.05 mg/L will be considered in compliance with the permit limitations above and should be reported as NODI=B or *B on the discharge monitoring reports.

During the period beginning on the effective date of this permit and lasting through the expiration date of this permit, the permittee is authorized to discharge from the following point source(s) outfall(s), described more fully in the permittee's application:

DSN003S:Storm water from the Horizontal Engineering Training Area 3/

Such discharge shall be limited and monitored by the permittee as specified below:

<u>EFFLUENT CHARACTERISTIC</u>	<u>DISCHARGE LIMITATIONS</u>			<u>MONITORING REQUIREMENTS 1/</u>				
	<u>Monthly Average</u>	<u>Daily Maximum</u>	<u>Daily Minimum</u>	<u>Monthly Average</u>	<u>Daily Maximum</u>	<u>Measurement Frequency 2/</u>	<u>Sample Type</u>	<u>Seasonal</u>
pH	-	-	REPORT S.U.	-	REPORT S.U.	Semi-Annually	Grab	-
Solids, Total Suspended	-	-	-	-	REPORT mg/l	Semi-Annually	Grab	-
Oil & Grease	-	-	-	-	15 mg/l	Semi-Annually	Grab	-
Flow, In Conduit or Thru Treatment Plant	REPORT MGD	REPORT MGD	-	-	-	Semi-Annually	Estimate	-

THE DISCHARGE SHALL HAVE NO SHEEN, AND THERE SHALL BE NO DISCHARGE OF VISIBLE OIL, FLOATING SOLIDS OR VISIBLE FOAM IN OTHER THAN TRACE AMOUNTS.

- 1/ Samples collected to comply with the monitoring requirements specified above shall be collected at the following location: At the nearest accessible location just prior to discharge and after final treatment. Unless otherwise specified, composite samples shall be time composite samples collected using automatic sampling equipment or a minimum of eight (8) equal volume grab samples collected over equal time intervals. All composite samples shall be collected for the total period of discharge not to exceed 24 hours.
- 2/ If only one sampling event occurs during a month, the sample result shall be reported on the discharge monitoring report as both the monthly average and daily maximum value for all parameters with a monthly average limitation.
- 3/ See Part IV.A for Best Management Practices (BMP) Plan Requirements.
- 4/ See Part IV.B for Stormwater Measurement and Sampling Requirements.

During the period beginning on the effective date of this permit and lasting through the expiration date of this permit, the permittee is authorized to discharge from the following point source(s) outfall(s), described more fully in the permittee's application:

DSN004S:Storm water from the Horizontal Engineering Training Area 3/

Such discharge shall be limited and monitored by the permittee as specified below:

<u>EFFLUENT CHARACTERISTIC</u>	<u>DISCHARGE LIMITATIONS</u>			<u>MONITORING REQUIREMENTS 1/</u>				
	<u>Monthly Average</u>	<u>Daily Maximum</u>	<u>Daily Minimum</u>	<u>Monthly Average</u>	<u>Daily Maximum</u>	<u>Measurement Frequency 2/</u>	<u>Sample Type</u>	<u>Seasonal</u>
pH	-	-	REPORT S.U.	-	REPORT S.U.	Semi-Annually	Grab	-
Solids, Total Suspended	-	-	-	-	REPORT mg/l	Semi-Annually	Grab	-
Oil & Grease	-	-	-	-	15 mg/l	Semi-Annually	Grab	-
Flow, In Conduit or Thru Treatment Plant	REPORT MGD	REPORT MGD	-	-	-	Semi-Annually	Estimate	-

THE DISCHARGE SHALL HAVE NO SHEEN, AND THERE SHALL BE NO DISCHARGE OF VISIBLE OIL, FLOATING SOLIDS OR VISIBLE FOAM IN OTHER THAN TRACE AMOUNTS.

- 1/ Samples collected to comply with the monitoring requirements specified above shall be collected at the following location: At the nearest accessible location just prior to discharge and after final treatment. Unless otherwise specified, composite samples shall be time composite samples collected using automatic sampling equipment or a minimum of eight (8) equal volume grab samples collected over equal time intervals. All composite samples shall be collected for the total period of discharge not to exceed 24 hours.
- 2/ If only one sampling event occurs during a month, the sample result shall be reported on the discharge monitoring report as both the monthly average and daily maximum value for all parameters with a monthly average limitation.
- 3/ See Part IV.A for Best Management Practices (BMP) Plan Requirements.
- 4/ See Part IV.B for Stormwater Measurement and Sampling Requirements.

During the period beginning on the effective date of this permit and lasting through the expiration date of this permit, the permittee is authorized to discharge from the following point source(s) outfall(s), described more fully in the permittee's application:

DSN005S:Storm water from the Horizontal Engineering Training Area 3/

Such discharge shall be limited and monitored by the permittee as specified below:

<u>EFFLUENT CHARACTERISTIC</u>	<u>DISCHARGE LIMITATIONS</u>			<u>MONITORING REQUIREMENTS 1/</u>				
	<u>Monthly Average</u>	<u>Daily Maximum</u>	<u>Daily Minimum</u>	<u>Monthly Average</u>	<u>Daily Maximum</u>	<u>Measurement Frequency 2/</u>	<u>Sample Type</u>	<u>Seasonal</u>
pH	-	-	REPORT S.U.	-	REPORT S.U.	Semi-Annually	Grab	-
Solids, Total Suspended	-	-	-	-	REPORT mg/l	Semi-Annually	Grab	-
Oil & Grease	-	-	-	-	15 mg/l	Semi-Annually	Grab	-
Flow, In Conduit or Thru Treatment Plant	REPORT MGD	REPORT MGD	-	-	-	Semi-Annually	Estimate	-

THE DISCHARGE SHALL HAVE NO SHEEN, AND THERE SHALL BE NO DISCHARGE OF VISIBLE OIL, FLOATING SOLIDS OR VISIBLE FOAM IN OTHER THAN TRACE AMOUNTS.

- 1/ Samples collected to comply with the monitoring requirements specified above shall be collected at the following location: At the nearest accessible location just prior to discharge and after final treatment. Unless otherwise specified, composite samples shall be time composite samples collected using automatic sampling equipment or a minimum of eight (8) equal volume grab samples collected over equal time intervals. All composite samples shall be collected for the total period of discharge not to exceed 24 hours.
- 2/ If only one sampling event occurs during a month, the sample result shall be reported on the discharge monitoring report as both the monthly average and daily maximum value for all parameters with a monthly average limitation.
- 3/ See Part IV.A for Best Management Practices (BMP) Plan Requirements.
- 4/ See Part IV.B for Stormwater Measurement and Sampling Requirements.

During the period beginning on the effective date of this permit and lasting through the expiration date of this permit, the permittee is authorized to discharge from the following point source(s) outfall(s), described more fully in the permittee's application:

DSN006S:Storm water from the Horizontal Engineering Training Area 3/

Such discharge shall be limited and monitored by the permittee as specified below:

<u>EFFLUENT CHARACTERISTIC</u>	<u>DISCHARGE LIMITATIONS</u>			<u>MONITORING REQUIREMENTS 1/</u>				
	<u>Monthly Average</u>	<u>Daily Maximum</u>	<u>Daily Minimum</u>	<u>Monthly Average</u>	<u>Daily Maximum</u>	<u>Measurement Frequency 2/</u>	<u>Sample Type</u>	<u>Seasonal</u>
pH	-	-	REPORT S.U.	-	REPORT S.U.	Semi-Annually	Grab	-
Solids, Total Suspended	-	-	-	-	REPORT mg/l	Semi-Annually	Grab	-
Oil & Grease	-	-	-	-	15 mg/l	Semi-Annually	Grab	-
Flow, In Conduit or Thru Treatment Plant	REPORT MGD	REPORT MGD	-	-	-	Semi-Annually	Estimate	-

THE DISCHARGE SHALL HAVE NO SHEEN, AND THERE SHALL BE NO DISCHARGE OF VISIBLE OIL, FLOATING SOLIDS OR VISIBLE FOAM IN OTHER THAN TRACE AMOUNTS.

- 1/ Samples collected to comply with the monitoring requirements specified above shall be collected at the following location: At the nearest accessible location just prior to discharge and after final treatment. Unless otherwise specified, composite samples shall be time composite samples collected using automatic sampling equipment or a minimum of eight (8) equal volume grab samples collected over equal time intervals. All composite samples shall be collected for the total period of discharge not to exceed 24 hours.
- 2/ If only one sampling event occurs during a month, the sample result shall be reported on the discharge monitoring report as both the monthly average and daily maximum value for all parameters with a monthly average limitation.
- 3/ See Part IV.A for Best Management Practices (BMP) Plan Requirements.
- 4/ See Part IV.B for Stormwater Measurement and Sampling Requirements.

During the period beginning on the effective date of this permit and lasting through the expiration date of this permit, the permittee is authorized to discharge from the following point source(s) outfall(s), described more fully in the permittee's application:

DSN007S:Storm water from the Rock Crusher Training Area 3/

Such discharge shall be limited and monitored by the permittee as specified below:

<u>EFFLUENT CHARACTERISTIC</u>	<u>DISCHARGE LIMITATIONS</u>			<u>MONITORING REQUIREMENTS 1/</u>				
	<u>Monthly Average</u>	<u>Daily Maximum</u>	<u>Daily Minimum</u>	<u>Monthly Average</u>	<u>Daily Maximum</u>	<u>Measurement Frequency 2/</u>	<u>Sample Type</u>	<u>Seasonal</u>
pH	-	-	REPORT S.U.	-	REPORT S.U.	Semi-Annually	Grab	-
Solids, Total Suspended	-	-	-	-	REPORT mg/l	Semi-Annually	Grab	-
Oil & Grease	-	-	-	-	15 mg/l	Semi-Annually	Grab	-
Flow, In Conduit or Thru Treatment Plant	REPORT MGD	REPORT MGD	-	-	-	Semi-Annually	Estimate	-

THE DISCHARGE SHALL HAVE NO SHEEN, AND THERE SHALL BE NO DISCHARGE OF VISIBLE OIL, FLOATING SOLIDS OR VISIBLE FOAM IN OTHER THAN TRACE AMOUNTS.

- 1/ Samples collected to comply with the monitoring requirements specified above shall be collected at the following location: At the nearest accessible location just prior to discharge and after final treatment. Unless otherwise specified, composite samples shall be time composite samples collected using automatic sampling equipment or a minimum of eight (8) equal volume grab samples collected over equal time intervals. All composite samples shall be collected for the total period of discharge not to exceed 24 hours.
- 2/ If only one sampling event occurs during a month, the sample result shall be reported on the discharge monitoring report as both the monthly average and daily maximum value for all parameters with a monthly average limitation.
- 3/ See Part IV.A for Best Management Practices (BMP) Plan Requirements.
- 4/ See Part IV.B for Stormwater Measurement and Sampling Requirements.

During the period beginning on the effective date of this permit and lasting through the expiration date of this permit, the permittee is authorized to discharge from the following point source(s) outfall(s), described more fully in the permittee's application:

DSN008S:Storm water from the Rock Crusher Training Area 3/

Such discharge shall be limited and monitored by the permittee as specified below:

<u>EFFLUENT CHARACTERISTIC</u>	<u>DISCHARGE LIMITATIONS</u>			<u>MONITORING REQUIREMENTS 1/</u>				
	<u>Monthly Average</u>	<u>Daily Maximum</u>	<u>Daily Minimum</u>	<u>Monthly Average</u>	<u>Daily Maximum</u>	<u>Measurement Frequency 2/</u>	<u>Sample Type</u>	<u>Seasonal</u>
pH	-	-	REPORT S.U.	-	REPORT S.U.	Semi-Annually	Grab	-
Solids, Total Suspended	-	-	-	-	REPORT mg/l	Semi-Annually	Grab	-
Oil & Grease	-	-	-	-	15 mg/l	Semi-Annually	Grab	-
Flow, In Conduit or Thru Treatment Plant	REPORT MGD	REPORT MGD	-	-	-	Semi-Annually	Estimate	-

THE DISCHARGE SHALL HAVE NO SHEEN, AND THERE SHALL BE NO DISCHARGE OF VISIBLE OIL, FLOATING SOLIDS OR VISIBLE FOAM IN OTHER THAN TRACE AMOUNTS.

- 1/ Samples collected to comply with the monitoring requirements specified above shall be collected at the following location: At the nearest accessible location just prior to discharge and after final treatment. Unless otherwise specified, composite samples shall be time composite samples collected using automatic sampling equipment or a minimum of eight (8) equal volume grab samples collected over equal time intervals. All composite samples shall be collected for the total period of discharge not to exceed 24 hours.
- 2/ If only one sampling event occurs during a month, the sample result shall be reported on the discharge monitoring report as both the monthly average and daily maximum value for all parameters with a monthly average limitation.
- 3/ See Part IV.A for Best Management Practices (BMP) Plan Requirements.
- 4/ See Part IV.B for Stormwater Measurement and Sampling Requirements.

During the period beginning on the effective date of this permit and lasting through the expiration date of this permit, the permittee is authorized to discharge from the following point source(s) outfall(s), described more fully in the permittee's application:

DSN009S:Storm water from the Rock Crusher Training Area 3/

Such discharge shall be limited and monitored by the permittee as specified below:

<u>EFFLUENT CHARACTERISTIC</u>	<u>DISCHARGE LIMITATIONS</u>			<u>MONITORING REQUIREMENTS 1/</u>				
	<u>Monthly Average</u>	<u>Daily Maximum</u>	<u>Daily Minimum</u>	<u>Monthly Average</u>	<u>Daily Maximum</u>	<u>Measurement Frequency 2/</u>	<u>Sample Type</u>	<u>Seasonal</u>
pH	-	-	REPORT S.U.	-	REPORT S.U.	Semi-Annually	Grab	-
Solids, Total Suspended	-	-	-	-	REPORT mg/l	Semi-Annually	Grab	-
Oil & Grease	-	-	-	-	15 mg/l	Semi-Annually	Grab	-
Flow, In Conduit or Thru Treatment Plant	REPORT MGD	REPORT MGD	-	-	-	Semi-Annually	Estimate	-

THE DISCHARGE SHALL HAVE NO SHEEN, AND THERE SHALL BE NO DISCHARGE OF VISIBLE OIL, FLOATING SOLIDS OR VISIBLE FOAM IN OTHER THAN TRACE AMOUNTS.

- 1/ Samples collected to comply with the monitoring requirements specified above shall be collected at the following location: At the nearest accessible location just prior to discharge and after final treatment. Unless otherwise specified, composite samples shall be time composite samples collected using automatic sampling equipment or a minimum of eight (8) equal volume grab samples collected over equal time intervals. All composite samples shall be collected for the total period of discharge not to exceed 24 hours.
- 2/ If only one sampling event occurs during a month, the sample result shall be reported on the discharge monitoring report as both the monthly average and daily maximum value for all parameters with a monthly average limitation.
- 3/ See Part IV.A for Best Management Practices (BMP) Plan Requirements.
- 4/ See Part IV.B for Stormwater Measurement and Sampling Requirements.

During the period beginning on the effective date of this permit and lasting through the expiration date of this permit, the permittee is authorized to discharge from the following point source(s) outfall(s), described more fully in the permittee's application:

DSN010S:Storm water from the Rock Crusher Training Area 3/

Such discharge shall be limited and monitored by the permittee as specified below:

<u>EFFLUENT CHARACTERISTIC</u>	<u>DISCHARGE LIMITATIONS</u>			<u>MONITORING REQUIREMENTS 1/</u>				
	<u>Monthly Average</u>	<u>Daily Maximum</u>	<u>Daily Minimum</u>	<u>Monthly Average</u>	<u>Daily Maximum</u>	<u>Measurement Frequency 2/</u>	<u>Sample Type</u>	<u>Seasonal</u>
pH	-	-	REPORT S.U.	-	REPORT S.U.	Semi-Annually	Grab	-
Solids, Total Suspended	-	-	-	-	REPORT mg/l	Semi-Annually	Grab	-
Oil & Grease	-	-	-	-	15 mg/l	Semi-Annually	Grab	-
Flow, In Conduit or Thru Treatment Plant	REPORT MGD	REPORT MGD	-	-	-	Semi-Annually	Estimate	-

THE DISCHARGE SHALL HAVE NO SHEEN, AND THERE SHALL BE NO DISCHARGE OF VISIBLE OIL, FLOATING SOLIDS OR VISIBLE FOAM IN OTHER THAN TRACE AMOUNTS.

- 1/ Samples collected to comply with the monitoring requirements specified above shall be collected at the following location: At the nearest accessible location just prior to discharge and after final treatment. Unless otherwise specified, composite samples shall be time composite samples collected using automatic sampling equipment or a minimum of eight (8) equal volume grab samples collected over equal time intervals. All composite samples shall be collected for the total period of discharge not to exceed 24 hours.
- 2/ If only one sampling event occurs during a month, the sample result shall be reported on the discharge monitoring report as both the monthly average and daily maximum value for all parameters with a monthly average limitation.
- 3/ See Part IV.A for Best Management Practices (BMP) Plan Requirements.
- 4/ See Part IV.B for Stormwater Measurement and Sampling Requirements.

B. DISCHARGE MONITORING AND RECORD KEEPING REQUIREMENTS

1. Representative Sampling

Samples and measurements taken as required herein shall be representative of the volume and nature of the monitored discharge and shall be in accordance with the provisions of this permit.

2. Test Procedures

For the purpose of reporting and compliance, permittees shall use one of the following procedures:

- a. For parameters with an EPA established Minimum Level (ML), report the measured value if the analytical result is at or above the ML and report "0" for values below the ML. Test procedures for the analysis of pollutants shall conform to 40 CFR Part 136 and guidelines published pursuant to Section 304(h) of the FWPCA, 33 U.S.C. Section 1314(h). If more than one method for analysis of a substance is approved for use, a method having a minimum level lower than the permit limit shall be used. If the minimum level of all methods is higher than the permit limit, the method having the lowest minimum level shall be used and a report of less than the minimum level shall be reported as zero and will constitute compliance; however, should EPA approve a method with a lower minimum level during the term of this permit the permittee shall use the newly approved method.

- b. For pollutants parameters without an established ML, an interim ML may be utilized. The interim ML shall be calculated as 3.18 times the Method Detection Level (MDL) calculated pursuant to 40 CFR Part 136, Appendix B.

Permittees may develop an effluent matrix-specific ML, where an effluent matrix prevents attainment of the established ML. However, a matrix specific ML shall be based upon proper laboratory method and technique. Matrix-specific MLs must be approved by the Department, and may be developed by the permittee during permit issuance, reissuance, modification, or during compliance schedule.

In either case the measured value should be reported if the analytical result is at or above the ML and "0" reported for values below the ML.

- c. For parameters without an EPA established ML, interim ML, or matrix-specific ML, a report of less than the detection limit shall constitute compliance if the detection limit of all analytical methods is higher than the permit limit using the most sensitive EPA approved method. For the purpose of calculating a monthly average, "0" shall be used for values reported less than the detection limit.

The Minimum Level utilized for procedures A and B above shall be reported on the permittee's DMR. When an EPA approved test procedure for analysis of a pollutant does not exist, the Director shall approve the procedure to be used.

3. Recording of Results

For each measurement or sample taken pursuant to the requirements of this permit, the permittee shall record the following information:

- a. The facility name and location, point source number, date, time and exact place of sampling;
- b. The name(s) of person(s) who obtained the samples or measurements;
- c. The dates and times the analyses were performed;
- d. The name(s) of the person(s) who performed the analyses;
- e. The analytical techniques or methods used, including source of method and method number; and
- f. The results of all required analyses.

4. Records Retention and Production

The permittee shall retain records of all monitoring information, including all calibration and maintenance records and all original strip chart recordings for continuous monitoring instrumentation, copies of all reports required by the permit, and records of all data used to complete the above reports or the application for this permit, for a period of at least three years from the date of the sample measurement, report or application. This period may be extended by request of the Director at any time. If litigation or other enforcement action, under the AWPCA and/or the FWPCA, is ongoing which involves any of the above records, the records shall be kept until the litigation is resolved. Upon the written request of the Director or his designee, the permittee shall provide the Director with a copy of any record required to be retained by this paragraph. Copies of these records shall not be submitted unless requested.

All records required to be kept for a period of three years shall be kept at the permitted facility or an alternate location approved by the Department in writing and shall be available for inspection.

5. Monitoring Equipment and Instrumentation

All equipment and instrumentation used to determine compliance with the requirements of this permit shall be installed, maintained, and calibrated in accordance with the manufacturer's instructions or, in the absence of manufacturer's instructions, in accordance with accepted practices. The permittee shall develop and maintain quality assurance procedures to ensure proper operation and maintenance of all equipment and instrumentation. The quality assurance procedures shall include the proper use, maintenance, and installation, when appropriate, of monitoring equipment at the plant site.

C. DISCHARGE REPORTING REQUIREMENTS

1. Reporting of Monitoring Requirements

- a. The permittee shall conduct the required monitoring in accordance with the following schedule:

MONITORING REQUIRED MORE FREQUENTLY THAN MONTHLY AND MONTHLY shall be conducted during the first full month following the effective date of coverage under this permit and every month thereafter.

QUARTERLY MONITORING shall be conducted at least once during each calendar quarter. Calendar quarters are the periods of January through March, April through June, July through September, and October through December. The permittee shall conduct the quarterly monitoring during the first complete calendar quarter following the effective date of this permit and is then required to monitor once during each quarter thereafter. Quarterly monitoring may be done anytime during the quarter, unless restricted elsewhere in this permit, but it should be submitted with the last DMR due for the quarter, i.e., (March, June, September and December DMR's).

SEMIANNUAL MONITORING shall be conducted at least once during the period of January through June and at least once during the period of July through December. The permittee shall conduct the semiannual monitoring during the first complete calendar semiannual period following the effective date of this permit and is then required to monitor once during each semiannual period thereafter. Semiannual monitoring may be done anytime during the semiannual period, unless restricted elsewhere in this permit, but it should be submitted with the last DMR for the month of the semiannual period, i.e. (June and December DMR's).

ANNUAL MONITORING shall be conducted at least once during the period of January through December. The permittee shall conduct the annual monitoring during the first complete calendar annual period following the effective date of this permit and is then required to monitor once during each annual period thereafter. Annual monitoring may be done anytime during the year, unless restricted elsewhere in this permit, but it should be submitted with the December DMR.

- b. The permittee shall submit discharge monitoring reports (DMRs) on the forms provided by the Department and in accordance with the following schedule:

REPORTS OF QUARTERLY TESTING shall be submitted on a **quarterly** basis. The first report is due on the **28th day of [Month, Year]**. The reports shall be submitted so that they are received by the Department no later than the 28th day of the month following the reporting period.

REPORTS OF SEMIANNUAL TESTING shall be submitted on a semiannual basis. The reports are due on the 28th day of JANUARY and the 28th day of JULY. The reports shall be submitted so that they are received by the Department no later than the 28th day of the month following the reporting period.

- c. Except as allowed by Provision I.C.1.c.(1) or (2), the permittee shall submit all Discharge Monitoring Reports (DMRs) required by Provision I.C.1.b by utilizing the Department's web-based Electronic Environmental (E2) Reporting System.

- (1) If the permittee is unable to complete the electronic submittal of DMR data due to technical problems originating with the Department's E2 Reporting system (this could include entry/submittal issues with an entire set of DMRs or individual parameters), the permittee is not relieved of their obligation to submit DMR data to the Department by the date specified in Provision I.C.1.b, unless otherwise directed by the Department.

If the E2 Reporting System is down on the 28th day of the month in which the DMR is due or is down for an extended period of time, as determined by the Department, when a DMR is required to be submitted, the permittee may submit the data in an alternate manner and format acceptable to the Department. Preapproved alternate acceptable methods include faxing, e-mailing, mailing, or hand-delivery of data such that they are received by the required reporting date. Within 5 calendar days of the E2 Reporting System resuming operation, the permittee shall enter the data into the E2 Reporting System, unless an alternate timeframe is

approved by the Department. An attachment should be included with the E2 DMR submittal verifying the original submittal date (date of the fax, copy of the dated e-mail, or hand-delivery stamped date), if applicable.

- (2) The permittee may submit a request to the Department for a temporary electronic reporting waiver for DMR submittals. The waiver request should include the permit number; permittee name; facility/site name; facility address; name, address, and contact information for the responsible official or duly authorized representative; a detailed statement regarding the basis for requesting such a waiver; and the duration for which the waiver is requested. Approved electronic reporting waivers are not transferrable.

Permittees with an approved electronic reporting waiver for DMRs may submit hard copy DMRs for the period that the approved electronic reporting waiver request is effective. The permittee shall submit the Department-approved DMR forms to the address listed in Provision I.C.1.e.

- (3) If a permittee is allowed to submit a hard copy DMR, the DMR must be legible and bear an original signature. Photo and electronic copies of the signature are not acceptable and shall not satisfy the reporting requirements of this permit.
- (4) If the permittee, using approved analytical methods as specified in Provision I.B.2, monitors any discharge from a point source for a limited substance identified in Provision I.A. of this permit more frequently than required by this permit, the results of such monitoring shall be included in the calculation and reporting of values on the DMR and the increased frequency shall be indicated on the DMR.
- (5) In the event no discharge from a point source identified in Provision I.A. of this permit and described more fully in the permittee's application occurs during a monitoring period, the permittee shall report "No Discharge" for such period on the appropriate DMR.

- d. All reports and forms required to be submitted by this permit, the AWPCA and the Department's Rules, shall be electronically signed (or, if allowed by the Department, traditionally signed) by a "responsible official" of the permittee as defined in ADEM Administrative Code Rule 335-6-6-.09 or a "duly authorized representative" of such official as defined in ADEM Administrative Code Rule 335-6-6-.09 and shall bear the following certification:

"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 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."

- e. Discharge Monitoring Reports required by this permit, the AWPCA, and the Department's Rules that are being submitted in hard copy shall be addressed to:

**Alabama Department of Environmental Management
Permits and Services Division
Environmental Data Section
Post Office Box 301463
Montgomery, Alabama 36130-1463**

Certified and Registered Mail containing Discharge Monitoring Reports shall be addressed to:

**Alabama Department of Environmental Management
Permits and Services Division
Environmental Data Section
1400 Coliseum Boulevard
Montgomery, Alabama 36110-2400**

- f. All other correspondence and reports required to be submitted by this permit, the AWPCA, and the Department's Rules shall be addressed to:

**Alabama Department of Environmental Management
Water Division
Post Office Box 301463
Montgomery, Alabama 36130-1463**

Certified and Registered Mail shall be addressed to:

Alabama Department of Environmental Management

Water Division
1400 Coliseum Boulevard
Montgomery, Alabama 36110-2400

- g. If this permit is a re-issuance, then the permittee shall continue to submit DMRs in accordance with the requirements of their previous permit until such time as DMRs are due as discussed in Part I.C.1.b above.

2. Noncompliance Notification

a. 24-Hour Noncompliance Reporting

The permittee shall report to the Director, within 24-hours of becoming aware of the noncompliance, any noncompliance which may endanger health or the environment. This shall include but is not limited to the following circumstances:

- (1) does not comply with any daily minimum or maximum discharge limitation for an effluent characteristic specified in Provision I. A. of this permit which is denoted by an "(X)";
- (2) threatens human health or welfare, fish or aquatic life, or water quality standards;
- (3) does not comply with an applicable toxic pollutant effluent standard or prohibition established under Section 307(a) of the FWPCA, 33 U.S.C. Section 1317(a);
- (4) contains a quantity of a hazardous substance which has been determined may be harmful to public health or welfare under Section 311(b)(4) of the FWPCA, 33 U.S.C. Section 1321(b)(4);
- (5) exceeds any discharge limitation for an effluent characteristic as a result of an unanticipated bypass or upset; and
- (6) is an unpermitted direct or indirect discharge of a pollutant to a water of the state (unpermitted discharges properly reported to the Department under any other requirement are not required to be reported under this provision).

The permittee shall orally report the occurrence and circumstances of such discharge to the Director within 24-hours after the permittee becomes aware of the occurrence of such discharge. In addition to the oral report, the permittee shall submit to the Director or Designee a written report as provided in Part I.C.2.c no later than five (5) days after becoming aware of the occurrence of such discharge.

- b. If for any reason, the permittee's discharge does not comply with any limitation of this permit, the permittee shall submit to the Director or Designee a written report as provided in Part I.C.2.c below, such report shall be submitted with the next Discharge Monitoring Report required to be submitted by Part I.C.1 of this permit after becoming aware of the occurrence of such noncompliance.

- c. Any written report required to be submitted to the Director or Designee by Part I.C.2 a. or b. shall be submitted using a Noncompliance Notification Form (ADEM Form 421) available on the Department's website (<http://adem.alabama.gov/DeptForms/Form421.pdf>) and include the following information:

- (1) A description of the discharge and cause of noncompliance;
- (2) The period of noncompliance, including exact dates and times or, if not corrected, the anticipated time the noncompliance is expected to continue; and
- (3) A description of the steps taken and/or being taken to reduce or eliminate the noncomplying discharge and to prevent its recurrence.

D. OTHER REPORTING AND NOTIFICATION REQUIREMENTS

1. Anticipated Noncompliance

The permittee shall give the Director written advance notice of any planned changes or other circumstances regarding a facility which may result in noncompliance with permit requirements.

2. Termination of Discharge

The permittee shall notify the Director, in writing, when all discharges from any point source(s) identified in Provision I. A. of this permit have permanently ceased. This notification shall serve as sufficient cause for instituting procedures for modification or termination of the permit.

3. Updating Information

- a. The permittee shall inform the Director of any change in the permittee's mailing address, telephone number or in the permittee's designation of a facility contact or office having the authority and responsibility to prevent and abate violations of the AWPCA, the Department's Rules, and the terms and conditions of this permit, in writing, no later than ten (10) days after such change. Upon request of the Director or his designee, the permittee shall furnish the Director with an update of any information provided in the permit application.
- b. If the permittee becomes aware that it failed to submit any relevant facts in a permit application, or submitted incorrect information in a permit application or in any report to the Director, it shall promptly submit such facts or information with a written explanation for the mistake and/or omission.

4. Duty to Provide Information

The permittee shall furnish to the Director, within a reasonable time, any information which the Director or his designee may request to determine whether cause exists for modifying, revoking and re-issuing, suspending, or terminating this permit, in whole or in part, or to determine compliance with this permit.

5. Cooling Water and Boiler Water Additives

- a. The permittee shall notify the Director in writing not later than thirty (30) days prior to instituting the use of any biocide corrosion inhibitor or chemical additive in a cooling or boiler system, not identified in the application for this permit, from which discharge is allowed by this permit. Notification is not required for additives that do not contain a heavy metal(s) as an active ingredient and that pass through a wastewater treatment system prior to discharge nor is notification required for additives that should not reasonably be expected to cause the cooling water or boiler water to exhibit toxicity as determined by analysis of manufacturer's data or testing by the permittee. Such notification shall include:
 - (1) name and general composition of biocide or chemical;
 - (2) 96-hour median tolerance limit data for organisms representative of the biota of the waterway into which the discharge will ultimately reach;
 - (2) quantities to be used;
 - (3) frequencies of use;
 - (4) proposed discharge concentrations; and
 - (6) EPA registration number, if applicable.
- b. The use of a biocide or additive containing tributyl tin, tributyl tin oxide, zinc, chromium or related compounds in cooling or boiler system(s), from which a discharge regulated by this permit occurs, is prohibited except as exempted below. The use of a biocide or additive containing zinc, chromium or related compounds may be used in special circumstances if (1) the permit contains limits for these substances, or (2) the applicant demonstrates during the application process that the use of zinc, chromium or related compounds as a biocide or additive will not pose a reasonable potential to violate the applicable State water quality standards for these substances. The use of any additive, not identified in this permit or in the application for this permit or not exempted from notification under this permit is prohibited, prior to a determination by the Department that permit modification to control discharge of the additive is not required or prior to issuance of a permit modification controlling discharge of the additive.

6. Permit Issued Based On Estimated Characteristics

- a. If this permit was issued based on estimates of the characteristics of a process discharge reported on an EPA NPDES Application Form 2D (EPA Form 3510-2D), the permittee shall complete and submit an EPA NPDES Application Form 2C (EPA Form 3510-2C) no later than two years after the date that discharge begins. Sampling required for completion of the Form 2C shall occur when a discharge(s) from the process(s) causing the new or increased discharge is occurring. If this permit was issued based on estimates concerning the composition of a stormwater discharge(s), the permittee shall perform the sampling required by EPA NPDES Application Form 2F (EPA Form 3510-2F) no later than one year after the industrial activity generating the stormwater discharge has been fully initiated.
- b. This permit shall be reopened if required to address any new information resulting from the completion and submittal of the Form 2C and or 2F.

E. SCHEDULE OF COMPLIANCE

1. The permittee shall achieve compliance with the discharge limitations specified in Provision I. A. in accordance with the following schedule:

IN ACCORDANCE WITH THE INSTRUCTIONS FOR EPA FORM 2D A COMPLETED EPA FORM 2C SHALL BE SUBMITTED NO LATER THAN TWO YEARS AFTER THE PROPOSED FACILITY BEGINS DISCHARGING.

COMPLIANCE SHALL BE ATTAINED ON THE EFFECTIVE DATE OF THIS PERMIT

2. No later than 14 calendar days following a date identified in the above schedule of compliance, the permittee shall submit either a report of progress or, in the case of specific actions being required by identified dates, a written notice of compliance or noncompliance. In the latter case, the notice shall include the cause of noncompliance, any remedial actions taken, and the probability of meeting the next scheduled requirement.

PART II OTHER REQUIREMENTS, RESPONSIBILITIES, AND DUTIES

A. OPERATIONAL AND MANAGEMENT REQUIREMENTS

1. Facilities Operation and Maintenance

The permittee shall at all times properly operate and maintain all facilities and systems of treatment and control (and related appurtenances) which are installed or used by the permittee to achieve compliance with the conditions of the permit. Proper operation and maintenance includes effective performance, adequate funding, adequate operator staffing and training, and adequate laboratory and process controls, including appropriate quality assurance procedures. This provision requires the operation of backup or auxiliary facilities only when necessary to achieve compliance with the conditions of the permit.

2. Best Management Practices

- a. Dilution water shall not be added to achieve compliance with discharge limitations except when the Director or his designee has granted prior written authorization for dilution to meet water quality requirements.
- b. The permittee shall prepare, implement, and maintain a Spill Prevention, Control and Countermeasures (SPCC) Plan in accordance with 40 C.F.R. Section 112 if required thereby.
- c. The permittee shall prepare, submit for approval and implement a Best Management Practices (BMP) Plan for containment of any or all process liquids or solids, in a manner such that these materials do not present a significant potential for discharge, if so required by the Director or his designee. When submitted and approved, the BMP Plan shall become a part of this permit and all requirements of the BMP Plan shall become requirements of this permit.

3. Spill Prevention, Control, and Management

The permittee shall provide spill prevention, control, and/or management sufficient to prevent any spills of pollutants from entering a water of the state or a publicly or privately owned treatment works. Any containment system used to implement this requirement shall be constructed of materials compatible with the substance(s) contained and which shall prevent the contamination of groundwater and such containment system shall be capable of retaining a volume equal to 110 percent of the capacity of the largest tank for which containment is provided.

B. OTHER RESPONSIBILITIES

1. Duty to Mitigate Adverse Impacts

The permittee shall promptly take all reasonable steps to mitigate and minimize or prevent any adverse impact on human health or the environment resulting from noncompliance with any discharge limitation specified in Provision I. A. of this permit, including such accelerated or additional monitoring of the discharge and/or the receiving waterbody as necessary to determine the nature and impact of the noncomplying discharge.

2. Right of Entry and Inspection

The permittee shall allow the Director, or an authorized representative, upon the presentation of proper credentials and other documents as may be required by law to:

- a. enter upon the permittee's premises where a regulated facility or activity or point source is located or conducted, or where records must be kept under the conditions of the permit;
- b. have access to and copy, at reasonable times, any records that must be kept under the conditions of the permit;
- c. inspect any facilities, equipment (including monitoring and control equipment), practices, or operations regulated or required under the permit; and
- d. sample or monitor, for the purposes of assuring permit compliance or as otherwise authorized by the AWPCA, any substances or parameters at any location.

C. BYPASS AND UPSET

1. Bypass

- a. Any bypass is prohibited except as provided in b. and c. below:
- b. A bypass is not prohibited if:
 - (1) It does not cause any discharge limitation specified in Provision I. A. of this permit to be exceeded;

- (2) It enters the same receiving stream as the permitted outfall; and
 - (3) It is necessary for essential maintenance of a treatment or control facility or system to assure efficient operation of such facility or system.
 - c. A bypass is not prohibited and need not meet the discharge limitations specified in Provision I. A. of this permit if:
 - (1) It is unavoidable to prevent loss of life, personal injury, or severe property damage; -
 - (2) There are no feasible alternatives to the bypass, such as the use of auxiliary treatment facilities, retention of untreated wastes, or maintenance during normal periods of equipment downtime (this condition is not satisfied if adequate back-up equipment should have been installed in the exercise of reasonable engineering judgment to prevent a bypass which occurred during normal periods of equipment downtime or preventive maintenance); and
 - (3) The permittee submits a written request for authorization to bypass to the Director at least ten (10) days prior to the anticipated bypass (if possible), the permittee is granted such authorization, and the permittee complies with any conditions imposed by the Director to minimize any adverse impact on human health or the environment resulting from the bypass.
 - d. The permittee has the burden of establishing that each of the conditions of Provision II.C.1.b. or c. have been met to qualify for an exception to the general prohibition against bypassing contained in a. and an exemption, where applicable, from the discharge limitations specified in Provision I. A. of this permit.
- 2. Upset
 - a. A discharge which results from an upset need not meet the discharge limitations specified in Provision I. A. of this permit if:
 - (1) No later than 24-hours after becoming aware of the occurrence of the upset, the permittee orally reports the occurrence and circumstances of the upset to the Director or his designee; and
 - (2) No later than five (5) days after becoming aware of the occurrence of the upset, the permittee furnishes the Director with evidence, including properly signed, contemporaneous operating logs, or other relevant evidence, demonstrating that (i) an upset occurred; (ii) the permittee can identify the specific cause(s) of the upset; (iii) the permittee's facility was being properly operated at the time of the upset; and (iv) the permittee promptly took all reasonable steps to minimize any adverse impact on human health or the environment resulting from the upset.
 - b. The permittee has the burden of establishing that each of the conditions of Provision II. C.2.a. of this permit have been met to qualify for an exemption from the discharge limitations specified in Provision I.A. of this permit.

D. DUTY TO COMPLY WITH PERMIT, RULES, AND STATUTES

- 1. Duty to Comply
 - a. The permittee must comply with all conditions of this permit. Any permit noncompliance constitutes a violation of the AWPCA and the FWPCA and is grounds for enforcement action, for permit termination, revocation and reissuance, suspension, modification; or denial of a permit renewal application.
 - b. The necessity to halt or reduce production or other activities in order to maintain compliance with the conditions of the permit shall not be a defense for a permittee in an enforcement action.
 - c. The discharge of a pollutant from a source not specifically identified in the permit application for this permit and not specifically included in the description of an outfall in this permit is not authorized and shall constitute noncompliance with this permit.
 - d. The permittee shall take all reasonable steps, including cessation of production or other activities, to minimize or prevent any violation of this permit or to minimize or prevent any adverse impact of any permit violation.
 - e. Nothing in this permit shall be construed to preclude and negate the permittee's responsibility or liability to apply for, obtain, or comply with other ADEM, Federal, State, or Local Government permits, certifications, licenses, or other approvals.
- 2. Removed Substances

Solids, sludges, filter backwash, or any other pollutant or other waste removed in the course of treatment or control of wastewaters shall be disposed of in a manner that complies with all applicable Department Rules.

3. Loss or Failure of Treatment Facilities

Upon the loss or failure of any treatment facilities, including but not limited to the loss or failure of the primary source of power of the treatment facility, the permittee shall, where necessary to maintain compliance with the discharge limitations specified in Provision I. A. of this permit, or any other terms or conditions of this permit, cease, reduce, or otherwise control production and/or all discharges until treatment is restored. If control of discharge during loss or failure of the primary source of power is to be accomplished by means of alternate power sources, standby generators, or retention of inadequately treated effluent, the permittee must furnish to the Director within six months a certification that such control mechanisms have been installed.

4. Compliance with Statutes and Rules

- a. This permit has been issued under ADEM Administrative Code, Chapter 335-6-6. All provisions of this chapter, that are applicable to this permit, are hereby made a part of this permit. A copy of this chapter may be obtained for a small charge from the Office of General Counsel, Alabama Department of Environmental Management, 1400 Coliseum Blvd., Montgomery, AL 36130.
- b. This permit does not authorize the noncompliance with or violation of any Laws of the State of Alabama or the United States of America or any regulations or rules implementing such laws. FWPCA, 33 U.S.C. Section 1319, and Code of Alabama 1975, Section 22-22-14.

E. PERMIT TRANSFER, MODIFICATION, SUSPENSION, REVOCATION, AND REISSUANCE

1. Duty to Reapply or Notify of Intent to Cease Discharge

- a. If the permittee intends to continue to discharge beyond the expiration date of this permit, the permittee shall file a complete permit application for reissuance of this permit at least 180 days prior to its expiration. If the permittee does not intend to continue discharge beyond the expiration of this permit, the permittee shall submit written notification of this intent which shall be signed by an individual meeting the signatory requirements for a permit application as set forth in ADEM Administrative Code Rule 335-6-6-.09.
- b. Failure of the permittee to apply for reissuance at least 180 days prior to permit expiration will void the automatic continuation of the expiring permit provided by ADEM Administrative Code Rule 335-6-6-.06 and should the permit not be reissued for any reason any discharge after expiration of this permit will be an unpermitted discharge.

2. Change in Discharge

- a. The permittee shall apply for a permit modification at least 180 days in advance of any facility expansion, production increase, process change, or other action that could result in the discharge of additional pollutants or increase the quantity of a discharged pollutant such that existing permit limitations would be exceeded or that could result in an additional discharge point. This requirement applies to pollutants that are or that are not subject to discharge limitations in this permit. No new or increased discharge may begin until the Director has authorized it by issuance of a permit modification or a reissued permit.
- b. The permittee shall notify the Director as soon as it is known or there is reason to believe:
 - (1) That any activity has occurred or will occur which would result in the discharge on a routine or frequent basis, of any toxic pollutant which is not limited in this permit, if that discharge will exceed the highest of the following notification levels:
 - (a) one hundred micrograms per liter;
 - (b) two hundred micrograms per liter for acrolein and acrylonitrile; five hundred micrograms per liter for 2,4-dinitrophenol and for 2-methyl-4,6-dinitrophenol; and one milligram per liter for antimony;
 - (c) five times the maximum concentration value reported for that pollutant in the permit application; or
 - (2) That any activity has occurred or will occur which would result in any discharge, on a non-routine or infrequent basis, of a toxic pollutant which is not limited in the permit, if that discharge will exceed the highest of the following notification levels:
 - (a) five hundred micrograms per liter;
 - (b) one milligram per liter for antimony;
 - (c) ten times the maximum concentration value reported for that pollutant in the permit application.

3. Transfer of Permit

This permit may not be transferred or the name of the permittee changed without notice to the Director and subsequent modification or revocation and reissuance of the permit to identify the new permittee and to incorporate any other changes as may be required under the FWPCA or AWPCA. In the case of a change in name, ownership or control of the permittee's premises only, a request for permit modification in a format acceptable to the Director is required at least 30 days prior to the change. In the case of a change in name, ownership or control of the permittee's premises accompanied by a change or proposed change in effluent characteristics, a complete permit application is required to be submitted to the Director at least 180 days prior to the change. Whenever the Director is notified of a change in name, ownership or control, he may decide not to modify the existing permit and require the submission of a new permit application.

4. Permit Modification and Revocation

a. This permit may be modified or revoked and reissued, in whole or in part, during its term for cause, including but not limited to, the following:

- (1) If cause for termination under Provision II. E. 5. of this permit exists, the Director may choose to revoke and reissue this permit instead of terminating the permit;
- (2) If a request to transfer this permit has been received, the Director may decide to revoke and reissue or to modify the permit; or
- (3) If modification or revocation and reissuance is requested by the permittee and cause exists, the Director may grant the request.

b. This permit may be modified during its term for cause, including but not limited to, the following:

- (1) If cause for termination under Provision II. E. 5. of this permit exists, the Director may choose to modify this permit instead of terminating this permit;
- (2) There are material and substantial alterations or additions to the facility or activity generating wastewater which occurred after permit issuance which justify the application of permit conditions that are different or absent in the existing permit;
- (3) The Director has received new information that was not available at the time of permit issuance and that would have justified the application of different permit conditions at the time of issuance;
- (4) A new or revised requirement(s) of any applicable standard or limitation is promulgated under Sections 301(b)(2)(C), (D), (E), and (F), and 307(a)(2) of the FWPCA;
- (5) Errors in calculation of discharge limitations or typographical or clerical errors were made;
- (6) To the extent allowed by ADEM Administrative Code, Rule 335-6-6-.17, when the standards or regulations on which the permit was based have been changed by promulgation of amended standards or regulations or by judicial decision after the permit was issued;
- (7) To the extent allowed by ADEM Administrative Code, Rule 335-6-6-.17, permits may be modified to change compliance schedules;
- (8) To agree with a granted variance under 301(c), 301(g), 301(h), 301(k), or 316(a) of the FWPCA or for fundamentally different factors;
- (9) To incorporate an applicable 307(a) FWPCA toxic effluent standard or prohibition;
- (10) When required by the reopener conditions in this permit;
- (11) When required under 40 CFR 403.8(e) (compliance schedule for development of pretreatment program);
- (12) Upon failure of the state to notify, as required by Section 402(b)(3) of the FWPCA, another state whose waters may be affected by a discharge permitted by this permit;
- (13) When required to correct technical mistakes, such as errors in calculation, or mistaken interpretations of law made in determining permit conditions; or
- (14) When requested by the permittee and the Director determines that the modification has cause and will not result in a violation of federal or state law, regulations or rules.

5. Permit Termination

This permit may be terminated during its term for cause, including but not limited to, the following:

- a. Violation of any term or condition of this permit;
- b. The permittee's misrepresentation or failure to disclose fully all relevant facts in the permit application or during the permit issuance process or the permittee's misrepresentation of any relevant facts at any time;
- c. Materially false or inaccurate statements or information in the permit application or the permit;
- d. A change in any condition that requires either a temporary or permanent reduction or elimination of the permitted discharge;
- e. The permittee's discharge threatens human life or welfare or the maintenance of water quality standards;
- f. Permanent closure of the facility generating the wastewater permitted to be discharged by this permit or permanent cessation of wastewater discharge;
- g. New or revised requirements of any applicable standard or limitation that is promulgated under Sections 301(b)(2)(C), (D), (E), and (F), and 307(a)(2) of the FWPCA that the Director determines cannot be complied with by the permittee; or
- h. Any other cause allowed by the ADEM Administrative Code, Chapter 335-6-6.

6. Permit Suspension

This permit may be suspended during its term for noncompliance until the permittee has taken action(s) necessary to achieve compliance.

7. Request for Permit Action Does Not Stay Any Permit Requirement

The filing of a request by the permittee for modification, suspension or revocation of this permit, in whole or in part, does not stay any permit term or condition.

F. COMPLIANCE WITH TOXIC POLLUTANT STANDARD OR PROHIBITION

If any applicable effluent standard or prohibition (including any schedule of compliance specified in such effluent standard or prohibition) is established under Section 307(a) of the FWPCA, 33 U.S.C. Section 1317(a), for a toxic pollutant discharged by the permittee and such standard or prohibition is more stringent than any discharge limitation on the pollutant specified in Provision I. A. of this permit, or controls a pollutant not limited in Provision I. A. of this permit, this permit shall be modified to conform to the toxic pollutant effluent standard or prohibition and the permittee shall be notified of such modification. If this permit has not been modified to conform to the toxic pollutant effluent standard or prohibition before the effective date of such standard or prohibition, the permittee shall attain compliance with the requirements of the standard or prohibition within the time period required by the standard or prohibition and shall continue to comply with the standard or prohibition until this permit is modified or reissued.

G. DISCHARGE OF WASTEWATER GENERATED BY OTHERS

The discharge of wastewater, generated by any process, facility, or by any other means not under the operational control of the permittee or not identified in the application for this permit or not identified specifically in the description of an outfall in this permit is not authorized by this permit.

PART III OTHER PERMIT CONDITIONS

A. CIVIL AND CRIMINAL LIABILITY

1. Tampering

Any person who falsifies, tampers with, or knowingly renders inaccurate any monitoring device or method required to be maintained or performed under the permit shall, upon conviction, be subject to penalties as provided by the AWPCA.

2. False Statements

Any person who knowingly makes any false statement, representation, or certification in any record or other document submitted or required to be maintained under this permit, including monitoring reports or reports of compliance or noncompliance shall, upon conviction, be subject to penalties as provided by the AWPCA.

3. Permit Enforcement

a. Any NPDES permit issued or reissued by the Department is a permit for the purpose of the AWPCA and the FWPCA and as such any terms, conditions, or limitations of the permit are enforceable under state and federal law.

b. Any person required to have a NPDES permit pursuant to ADEM Administrative Code Chapter 335-6-6 and who discharges pollutants without said permit, who violates the conditions of said permit, who discharges pollutants in a manner not authorized by the permit, or who violates applicable orders of the Department or any applicable rule or standard of the Department, is subject to any one or combination of the following enforcement actions under applicable state statutes.

(1) An administrative order requiring abatement, compliance, mitigation, cessation, clean-up, and/or penalties;

(2) An action for damages;

(3) An action for injunctive relief; or

(4) An action for penalties.

c. If the permittee is not in compliance with the conditions of an expiring or expired permit the Director may choose to do any or all of the following provided the permittee has made a timely and complete application for reissuance of the permit:

(1) initiate enforcement action based upon the permit which has been continued;

(2) issue a notice of intent to deny the permit reissuance. If the permit is denied, the owner or operator would then be required to cease the activities authorized by the continued permit or be subject to enforcement action for operating without a permit;

(3) reissue the new permit with appropriate conditions; or

(4) take other actions authorized by these rules and AWPCA.

4. Relief from Liability

Except as provided in Provision II.C.1 (Bypass) and Provision II.C.2 (Upset), nothing in this permit shall be construed to relieve the permittee of civil or criminal liability under the AWPCA or FWPCA for noncompliance with any term or condition of this permit.

B. OIL AND HAZARDOUS SUBSTANCE LIABILITY

Nothing in this permit shall be construed to preclude the institution of any legal action or relieve the permittee from any responsibilities, liabilities or penalties to which the permittee is or may be subject under Section 311 of the FWPCA, 33 U.S.C. Section 1321.

C. PROPERTY AND OTHER RIGHTS

This permit does not convey any property rights in either real or personal property, or any exclusive privileges, nor does it authorize any injury to persons or property or invasion of other private rights, trespass, or any infringement of federal, state, or local laws or regulations, nor does it authorize or approve the construction of any physical structures or facilities or the undertaking of any work in any waters of the state or of the United States.

D. AVAILABILITY OF REPORTS

Except for data determined to be confidential under Code of Alabama 1975, Section 22-22-9(c), all reports prepared in accordance with the terms of this permit shall be available for public inspection at the offices of the Department. Effluent data shall not be considered confidential.

E. EXPIRATION OF PERMITS FOR NEW OR INCREASED DISCHARGES

1. If this permit was issued for a new discharger or new source, this permit shall expire eighteen months after the issuance date if construction of the facility has not begun during the eighteen-month period.
2. If this permit was issued or modified to allow the discharge of increased quantities of pollutants to accommodate the modification of an existing facility and if construction of this modification has not begun during the eighteen month period after issuance of this permit or permit modification, this permit shall be modified to reduce the quantities of pollutants allowed to be discharged to those levels that would have been allowed if the modification of the facility had not been planned.
3. Construction has begun when the owner or operator has:
 - a. begun, or caused to begin as part of a continuous on-site construction program:
 - (1) any placement, assembly, or installation of facilities or equipment; or
 - (2) significant site preparation work including clearing, excavation, or removal of existing buildings, structures, or facilities which is necessary for the placement, assembly, or installation of new source facilities or equipment; or
 - b. entered into a binding contractual obligation for the purpose of placement, assembly, or installation of facilities or equipment which are intended to be used in its operation within a reasonable time. Options to purchase or contracts which can be terminated or modified without substantial loss, and contracts for feasibility, engineering, and design studies do not constitute a contractual obligation under the paragraph. The entering into a lease with the State of Alabama for exploration and production of hydrocarbons shall also be considered beginning construction.

F. COMPLIANCE WITH WATER QUALITY STANDARDS

1. On the basis of the permittee's application, plans, or other available information, the Department has determined that compliance with the terms and conditions of this permit should assure compliance with the applicable water quality standards.
2. Compliance with permit terms and conditions notwithstanding, if the permittee's discharge(s) from point sources identified in Provision I. A. of this permit cause or contribute to a condition in contravention of state water quality standards, the Department may require abatement action to be taken by the permittee in emergency situations or modify the permit pursuant to the Department's Rules, or both.
3. If the Department determines, on the basis of a notice provided pursuant to this permit or any investigation, inspection or sampling, that a modification of this permit is necessary to assure maintenance of water quality standards or compliance with other provisions of the AWPCA or FWPCA, the Department may require such modification and, in cases of emergency, the Director may prohibit the discharge until the permit has been modified.

G. GROUNDWATER

Unless specifically authorized under this permit, this permit does not authorize the discharge of pollutants to groundwater. Should a threat of groundwater contamination occur, the Director may require groundwater monitoring to properly assess the degree of the problem and the Director may require that the Permittee undertake measures to abate any such discharge and/or contamination.

H. DEFINITIONS

1. Average monthly discharge limitation - means the highest allowable average of "daily discharges" over a calendar month, calculated as the sum of all "daily discharges" measured during a calendar month divided by the number of "daily discharges" measured during that month (zero discharge days shall not be included in the number of "daily discharges" measured and a less than detectable test result shall be treated as a concentration of zero if the most sensitive EPA approved method was used).
2. Average weekly discharge limitation - means the highest allowable average of "daily discharges" over a calendar week, calculated as the sum of all "daily discharges" measured during a calendar week divided by the number of "daily discharges" measured during that week (zero discharge days shall not be included in the number of "daily discharges" measured and a less than detectable test result shall be treated as a concentration of zero if the most sensitive EPA approved method was used).
3. Arithmetic Mean - means the summation of the individual values of any set of values divided by the number of individual values.

4. AWPCA - means the Alabama Water Pollution Control Act.
5. BOD – means the five-day measure of the pollutant parameter biochemical oxygen demand.
6. Bypass - means the intentional diversion of waste streams from any portion of a treatment facility.
7. CBOD – means the five-day measure of the pollutant parameter carbonaceous biochemical oxygen demand.
8. Daily discharge - means the discharge of a pollutant measured during any consecutive 24-hour period in accordance with the sample type and analytical methodology specified by the discharge permit.
9. Daily maximum - means the highest value of any individual sample result obtained during a day.
10. Daily minimum - means the lowest value of any individual sample result obtained during a day.
11. Day - means any consecutive 24-hour period.
12. Department - means the Alabama Department of Environmental Management.
13. Director - means the Director of the Department.
14. Discharge - means "[t]he addition, introduction, leaking, spilling or emitting of any sewage, industrial waste, pollutant or other wastes into waters of the state". Code of Alabama 1975, Section 22-22-1(b)(8).
15. Discharge Monitoring Report (DMR) - means the form approved by the Director to accomplish reporting requirements of an NPDES permit.
16. DO – means dissolved oxygen.
17. 8HC – means 8-hour composite sample, including any of the following:
 - a. The mixing of at least 5 equal volume samples collected at constant time intervals of not more than 2 hours over a period of not less than 8 hours between the hours of 6:00 a.m. and 6:00 p.m. If the sampling period exceeds 8 hours, sampling may be conducted beyond the 6:00 a.m. to 6:00 p.m. period.
 - b. A sample continuously collected at a constant rate over period of not less than 8 hours between the hours of 6:00 a.m. and 6:00 p.m. If the sampling period exceeds 8 hours, sampling may be conducted beyond the 6:00 a.m. to 6:00 p.m. period.
18. EPA - means the United States Environmental Protection Agency.
19. FC – means the pollutant parameter fecal coliform.
20. Flow – means the total volume of discharge in a 24-hour period.
21. FWPCA - means the Federal Water Pollution Control Act.
22. Geometric Mean – means the Nth root of the product of the individual values of any set of values where N is equal to the number of individual values. The geometric mean is equivalent to the antilog of the arithmetic mean of the logarithms of the individual values. For purposes of calculating the geometric mean, values of zero (0) shall be considered one (1).
23. Grab Sample – means a single influent or effluent portion which is not a composite sample. The sample(s) shall be collected at the period(s) most representative of the discharge.
24. Indirect Discharger – means a nondomestic discharger who discharges pollutants to a publicly owned treatment works or a privately owned treatment facility operated by another person.
25. Industrial User – means those industries identified in the Standard Industrial Classification manual, Bureau of the Budget 1967, as amended and supplemented, under the category "Division D – Manufacturing" and such other classes of significant waste producers as, by regulation, the Director deems appropriate.
26. MGD – means million gallons per day.
27. Monthly Average – means, other than for fecal coliform bacteria, the arithmetic mean of the entire composite or grab samples taken for the daily discharges collected in one month period. The monthly average for fecal coliform bacteria is the geometric mean of daily discharge samples collected in a one month period. The monthly average for flow is the arithmetic mean of all flow measurements taken in a one month period.

28. New Discharger – means a person, owning or operating any building, structure, facility or installation:
 - a. from which there is or may be a discharge of pollutants;
 - b. that did not commence the discharge of pollutants prior to August 13, 1979, and which is not a new source; and
 - c. which has never received a final effective NPDES permit for dischargers at that site.
29. NH3-N – means the pollutant parameter ammonia, measured as nitrogen.
30. Permit application - means forms and additional information that is required by ADEM Administrative Code Rule 335-6-6-.08 and applicable permit fees.
31. Point source - means "any discernible, confined and discrete conveyance, including but not limited to any pipe, channel, ditch, tunnel, conduit, well, discrete fissure, container, rolling stock, concentrated animal feeding operation, or vessel or other floating craft, . . . from which pollutants are or may be discharged." Section 502(14) of the FWPCA, 33 U.S.C. Section 1362(14).
32. Pollutant - includes for purposes of this permit, but is not limited to, those pollutants specified in Code of Alabama 1975, Section 22-22-1(b)(3) and those effluent characteristics specified in Provision I. A. of this permit.
33. Privately Owned Treatment Works – means any devices or system which is used to treat wastes from any facility whose operator is not the operator of the treatment works, and which is not a "POTW".
34. Publicly Owned Treatment Works – means a wastewater collection and treatment facility owned by the State, municipality, regional entity composed of two or more municipalities, or another entity created by the State or local authority for the purpose of collecting and treating municipal wastewater.
35. Receiving Stream – means the "waters" receiving a "discharge" from a "point source".
36. Severe property damage - means substantial physical damage to property, damage to the treatment facilities which causes them to become inoperable, or substantial and permanent loss of natural resources which can reasonably be expected to occur in the absence of a bypass. Severe property damage does not mean economic loss caused by delays in production.
37. Significant Source – means a source which discharges 0.025 MGD or more to a POTW or greater than five percent of the treatment work's capacity, or a source which is a primary industry as defined by the U.S. EPA or which discharges a priority or toxic pollutant.
38. Solvent – means any virgin, used or spent organic solvent(s) identified in the F-Listed wastes (F001 through F005) specified in 40 CFR 261.31 that is used for the purpose of solubilizing other materials.
39. TKN – means the pollutant parameter Total Kjeldahl Nitrogen.
40. TON – means the pollutant parameter Total Organic Nitrogen.
41. TRC – means Total Residual Chlorine.
42. TSS – means the pollutant parameter Total Suspended Solids.
43. 24HC – means 24-hour composite sample, including any of the following:
 - a. the mixing of at least 12 equal volume samples collected at constant time intervals of not more than 2 hours over a period of 24 hours;
 - b. a sample collected over a consecutive 24-hour period using an automatic sampler composite to one sample. As a minimum, samples shall be collected hourly and each shall be no more than one twenty-fourth (1/24) of the total sample volume collected; or
 - c. a sample collected over a consecutive 24-hour period using an automatic composite sampler composited proportional to flow.
44. Upset - means an exceptional incident in which there is an unintentional and temporary noncompliance with technology-based permit discharge limitations because of factors beyond the reasonable control of the permittee. An upset does not include noncompliance to the extent caused by operational error, improperly designed treatment facilities, inadequate treatment facilities, lack of preventive maintenance, or careless or improper operation.

45. Waters - means "[a]ll waters of any river, stream, watercourse, pond, lake, coastal, ground or surface water, wholly or partially within the state, natural or artificial. This does not include waters which are entirely confined and retained completely upon the property of a single individual, partnership or corporation unless such waters are used in interstate commerce." Code of Alabama 1975, Section 22-22-1(b)(2). Waters "include all navigable waters" as defined in Section 502(7) of the FWPCA, 22 U.S.C. Section 1362(7), which are within the State of Alabama.
46. Week - means the period beginning at twelve midnight Saturday and ending at twelve midnight the following Saturday.
47. Weekly (7-day and calendar week) Average -- is the arithmetic mean of all samples collected during a consecutive 7-day period or calendar week, whichever is applicable. The calendar week is defined as beginning on Sunday and ending on Saturday. Weekly averages shall be calculated for all calendar weeks with Saturdays in the month. If a calendar week overlaps two months (i.e., the Sunday is in one month and the Saturday in the following month), the weekly average calculated for the calendar week shall be included in the data for the month that contains the Saturday.

I. SEVERABILITY

The provisions of this permit are severable, and if any provision of this permit or the application of any provision of this permit to any circumstance is held invalid, the application of such provision to other circumstances, and the remainder of this permit, shall not be affected thereby.

PART IV ADDITIONAL REQUIREMENTS, CONDITIONS, AND LIMITATIONS

A. BEST MANAGEMENT PRACTICES (BMP) PLAN REQUIREMENTS

1. BMP Plan

The permittee shall develop and implement a Best Management Practices (BMP) Plan which prevents, or minimizes the potential for, the release of pollutants from ancillary activities, including material storage areas; plant site runoff; in-plant transfer, process and material handling areas; loading and unloading operations, and sludge and waste disposal areas, to the waters of the State through plant site runoff; spillage or leaks; sludge or waste disposal; or drainage from raw material storage.

2. Plan Content

The permittee shall prepare and implement a best management practices (BMP) plan, which shall:

- a. Establish specific objectives for the control of pollutants:
 - (1) Each facility component or system shall be examined for its potential for causing a release of significant amounts of pollutants to waters of the State due to equipment failure, improper operation, natural phenomena such as rain or snowfall, etc.
 - (2) Where experience indicates a reasonable potential for equipment failure (e.g., a tank overflow or leakage), natural condition (e.g. precipitation), or circumstances to result in significant amounts of pollutants reaching surface waters, the plan should include a prediction of the direction, rate of flow, and total quantity of pollutants which could be discharged from the facility as a result of each condition or circumstance.
- b. Establish specific best management practices to meet the objectives identified under paragraph a. of this section, addressing each component or system capable of causing a release of significant amounts of pollutants to the waters of the State, and identifying specific preventative or remedial measures to be implemented;
- c. Establish a program to identify and repair leaking equipment items and damaged containment structures, which may contribute to contaminated stormwater runoff. This program must include regular visual inspections of equipment, containment structures and of the facility in general to ensure that the BMP is continually implemented and effective;
- d. Prevent the spillage or loss of fluids, oil, grease, gasoline, etc. from vehicle and equipment maintenance activities and thereby prevent the contamination of stormwater from these substances;
- e. Prevent or minimize stormwater contact with material stored on site;
- f. Designate by position or name the person or persons responsible for the day to day implementation of the BMP;
- g. Provide for routine inspections, on days during which the facility is manned, of any structures that function to prevent stormwater pollution or to remove pollutants from stormwater and of the facility in general to ensure that the BMP is continually implemented and effective;
- h. Provide for the use and disposal of any material used to absorb spilled fluids that could contaminate stormwater;
- i. Develop a solvent management plan, if solvents are used on site. The solvent management plan shall include as a minimum lists of the solvents on site; the disposal method of solvents used instead of dumping, such as reclamation, contract hauling; and the procedures for assuring that solvents do not routinely spill or leak into the stormwater;
- j. Provide for the disposal of all used oils, hydraulic fluids, solvent degreasing material, etc. in accordance with good management practices and any applicable state or federal regulations;
- k. Include a diagram of the facility showing the locations where stormwater exits the facility, the locations of any structure or other mechanisms intended to prevent pollution of stormwater or to remove pollutants from stormwater, the locations of any collection and handling systems;

- l. Provide control sufficient to prevent or control pollution of stormwater by soil particles to the degree required to maintain compliance with the water quality standard for turbidity applicable to the waterbody(s) receiving discharge(s) under this permit;
 - m. Provide spill prevention, control, and/or management sufficient to prevent or minimize contaminated stormwater runoff. Any containment system used to implement this requirement shall be constructed of materials compatible with the substance(s) contained and shall prevent the contamination of groundwater. The containment system shall also be capable of retaining a volume equal to 110 percent of the capacity of the largest tank for which containment is provided;
 - n. Provide and maintain curbing, diking or other means of isolating process areas to the extent necessary to allow segregation and collection for treatment of contaminated stormwater from process areas;
 - o. Be reviewed by plant engineering staff and the plant manager; and
 - p. Bear the signature of the plant manager.
3. Compliance Schedule

The permittee shall have reviewed (and revised if necessary) and fully implemented the BMP plan as soon as practicable but no later than six months after the effective date of this permit.
 4. Department Review
 - a. When requested by the Director or his designee, the permittee shall make the BMP available for Department review.
 - b. The Director or his designee may notify the permittee at any time that the BMP is deficient and require correction of the deficiency.
 - c. The permittee shall correct any BMP deficiency identified by the Director or his designee within 30 days of receipt of notification and shall certify to the Department that the correction has been made and implemented.
 5. Administrative Procedures
 - a. A copy of the BMP shall be maintained at the facility and shall be available for inspection by representatives of the Department.
 - b. A log of the routine inspection required above shall be maintained at the facility and shall be available for inspection by representatives of the Department. The log shall contain records of all inspections performed for the last three years and each entry shall be signed by the person performing the inspection.
 - c. The permittee shall provide training for any personnel required to implement the BMP and shall retain documentation of such training at the facility. This documentation shall be available for inspection by representatives of the Department. Training shall be performed prior to the date that implementation of the BMP is required.
 - d. BMP Plan Modification. The permittee shall amend the BMP plan whenever there is a change in the facility or change in operation of the facility which materially increases the potential for the ancillary activities to result in a discharge of significant amounts of pollutants.
 - e. BMP Plan Review. The permittee shall complete a review and evaluation of the BMP plan at least once every three years from the date of preparation of the BMP plan. Documentation of the BMP Plan review and evaluation shall be signed and dated by the Plant Manager.

B. STORMWATER FLOW MEASUREMENT AND SAMPLING REQUIREMENTS

1. Stormwater Flow Measurement
 - a. All stormwater samples shall be collected from the discharge resulting from a storm event that is greater than 0.1 inches.

- b. The total volume of stormwater discharged for the event must be monitored, including the date and duration (in hours) and rainfall (in inches) for storm event(s) sampled. The duration between the storm event sampled and the end of the previous measurable (greater than 0.1 inch rainfall) storm event must be a minimum of 72 hours. This information must be recorded as part of the sampling procedure and records retained according to Part I.B. of this permit.
- c. The volume may be measured using flow measuring devices, or estimated based on a modification of the Rational Method using total depth of rainfall, the size of the drainage area serving a stormwater outfall, and an estimate of the runoff coefficient of the drainage area. This information must be recorded as part of the sampling procedure and records retained according to Part I.B. of this permit.

2. Stormwater Sampling

- a. A grab sample, if required by this permit, shall be taken during the first thirty minutes of the discharge (or as soon thereafter as practicable); and a flow-weighted composite sample, if required by this permit, shall be taken for the entire event or for the first three hours of the event.
- b. All test procedures will be in accordance with part I.B. of this permit.

ADEM PERMIT RATIONALE

PREPARED DATE: October 18, 2020

PREPARED BY: Rachel Lounsberry

Permittee Name: Alabama National Guard

Facility Name: Pelham Range

Permit Number: AL0083941

PERMIT IS INITIAL ISSUANCE

DISCHARGE SERIAL NUMBERS & DESCRIPTIONS:

DSN001-DSN002: Storm water and wash water from equipment maintenance and washing from UTES #1

DSN003-DSN006: Storm water from the Horizontal Engineering Training Area

DSN007-DSN010: Storm water from the Rock Crusher Training Area

INDUSTRIAL CATEGORY: NON-CATEGORICAL

MAJOR: N

STREAM INFORMATION:

Receiving Stream: DSN001 discharges to Cane Creek

Classification: Fish & Wildlife

River Basin: Coosa

7Q10: 0.0

303(d) List: Yes

Impairment: Priority Organics (PCBs) and Pathogens (E. coli)

TMDL: NO

Receiving Stream: DSN002- DSN010 discharge to Unnamed Tributary to Cane Creek

Classification: Fish & Wildlife

River Basin: Coosa

7Q10: 0.0

303(d) List: Yes (Cane Creek)

Impairment: Priority Organics (PCBs) and Pathogens (E. coli)

TMDL: NO

DISCUSSION:

Stormwater from UTES #1 is currently permitted under AL0073016. Stormwater from the Rock Crusher site was covered under ALG230051. The purpose of this permit is to combine the sites along with the Horizontal Engineering Training Area.

The Pelham Rifle Range has three individual locations on the range including the Unit Training Equipment Site (UTES) #1, The Horizontal Engineering Training Area, and the Rock Crusher site.

The UTES #1 facility stores, maintains, and repairs armored vehicles. Operations at the facility include vehicle, maintenance bay floor, and other equipment washing. All wash water flows through a settling basin and is treated by an oil water separator prior to discharge.

The Horizontal Engineering Training Area is a unit that the military uses to train soldiers to operate earth moving and other heavy equipment. No manufacturing activities are conducted at the site. The site has four retention ponds on site that receive all storm water runoff and rarely discharges.

The Rock Crusher Site will be used by soldiers to train to crush rock to make gravel for paving operations. Rocks will be purchased by a vendor, delivered to site and crushed.

ADEM Administrative Rule 335-6-10-.12 requires applicants to new or expanded discharges to Tier II waters demonstrate that the proposed discharge is necessary for important economic or social development in the area in which the waters are located. The application submitted by the facility is not for a discharge to a Tier II water body. Therefore, anti-degradation requirements do not apply

EPA has not promulgated specific guidelines for the discharges covered under the proposed permit. Proposed permit limits are based on Best Professional Judgment. The proposed frequencies are based on a review of site specific conditions and an evaluation of similar facilities.

001Q:

<u>Parameter</u>	<u>Monthly Avg Loading</u>	<u>Daily Max Loading</u>	<u>Daily Min Concentration</u>	<u>Monthly Avg Concentration</u>	<u>Daily Max Concentration</u>	<u>Sample Frequency</u>	<u>Sample Type</u>	<u>Basis*</u>
pH	-	-	6.0 S.U.	-	8.5 S.U.	Quarterly	Grab	BPJ
Solids, Total Suspended	-	-	-	-	REPORT mg/l	Quarterly	Grab	BPJ
Oil & Grease	-	-	-	-	15 mg/l	Quarterly	Grab	BPJ
Phosphorus, Total (As P)	-	-	-	-	REPORT mg/l	Quarterly	Grab	BPJ
Toluene	-	-	-	-	8723 ug/l	Quarterly	Grab	WQBEL
Benzene	-	-	-	-	15.4 ug/l	Quarterly	Grab	WQBEL
Naphthalene	-	-	-	-	620 ug/l	Quarterly	Grab	WQBEL
Flow, In Conduit or Thru Treatment Plant	REPORT MGD	REPORT MGD	-	-	-	Quarterly	Instantaneous	BPJ
Chlorine, Total Residual	-	-	-	0.011 mg/l	0.019 mg/l	Quarterly	Grab	WQBEL
Xylene	-	-	-	-	REPORT mg/l	Quarterly	Grab	BPJ

002Q:

<u>Parameter</u>	<u>Monthly Avg Loading</u>	<u>Daily Max Loading</u>	<u>Daily Min Concentration</u>	<u>Monthly Avg Concentration</u>	<u>Daily Max Concentration</u>	<u>Sample Frequency</u>	<u>Sample Type</u>	<u>Basis*</u>
pH	-	-	6.0 S.U.	-	8.5 S.U.	Quarterly	Grab	BPJ
Solids, Total Suspended	-	-	-	-	REPORT mg/l	Quarterly	Grab	BPJ
Oil & Grease	-	-	-	-	15 mg/l	Quarterly	Grab	BPJ
Phosphorus, Total (As P)	-	-	-	-	REPORT mg/l	Quarterly	Grab	BPJ
Toluene	-	-	-	-	8723 ug/l	Quarterly	Grab	WQBEL
Benzene	-	-	-	-	15.4 ug/l	Quarterly	Grab	WQBEL
Naphthalene	-	-	-	-	620 ug/l	Quarterly	Grab	WQBEL
Flow, In Conduit or Thru Treatment Plant	REPORT MGD	REPORT MGD	-	-	-	Quarterly	Instantaneous	BPJ
Chlorine, Total Residual	-	-	-	0.011 mg/l	0.019 mg/l	Quarterly	Grab	WQBEL
Xylene	-	-	-	-	REPORT mg/l	Quarterly	Grab	BPJ

003S:

<u>Parameter</u>	<u>Monthly Avg Loading</u>	<u>Daily Max Loading</u>	<u>Daily Min Concentration</u>	<u>Monthly Avg Concentration</u>	<u>Daily Max Concentration</u>	<u>Sample Frequency</u>	<u>Sample Type</u>	<u>Basis*</u>
pH	-	-	REPORT S.U.	-	REPORT S.U.	Semi-Annually	Grab	BPJ
Solids, Total Suspended	-	-	-	-	REPORT mg/l	Semi-Annually	Grab	BPJ
Oil & Grease	-	-	-	-	15 mg/l	Semi-Annually	Grab	BPJ
Flow, In Conduit or Thru Treatment Plant	REPORT MGD	REPORT MGD	-	-	-	Semi-Annually	Estimate	BPJ

004S:

<u>Parameter</u>	<u>Monthly Avg Loading</u>	<u>Daily Max Loading</u>	<u>Daily Min Concentration</u>	<u>Monthly Avg Concentration</u>	<u>Daily Max Concentration</u>	<u>Sample Frequency</u>	<u>Sample Type</u>	<u>Basis*</u>
pH	-	-	REPORT S.U.	-	REPORT S.U.	Semi-Annually	Grab	BPJ
Solids, Total Suspended	-	-	-	-	REPORT mg/l	Semi-Annually	Grab	BPJ
Oil & Grease	-	-	-	-	15 mg/l	Semi-Annually	Grab	BPJ
Flow, In Conduit or Thru Treatment Plant	REPORT MGD	REPORT MGD	-	-	-	Semi-Annually	Estimate	BPJ

005S:

<u>Parameter</u>	<u>Monthly Avg Loading</u>	<u>Daily Max Loading</u>	<u>Daily Min Concentration</u>	<u>Monthly Avg Concentration</u>	<u>Daily Max Concentration</u>	<u>Sample Frequency</u>	<u>Sample Type</u>	<u>Basis*</u>
pH	-	-	REPORT S.U.	-	REPORT S.U.	Semi-Annually	Grab	BPJ
Solids, Total Suspended	-	-	-	-	REPORT mg/l	Semi-Annually	Grab	BPJ
Oil & Grease	-	-	-	-	15 mg/l	Semi-Annually	Grab	BPJ
Flow, In Conduit or Thru Treatment Plant	REPORT MGD	REPORT MGD	-	-	-	Semi-Annually	Estimate	BPJ

006S:

<u>Parameter</u>	<u>Monthly Avg Loading</u>	<u>Daily Max Loading</u>	<u>Daily Min Concentration</u>	<u>Monthly Avg Concentration</u>	<u>Daily Max Concentration</u>	<u>Sample Frequency</u>	<u>Sample Type</u>	<u>Basis*</u>
pH	-	-	REPORT S.U.	-	REPORT S.U.	Semi-Annually	Grab	BPJ
Solids, Total Suspended	-	-	-	-	REPORT mg/l	Semi-Annually	Grab	BPJ
Oil & Grease	-	-	-	-	15 mg/l	Semi-Annually	Grab	BPJ
Flow, In Conduit or Thru Treatment Plant	REPORT MGD	REPORT MGD	-	-	-	Semi-Annually	Estimate	BPJ

007S:

<u>Parameter</u>	<u>Monthly Avg Loading</u>	<u>Daily Max Loading</u>	<u>Daily Min Concentration</u>	<u>Monthly Avg Concentration</u>	<u>Daily Max Concentration</u>	<u>Sample Frequency</u>	<u>Sample Type</u>	<u>Basis*</u>
pH	-	-	REPORT S.U.	-	REPORT S.U.	Semi-Annually	Grab	BPJ
Solids, Total Suspended	-	-	-	-	REPORT mg/l	Semi-Annually	Grab	BPJ
Oil & Grease	-	-	-	-	15 mg/l	Semi-Annually	Grab	BPJ
Flow, In Conduit or Thru Treatment Plant	REPORT MGD	REPORT MGD	-	-	-	Semi-Annually	Estimate	BPJ

008S:

<u>Parameter</u>	<u>Monthly Avg Loading</u>	<u>Daily Max Loading</u>	<u>Daily Min Concentration</u>	<u>Monthly Avg Concentration</u>	<u>Daily Max Concentration</u>	<u>Sample Frequency</u>	<u>Sample Type</u>	<u>Basis*</u>
pH	-	-	REPORT S.U.	-	REPORT S.U.	Semi-Annually	Grab	BPJ
Solids, Total Suspended	-	-	-	-	REPORT mg/l	Semi-Annually	Grab	BPJ
Oil & Grease	-	-	-	-	15 mg/l	Semi-Annually	Grab	BPJ
Flow, In Conduit or Thru Treatment Plant	REPORT MGD	REPORT MGD	-	-	-	Semi-Annually	Estimate	BPJ

009S:

<u>Parameter</u>	<u>Monthly Avg Loading</u>	<u>Daily Max Loading</u>	<u>Daily Min Concentration</u>	<u>Monthly Avg Concentration</u>	<u>Daily Max Concentration</u>	<u>Sample Frequency</u>	<u>Sample Type</u>	<u>Basis*</u>
pH	-	-	REPORT S.U.	-	REPORT S.U.	Semi-Annually	Grab	BPJ
Solids, Total Suspended	-	-	-	-	REPORT mg/l	Semi-Annually	Grab	BPJ
Oil & Grease	-	-	-	-	15 mg/l	Semi-Annually	Grab	BPJ
Flow, In Conduit or Thru Treatment Plant	REPORT MGD	REPORT MGD	-	-	-	Semi-Annually	Estimate	BPJ

010S:

<u>Parameter</u>	<u>Monthly Avg Loading</u>	<u>Daily Max Loading</u>	<u>Daily Min Concentration</u>	<u>Monthly Avg Concentration</u>	<u>Daily Max Concentration</u>	<u>Sample Frequency</u>	<u>Sample Type</u>	<u>Basis*</u>
pH	-	-	REPORT S.U.	-	REPORT S.U.	Semi-Annually	Grab	BPJ
Solids, Total Suspended	-	-	-	-	REPORT mg/l	Semi-Annually	Grab	BPJ
Oil & Grease	-	-	-	-	15 mg/l	Semi-Annually	Grab	BPJ
Flow, In Conduit or Thru Treatment Plant	REPORT MGD	REPORT MGD	-	-	-	Semi-Annually	Estimate	BPJ

*Basis for Permit Limitation

- BPJ – Best Professional Judgment
- QBEL – Water Quality Based Effluent Limits
- EGL – Federal Effluent Guideline Limitations
- 303(d) – 303(d) List of Impaired Waters
- TMDL – Total Maximum Daily Load Requirements

Discussion

DSN001 and DSN002

Best Professional Judgment (BPJ)

The parameters of concern for this facility are based on the parameters of concern listed in EPA form 2D and from the current permit. These parameters are consistent with similar facilities in the state and have been proven to be reflective of the operations at this facility. The parameters with specific limits are discussed below:

Oil & Grease

The daily maximum limit for Oil and Grease should prevent the occurrence of a visible sheen in the stream and has been shown to be achievable through the use of proper BMPs.

pH

ADEM Administrative Code, Division 6 Regulations, specifically 335-6-10-.09(5) – Specific Water Quality for Fish and Wildlife classified streams states: “Sewage, industrial waste or other wastes shall not cause the pH to deviate more than one unit from then normal or natural pH, nor be less than 6.0, nor greater than 8.5 standard units.”

Benzene, Toluene, Ethylbenzene, Xylene, Naphthalene

Monitoring for benzene, toluene, ethylbenzene, xylene and naphthalene is proposed due to the potential presence in vehicle wash water. The proposed benzene, toluene, and ethylbenzene limitations are based on fish consumption human health criteria. The proposed naphthalene limitations are proposed based on EPA recommended human health criteria. These limitations should be protective during the most conservative conditions and seem to be consistent with the General Storm Water Permit for vehicle storage, maintenance, and washing.

Total Residual Chlorine

Due to the presence of chlorinated wash water, total residual chlorine shall be monitored. The Total Residual Chlorine (TRC) limits are based on the United States Environmental Protection Agency's (EPA) recommended water quality standard which considers the available dilution in the receiving stream. Because the receiving stream has a 7Q10 flow of 0 cfs, the limits are a monthly average of 0.011 mg/l and a daily maximum 0.19 mg/l. In accordance with a letter dated August 11, 1998 from EPA Headquarters and a 1991 memorandum from EPA Region 4's Environmental Services Division (ESD), due to testing and method detection limitations, a Total Residual Chlorine measurement below 0.05 mg/L shall be considered below detection for compliance purposes

Total Phosphorus and Total Suspended Solids

The information gathered from the permittee's monitoring will be useful in evaluating the impact on the receiving stream. Should at any time it be determined by the Department that in-stream water quality standards are being contravened, then the permit will be reopened.

EPA Form 2C

In accordance with the instructions for EPA Form 2D, a completed EPA Form 2C shall be submitted no later than two years after the proposed facility begins discharging.

DSN003-DSN0010

Best Professional Judgment (BPJ)

The parameters of concern for this facility are based on the parameters of concern listed in EPA form 2F and from the current permit. These parameters are consistent with similar facilities in the state and have been proven to be reflective of the operations at this facility. The parameters with specific limits are discussed below:

pH:

The pH in the stormwater runoff from this site is not expected to adversely affect the receiving streams; however, quarterly monitoring will be continued to measure the effectiveness of the BMP measures utilized by the facility.

Oil & Grease

The daily maximum limit for Oil and Grease should prevent the occurrence of a visible sheen in the stream and has been shown to be achievable through the use of proper BMPs.

Total Suspended Solids

The permit includes the monitoring of total suspended solids to evaluate BMP effectiveness.

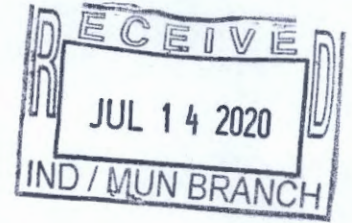
303(d) List of Impaired Waters/Total Maximum Daily Load (TMDL)

The unnamed tributary to Cane Creek is not listed as being impaired on the Alabama 303(d) list, and there are no developed/final TMDL's associated with it. However, Cane Creek is on the 303(d) list for Pathogens and Priority Organics (PCBs). The discharge of this facility is not expected to contribute to the listed impairments.

Best Management Practices (BMPs) are believed to be the most effective way to control the contamination of stormwater from areas of industrial activities. This facility is required to maintain a BMP plan. The requirements of the BMP plan call for minimization of stormwater contact with waste materials, products and by-products, and for prevention of spills or loss of fluids from equipment maintenance activities. The effectiveness of the BMPs will be measured through the monitoring of the pollutants of concern.



STATE MILITARY DEPARTMENT
JOINT FORCES HEADQUARTERS ALABAMA NATIONAL GUARD
1720 CONGRESSMAN WILLIAM L. DICKINSON DRIVE
P. O. BOX 3711
MONTGOMERY, AL 36109-0711



14 July 2020

Mr. Scott Ramsey
ADEM
Industrial Permits Section
Water Division
1400 Coliseum Blvd
Montgomery, AL 36110-2400



SUBJECT: Industrial Permit for Pelham Range

Dear Mr. Ramsey,

Attached you will find the National Pollutant Discharge Elimination System (NPDES) permit application for the Alabama Army National Guard's Pelham Range Training Area. Pelham Range is located in Alexandria, AL in Calhoun County. As we previously discussed, the NPDES permit for Pelham Range will cover multiple sites located throughout the range. These areas will include the UTES #1 facility, the Horizontal Engineering Training Area, and the Rock Crusher Site.

The permit application prepared by JMR+H PC is enclosed. The permit application fee of \$5615.00 has already been submitted to ADEM.

Additional questions or comments should be addressed to Mr. Brad Curvin at (334) 523-4027 or emailed to Bradley.n.curvin.nfg@mail.mil.

Sincerely,

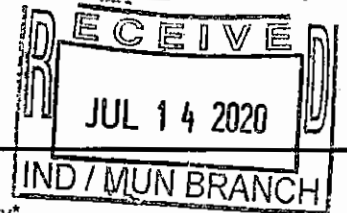
Gregory S. Hayes
State Military Environmental Manager
Joint Force Headquarters
Alabama Army National Guard

Enclosure

ALABAMA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT (ADEM)
NPDES INDIVIDUAL PERMIT APPLICATION
SUPPLEMENTARY INFORMATION FOR INDUSTRIAL FACILITIES

Instructions: This form should be used to submit the required supplementary information for an application for an NPDES individual permit for industrial facilities. The completed application should be submitted to ADEM in duplicate. If insufficient space is available to address any item, please continue on an attached sheet of paper. Please mark "N/A" in the appropriate box when an item is not applicable to the applicant. Please type or print legibly in blue or black ink. Mail the completed application to:

ADEM-Water Division
Industrial Section
P O Box 301463
Montgomery, AL 36130-1463



PURPOSE OF THIS APPLICATION

- ☐ Initial Permit Application for New Facility*
☐ Modification of Existing Permit
☐ Revocation & Reissuance of Existing Permit

- ☒ Initial Permit Application for Existing Facility*
☐ Reissuance of Existing Permit

* An application for participation in the ADEM's Electronic Environmental (E2) Reporting must be submitted to allow permittee to electronically submit reports as required.

SECTION A - GENERAL INFORMATION

1. Facility Name: Pelham Range

a. Operator Name: Alabama Army National Guard

b. Is the operator identified in A.1.a, the owner of the facility? ☐ Yes ☒ No

If no, provide name and address of the operator and submit information indicating the operator's scope of responsibility for the facility.

The United States Corps of Engineers

The Alabama Army National Guard is responsible party for the entire Pelham Range

2. NPDES Permit Number: AL _____ (not applicable if initial permit application)

3. SID Permit Number (if applicable): IU _____

4. NPDES General Permit Number (if applicable): ALG _____

5. Facility Physical Location: (Attach a map with location marked; street, route no. or other specific identifier)

Street: Gate 3 Road (Refer to Attachment E)

City: Alexandria County: Calhoun State: AL Zip: 36250

Facility Location (Front Gate): Latitude: 33 degrees 43'43"N Longitude: 85 degrees 53'23"W

6. Facility Mailing Address: P.O. Box 5280 Building 1060

City: Ft. McClellan County: Calhoun State: AL Zip: 36205

7. Responsible Official (as described on the last page of this application):

Name and Title: LTC Robert J. Griggs, Training Center Director

Address: P.O. Box 5280 Building 1060

City: Ft. McClellan State: AL Zip: 36205

Phone Number: 256-847-4101 Email Address: robert.j.griggs8.mil@mail.mil

8. Designated Facility Contact:

Name and Title: Brad Curvin, Environmental Compliance Supervisor

Phone Number: 334-523-4027 Email Address: bradley.n.curvin.nfg@mail.mil

9. Designated Discharge Monitoring Report (DMR) Contact:

Name and Title: Brad Curvin, Environmental Compliance Supervisor

Phone Number: 334-523-4027

Email Address: bradley.n.curvin.nfg@mail.mil

10. Type of Business Entity:

- ☐ Corporation ☐ General Partnership ☐ Limited Partnership ☐ Limited Liability Company ☐ Sole Proprietorship
☒ Other (Please Specify) Government/Military

11. Complete this section if the Applicant's business entity is a Corporation

a) Location of Incorporation:

Address: NA

City: NA County: NA State: NA Zip: NA

b) Parent Corporation of Applicant:

Name: NA

Address: NA

City: NA State: NA Zip: NA

c) Subsidiary Corporation(s) of Applicant:

Name: NA

Address: NA

City: NA State: NA Zip: NA

d) Corporate Officers:

Name: NA

Address: N/A

City: NA State: NA Zip: NA

Name: NA

Address: NA

City: NA State: NA Zip: NA

e) Agent designated by the corporation for purposes of service:

Name: NA

Address: NA

City: NA State: NA Zip: NA

12. If the Applicant's business entity is a Partnership, please list the general partners.

Name: NA

Address: NA

City: NA State: NA Zip: NA

Name: NA

Address: NA

City: NA State: NA Zip: NA

13. If the Applicant's business entity is a Proprietorship, please enter the proprietor's information.

Name: NA
Address: NA
City: NA State: NA Zip: NA

14. Permit numbers for Applicant's previously issued NPDES Permits and identification of any other State of Alabama Environmental Permits presently held by the Applicant, its parent corporation, or subsidiary corporations within the State of Alabama:

<u>Permit Name</u>	<u>Permit Number</u>	<u>Held By</u>
UTES #1 Pelham Range	AL0073016	Alabama Army National Guard
FT. Rucker - UTES #2	AL0056502	Alabama Army National Guard

15. Identify all Administrative Complaints, Notices of Violation, Directives, Administrative Orders, or Litigation concerning water pollution, if any, against the Applicant, its parent corporation or subsidiary corporations within the State of Alabama within the past five years (attach additional sheets if necessary):

<u>Facility Name</u>	<u>Permit Number</u>	<u>Type of Action</u>	<u>Date of Action</u>
N/A			
N/A			
N/A			
N/A			
N/A			

SECTION B - BUSINESS ACTIVITY

1. Indicate applicable Standard Industrial Classification (SIC) Codes for all processes. If more than one applies, list in order of importance:

- 9711
- 7538
- 1629
- 1429
-
-

2. If your facility conducts or will be conducting any of the processes listed below (regardless of whether they generate wastewater, waste sludge, or hazardous waste), place a check beside the category of business activity (check all that apply):

Industrial Categories

- | | |
|--|---|
| <input type="checkbox"/> Aluminum Forming
<input type="checkbox"/> Asbestos Manufacturing
<input type="checkbox"/> Battery Manufacturing
<input type="checkbox"/> Can Making
<input type="checkbox"/> Canned and Preserved Fruit and Vegetables
<input type="checkbox"/> Canned and Preserved Seafood
<input type="checkbox"/> Cement Manufacturing
<input type="checkbox"/> Centralized Waste Treatment
<input type="checkbox"/> Carbon Black
<input type="checkbox"/> Coal Mining
<input type="checkbox"/> Coil Coating
<input type="checkbox"/> Copper Forming
<input type="checkbox"/> Electric and Electronic Components Manufacturing
<input type="checkbox"/> Electroplating
<input type="checkbox"/> Explosives Manufacturing
<input type="checkbox"/> Feedlots
<input type="checkbox"/> Ferroalloy Manufacturing
<input type="checkbox"/> Fertilizer Manufacturing
<input type="checkbox"/> Foundries (Metal Molding and Casting)
<input type="checkbox"/> Glass Manufacturing
<input type="checkbox"/> Grain Mills
<input type="checkbox"/> Gum and Wood Chemicals Manufacturing
<input type="checkbox"/> Inorganic Chemicals
<input type="checkbox"/> Iron and Steel
<input type="checkbox"/> Leather Tanning and Finishing
<input type="checkbox"/> Metal Finishing
<input type="checkbox"/> Meat Products | <input type="checkbox"/> Metal Molding and Casting
<input type="checkbox"/> Metal Products
<input type="checkbox"/> Nonferrous Metals Forming
<input type="checkbox"/> Nonferrous Metals Manufacturing
<input type="checkbox"/> Oil and Gas Extraction
<input type="checkbox"/> Organic Chemicals Manufacturing
<input type="checkbox"/> Paint and Ink Formulating
<input type="checkbox"/> Paving and Roofing Manufacturing
<input type="checkbox"/> Pesticides Manufacturing
<input type="checkbox"/> Petroleum Refining
<input type="checkbox"/> Phosphate Manufacturing
<input type="checkbox"/> Photographic
<input type="checkbox"/> Pharmaceutical
<input type="checkbox"/> Plastic & Synthetic Materials
<input type="checkbox"/> Plastics Processing Manufacturing
<input type="checkbox"/> Porcelain Enamel
<input type="checkbox"/> Pulp, Paper, and Fiberboard Manufacturing
<input type="checkbox"/> Rubber
<input type="checkbox"/> Soap and Detergent Manufacturing
<input type="checkbox"/> Steam and Electric
<input type="checkbox"/> Sugar Processing
<input type="checkbox"/> Textile Mills
<input type="checkbox"/> Timber Products
<input type="checkbox"/> Transportation Equipment Cleaning
<input type="checkbox"/> Waste Combustion
<input type="checkbox"/> Other (specify) _____ |
|--|---|

A facility with processes inclusive in these business areas may be covered by Environmental Protection (EPA) categorical standards. These facilities are termed "categorical users" and should skip to question 2 of Section C.

3. Give a brief description of all operations at this facility including primary products or services (attach additional sheets if necessary):

See Attachment A

SECTION C – WASTEWATER DISCHARGE INFORMATION

Facilities that checked activities in B.2 and are considered Categorical Industrial Users should skip to C.2 of this section.

1. **For Non-Categorical Users Only:** Provide wastewater flows for each of the processes or proposed processes. Using the process flow schematic (Figure 1), enter the description that corresponds to each process. **(The flow schematic should include all treatment units as well as monitoring and discharge points).** [New facilities should provide estimates for each discharge.]

Process Description	Last 12 Months (gals/day) Highest Month Avg. Flow	Highest Flow Year of Last 5 (gals/day) Monthly Avg. Flow	Discharge Type (batch, continuous, intermittent)
Vehicle Washing	7000 gal/day	5000 gal/day	Intermittent

If batch discharge occurs or will occur, indicate: [new facilities may estimate.]

- a. Number of batch discharges: _____ per day
- b. Average discharge per batch: _____ (GPD)
- c. Time of batch discharges _____ at _____
(days of week) (hours of day)
- d. Flow rate: _____ gallons/minute
- e. Percent of total discharge: _____

Non-Process Discharges (e.g. non-contact cooling water)	Last 12 Months (gals/day) Highest Month Avg. Flow	Highest Flow Year of Last 5 (gals/day) Monthly Avg. Flow
_____	_____	_____
_____	_____	_____

2. Complete this Section only if you are subject to Categorical Standards and plan to directly discharge the associated wastewater to a water of the State. If Categorical wastewater is discharged exclusively via an indirect discharge to a public or privately-owned treatment works, check "Yes" in the appropriate space below and proceed directly to part 2.c.

☐ Yes

For Categorical Users: Provide the wastewater discharge flows or production (whichever is applicable by the effluent guidelines) for each of your processes or proposed processes. Using the process flow schematic (Figure 1, pg 14), enter the description that corresponds to each process. [New facilities should provide estimates for each discharge.]

2a.

Regulated Process	Applicable Category	Applicable Subpart	Type of Discharge Flow (batch, continuous, intermittent)
N/A	N/A	N/A	N/A
_____	_____	_____	_____
_____	_____	_____	_____

2b.

Process Description	Last 12 Months (gals/day), (lbs/day), etc. Highest Month Average*	Highest Flow Year of Last 5 (gals/day), (lbs/day), etc. Monthly Average*	Discharge Type (batch, continuous, intermittent)
N/A	N/A	N/A	N/A
_____	_____	_____	_____
_____	_____	_____	_____

* Reported values should be expressed in units of the applicable Federal production-based standard. For example, flow (MGD), production (pounds per day), etc.

If batch discharge occurs or will occur, indicate: [new facilities may estimate.]

- a. Number of batch discharges: _____ per day
- b. Average discharge per batch: _____ (GPD)
- c. Time of batch discharges _____ at _____
(days of week) (hours of day)
- d. Flow rate: _____ gallons/minute
- e. Percent of total discharge: _____

2c.

Non categorical Process Description	Last 12 Months (gals/day) Highest Month Avg. Flow	Highest Flow Year of Last 5 (gals/day) Monthly Avg. Flow	Discharge Type (batch, continuous, intermittent)

If batch discharge occurs or will occur, indicate: [new facilities may estimate.]

- a. Number of batch discharges: _____ per day
- b. Average discharge per batch: _____ (GPD)
- c. Time of batch discharges _____ at _____
(days of week) (hours of day)
- d. Flow rate: _____ gallons/minute
- e. Percent of total discharge: _____

2d.

Non-Process Discharges (e.g. non-contact cooling water)	Last 12 Months (gals/day) Highest Month Avg. Flow	Highest Flow Year of Last 5 (gals/day) Monthly Avg. Flow

All Applicants must complete C.3 – C.6.

3. Do you share an outfall with another facility? ☐ Yes ☒ No (If no, continue to C.4)

For each shared outfall, provide the following:

Applicant's Outfall No.	Name of Other Permittee/Facility	NPDES Permit No.	Where is sample collected by Applicant?

4. Do you have, or plan to have, automatic sampling equipment or continuous wastewater flow metering equipment at this facility?

Current:	Flow Metering	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
	Sampling Equipment	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> N/A
Planned:	Flow Metering	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
	Sampling Equipment	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> N/A

If so, please attach a schematic diagram of the sewer system indicating the present or future location of this equipment and describe the equipment below:

5. Are any process changes or expansions planned during the next three years that could alter wastewater volumes or characteristics?
☐ Yes ☒ No (If no, continue to C.6)

Briefly describe these changes and their anticipated effects on the wastewater volume and characteristics:

6. List the trade name and chemical composition of all biocides and corrosion inhibitors used:

Trade Name	Chemical Composition
N/A	

For each biocide and/or corrosion inhibitor used, please include the following information:

- (1) 96-hour median tolerance limit data for organisms representative of the biota of the waterway into which the discharge will ultimately reach,
- (2) quantities to be used,
- (3) frequencies of use,
- (4) proposed discharge concentrations, and
- (5) EPA registration number, if applicable

SECTION D – WATER SUPPLY

Water Sources (check as many as are applicable):

- ☐ Private Well ☒ Surface Water
☒ Municipal Water Utility (Specify City): ☐ Other (Specify):

IF MORE THAN ONE WELL OR SURFACE INTAKE, PROVIDE DATA FOR EACH ON AN ATTACHMENT

City: _____ MGD* Well: _____ MGD* Well Depth: _____ Ft. Latitude: _____ Longitude: _____

Surface Intake Volume: 0.00005 MGD* Intake Elevation in Relation to Bottom: _____ Ft.

Intake Elevation: 575 Ft. Latitude: 33.727554 Longitude: -85.904547

Name of Surface Water Source: Cane Creek

* MGD – Million Gallons per Day

Cooling Water Intake Structure Information

Complete D.1 and D.2 if your water supply is provided by an outside source and not by an onsite water intake structure? (e.g., another industry, municipality, etc...)

1. Does the provider of your source water operate a surface water intake? Yes ☐ No ☒
(If yes, continue, if no, go to Section E.)

a) Name of Provider: See Attachment B b) Location of Provider: _____

c) Latitude: _____ Longitude: _____

2. Is the provider a public water system (defined as a system which provides water to the public for human consumption or which provides only treated water, not raw water)? ☒ Yes ☐ No (If yes, go to Section E, if no, continue.)

Only to be completed if you have a cooling water intake structure or the provider of your water supply uses an intake structure and does not treat the raw water.

3. Is any water withdrawn from the source water used for cooling? ☐ Yes ☒ No

4. Using the average monthly measurements over any 12-month period, approximately what percentage of water withdrawn is used exclusively for cooling purposes? _____%

5. Does the cooling water consist of treated effluent that would otherwise be discharged? ☐ Yes ☐ No
(If yes, go to Section E, if no, complete D.6 – D.17)

6. a. Is the cooling water used in a once-through cooling system? ☐ Yes ☐ No

- b. Is the cooling water used in a closed cycle cooling system? ☐ Yes ☐ No

7. When was the intake installed? _____
(Please provide dates for all major construction/installation of intake components including screens)
8. What is the maximum intake volume? _____
(maximum pumping capacity in gallons per day)
9. What is the average intake volume? _____
(average intake pump rate in gallons per day average in any 30-day period)
10. What is the actual intake flow (AIF) as defined in 40 CFR §125.92(a)? _____ MGD
11. How is the intake operated? (e.g., continuously, intermittently, batch) _____
12. What is the mesh size of the screen on your intake? _____
13. What is the intake screen flow-through area? _____
14. What is the through-screen design intake flow velocity? _____ ft/sec
15. What is the through-screen actual velocity (in ft/sec)? _____ ft/sec
16. What is the mechanism for cleaning the screen? (e.g., does it rotate for cleaning) _____
17. Do you have any additional fish detraction technology on your intake? ☐ Yes ☐ No
18. Have there been any studies to determine the impact of the intake on aquatic organisms? ☐ Yes ☐ No (If yes, please provide.)
19. Attach a site map showing the location of the water intake in relation to the facility, shoreline, water depth, etc.

SECTION E – WASTE STORAGE AND DISPOSAL INFORMATION

Provide a description of the location of all sites involved in the storage of solids or liquids that could be accidentally discharged to a water of the state, either directly or indirectly via such avenues as storm water drainage, municipal wastewater systems, etc., which are located at the facility for which the NPDES application is being made. Where possible, the location should be noted on a map and included with this application:

Description of Waste	Description of Storage Location
Waste Oil	AST
Fuel	AST

Provide a description of the location of the ultimate disposal sites of solid or liquid waste by-products (such as sludges) from any wastewater treatment system located at the facility.

Description of Waste	Quantity (lbs/day)	Disposal Method*
OWS Sludge	< 1 lb. / Day	Off-Site Facility per Contract

*Indicate which wastes identified above are disposed of at an off-site treatment facility and which are disposed of on-site. If any wastes are sent to an off-site centralized waste treatment facility, identify the waste and the facility.

SECTION F – COASTAL ZONE INFORMATION

Is the discharge(s) located within the 10-foot elevation contour and within the limits of Mobile or Baldwin County? ☐ Yes ☒ No
If yes, complete items F.1 – F.12:

1. Does the project require new construction? No Construction ☐ Yes ☒ No
2. Will the project be a source of new air emissions? N/A ☐ Yes ☒ No

- | | Yes | No |
|--|--------------------------|-------------------------------------|
| 3. Does the project involve dredging and/or filling of a wetland area or water way? <u>N/A</u> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| If Yes, has the Corps of Engineers (COE) permit been received? <u>N/A</u> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| COE Project No. <u>N/A</u> | | |
| 4. Does the project involve wetlands and/or submersed grassbeds? <u>N/A</u> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 5. Are oyster reefs located near the project site? <u>N/A</u> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| If Yes, include a map showing project and discharge location with respect to oyster reefs | | |
| 6. Does the project involve the site development, construction and operation of an energy facility as defined in ADEM Admin. Code r. 335-8-1-.02(bb)? <u>N/A</u> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 7. Does the project involve mitigation of shoreline or coastal area erosion? <u>N/A</u> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 8. Does the project involve construction on beaches or dune areas? <u>N/A</u> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 9. Will the project interfere with public access to coastal waters? <u>N/A</u> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 10. Does the project lie within the 100-year floodplain? <u>N/A</u> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 11. Does the project involve the registration, sale, use, or application of pesticides? <u>N/A</u> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 12. Does the project propose or require construction of a new well or to alter an existing groundwater well to pump more than 50 gallons per day (GPD)? <u>N/A</u> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| If yes, has the applicable permit for groundwater recovery or for groundwater well installation been obtained? <u>N/A</u> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

SECTION G – ANTI-DEGRADATION EVALUATION

In accordance with 40 CFR §131.12 and the ADEM Admin. Code r. 335-6-10-.04 for anti-degradation, the following information must be provided, if applicable. It is the applicant's responsibility to demonstrate the social and economic importance of the proposed activity. If further information is required to make this demonstration, attach additional sheets to the application.

- Is this a new or increased discharge that began after April 3, 1991? ☐ Yes ☒ No
If yes, complete G.2 below. If no, go to Section H.
- Has an Anti-Degradation Analysis been previously conducted and submitted to the Department for the new or increased discharge referenced in G.1? ☐ Yes ☒ No
If yes, do not complete this section. If no, and the discharge is to a Tier II waterbody as defined in ADEM Admin. Code r. 335-6-10-.12(4), complete G.2.A – G.2.F below and ADEM Forms 311 and 313 (attached). ADEM Form 313 must be provided for each alternative considered technically viable.

Information required for new or increased discharges to high quality waters:

A. What environmental or public health problem will the discharger be correcting?

B. How much will the discharger be increasing employment (at its existing facility or as the result of locating a new facility)?

C. How much reduction in employment will the discharger be avoiding?

D. How much additional state or local taxes will the discharger be paying?

E. What public service to the community will the discharger be providing?

F. What economic or social benefit will the discharger be providing to the community?

SECTION H – EPA Application Forms

All Applicants must submit EPA permit application forms. More than one application form may be required from a facility depending on the number and types of discharges or outfalls found. The EPA application forms are found on the Department's website at <http://www.adem.alabama.gov/programs/water/waterforms.cnt>. The EPA application forms must be submitted in duplicate as follows:

1. All applicants must submit Form 1.
2. Applicants for existing industrial facilities (including manufacturing facilities, commercial facilities, mining activities, and silvicultural activities) which discharge process wastewater must submit Form 2C.
3. Applicants for new industrial facilities which propose to discharge process wastewater must submit Form 2D.
4. Applicants for new and existing industrial facilities which discharge only non-process wastewater (i.e., non-contact cooling water and/or sanitary wastewater) must submit Form 2E.
5. Applicants for new and existing facilities whose discharge is composed entirely of storm water associated with industrial activity must submit Form 2F, unless exempted by § 122.26(c)(1)(ii). If the discharge is composed of storm water and non-storm water, the applicant must also submit Forms 2C, 2D, and/or 2E, as appropriate (in addition to Form 2F).

SECTION I – ENGINEERING REPORT/BMP PLAN REQUIREMENTS

See ADEM 335-6-6-.08(i) & (j)

SECTION J – RECEIVING WATERS

Outfall No.	Receiving Water(s)	303(d) Segment?		Included in TMDL?*	
	See Attachment C	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
		<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
		<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
		<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
		<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No

*If a TMDL Compliance Schedule is requested, the following should be attached as supporting documentation:

- (1) Justification for the requested Compliance Schedule (e.g. time for design and installation of control equipment, etc.);
- (2) Monitoring results for the pollutant(s) of concern which have not previously been submitted to the Department (sample collection dates, analytical results (mass and concentration), methods utilized, MDL/ML, etc. should be submitted as available);
- (3) Requested interim limitations, if applicable;
- (4) Date of final compliance with the TMDL limitations; and,
- (5) Any other additional information available to support requested compliance schedule.

SECTION K – APPLICATION CERTIFICATION

The information contained in this form must be certified by a responsible official as defined in ADEM Administrative Code r. 335-6-6-.09 "signatories to permit applications and reports" (see below).

"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."

Signature of Responsible Official: 

Date Signed: 6/30/2020

Name and Title: LTC Robert J. Griggs, Training Center Director

If the Responsible Official signing this application is not identified in Section A.7, provide the following information:

Mailing Address: P.O. Box 5280 Building 1060

City: Ft McClellan

State: AL

Zip: 36205

Phone Number: (256) 847-4101

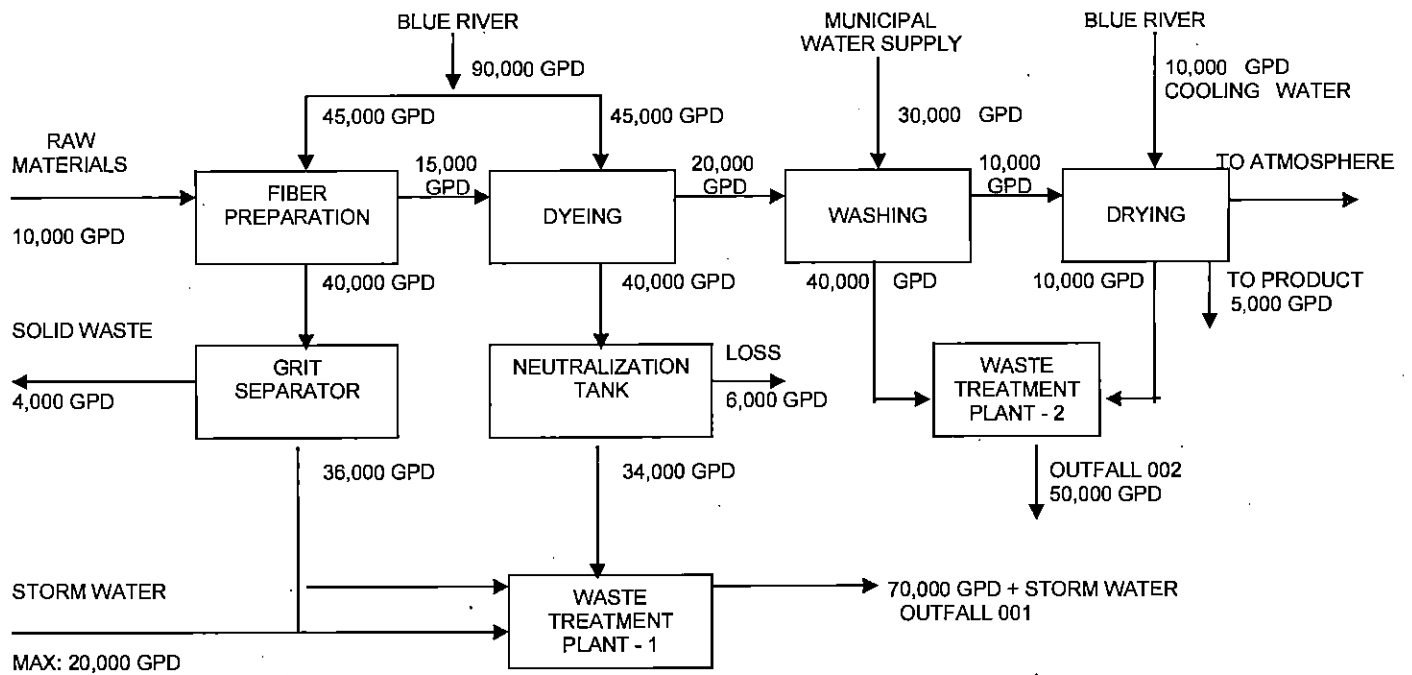
Email Address: robert.j.griggs8.mil@mail.mil

335-6-6-.09 SIGNATORIES TO PERMIT APPLICATIONS AND REPORTS.

(1) The application for an NPDES permit shall be signed by a responsible official, as indicated below:

- (a) In the case of a corporation, by a principal executive officer of at least the level of vice president, or a manager assigned or delegated in accordance with corporate procedures, with such delegation submitted in writing if required by the Department, who is responsible for manufacturing, production, or operating facilities and is authorized to make management decisions which govern the operation of the regulated facility;
- (b) In the case of a partnership, by a general partner;
- (c) In the case of a sole proprietorship, by the proprietor; or
- (d) In the case of a municipal, state, federal, or other public entity, by either a principal executive officer, or ranking elected official.

FIGURE 1

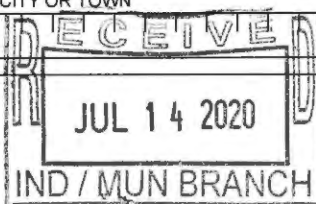


SCHEMATIC OF WATER FLOW
BROWN MILLS INC
CITY, COUNTY, STATE

Form Approved. OMB No. 2040-0086.

EPA Form 3510-1 (8-90)

CONTINUE ON REVERSE



CONTINUED FROM THE FRONT

VII. SIC CODES (4-digit, in order of priority)

A. FIRST										B. SECOND									
C	7									C	7								
(specify)										(specify)									
15	16									15	16								
C. THIRD										D. FOURTH									
C	7									C	7								
(specify)										(specify)									
15	16									15	16								

VIII. OPERATOR INFORMATION

A. NAME															B. Is the name listed in Item VIII-A also the owner?					
C	8														<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO					
Alabama Army National Guard																				
15	16									55	56									

C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box: if "Other," specify)

F = FEDERAL	M = PUBLIC (other than federal or state)	S	(specify)	D. PHONE (area code & no.)
S = STATE	O = OTHER (specify)			A (334) 450-0557
P = PRIVATE		56		15 16 18 19 21 22 28

E. STREET OR P.O. BOX

1720 Congressman Dickinson Drive																									
28										55															

F. CITY OR TOWN

C	B									G. STATE	H. ZIP CODE	IX. INDIAN LAND				
Montgomery										AL	36109	Is the facility located on Indian lands?				
15	16									40	41	42	43	51	52	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water)										D. PSD (Air Emissions from Proposed Sources)									
C	T	I								C	T	I							
9	N									9	P								
AL0073016																			
15	16	17	18							15	16	17	18						
B. UIC (Underground Injection of Fluids)										E. OTHER (specify)									
C	T	I								C	T	I							
9	U									9									
										(specify)									
15	16	17	18							15	16	17	18						
C. RCRA (Hazardous Wastes)										E. OTHER (specify)									
C	T	I								C	T	I							
9	R									9									
										(specify)									
15	16	17	18							15	16	17	18						

XI. MAP

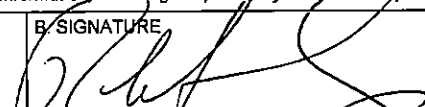
Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers, and other surface water bodies in the map area. See instructions for precise requirements.

XII. NATURE OF BUSINESS (provide a brief description)

See Attachment A: Operational Description
See Attachments E - K: Maps

XIII. CERTIFICATION (see instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME & OFFICIAL TITLE (type or print)	B. SIGNATURE	C. DATE SIGNED
LTC Robert J. Griggs, Training Center Director		6/30/2020

COMMENTS FOR OFFICIAL USE ONLY

C										C									
15	16									55									

FORM
2F
NPDES



Application for Permit to Discharge Storm Water Discharges Associated with Industrial Activity

Public reporting burden for this application is estimated to average 28.6 hours per application, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate, any other aspect of this collection of information, or suggestions for improving this form, including suggestions which may increase or reduce this burden to: Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 1200 Pennsylvania Avenue, NW, Washington, DC 20460, or Director, Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.

A. Outfall Number (list)	B. Latitude			C. Longitude			D. Receiving Water (name)
DC001	33.00	43.00	39.00	-85.00	54.00	17.00	Cane Creek
DC002	33.00	43.00	41.20	-85.00	53.00	57.60	U.T. to Cane Creek
DC003	33.00	43.00	49.90	-85.00	56.00	31.80	U.T. to Cane Creek
DC004	33.00	43.00	40.40	-85.00	56.00	22.80	U.T. to Cane Creek
DC005	33.00	43.00	45.00	-85.00	56.00	19.00	U.T. to Cane Creek
DC006	33.00	43.00	48.00	-85.00	56.00	11.00	U.T. to Cane Creek
DC007	33.00	44.00	22.03	-85.00	59.00	29.00	U.T. to Cane Creek
DC008	33.00	44.00	21.00	-85.00	59.00	29.00	U.T. to Cane Creek
DC009	33.00	44.00	18.00	-85.00	59.00	22.00	U.T. to Cane Creek
DC010	33.00	44.00	40.40	-85.00	59.00	20.00	U.T. to Cane Creek

[illegible]

Attach a site map showing topography (or indicating the outline of drainage areas served by the outfalls(s) covered in the application if a topographic map is unavailable) depicting the facility including: each of its intake and discharge structures; the drainage area of each storm water outfall; paved areas and buildings within the drainage area of each storm water outfall, each known past or present areas used for outdoor storage of disposal of significant materials, each existing structural control measure to reduce pollutants in storm water runoff, materials loading and access areas, areas where pesticides, herbicides, soil conditioners and fertilizers are applied; each of its hazardous waste treatment, storage or disposal units (including each area not required to have a RCRA permit which is used for accumulating hazardous waste under 40 CFR 262.34); each well where fluids from the facility are injected underground; springs, and other surface water bodies which received storm water discharges from the facility.

Continued from the Front

IV. Narrative Description of Pollutant Sources

A. For each outfall, provide an estimate of the area (include units) of impervious surfaces (including paved areas and building roofs) drained to the outfall, and an estimate of the total surface area drained by the outfall.

Outfall Number	Area of Impervious Surface (provide units)	Total Area Drained (provide units)	Outfall Number	Area of Impervious Surface (provide units)	Total Area Drained (provide units)
DC001	107,644 SY		DC007-10	16,414 SY	
DC002	INACTIVE				
DC003-6	2,827 SY				

B. Provide a narrative description of significant materials that are currently or in the past three years have been treated, stored or disposed in a manner to allow exposure to storm water; method of treatment, storage, or disposal; past and present materials management practices employed to minimize contact by these materials with storm water runoff; materials loading and access areas, and the location, manner, and frequency in which pesticides, herbicides, soil conditioners, and fertilizers are applied.

DC001 STORM WATER DISCHARGE / OIL WATER SEPARATOR HAS BEEN RENOVATED AND PIPED DIRECTLY TO CREEK
 DC002 INACTIVE
 DC003 - DC006 STORM WATER DISCHARGE
 DC007 - DC010 STORM WATER DISCHARGE

C. For each outfall, provide the location and a description of existing structural and nonstructural control measures to reduce pollutants in storm water runoff; and a description of the treatment the storm water receives, including the schedule and type of maintenance for control and treatment measures and the ultimate disposal of any solid or fluid wastes other than by discharge.

Outfall Number	Treatment	List Codes from Table 2F-1
DC001	SETTLING BASINS / OIL WATER SEPARATOR	
DC002	INACTIVE	
DC003-6	SEDIMENT PONDS	
DC007-10	SEDIMENT PONDS	

V. Nonstormwater Discharges

A. I certify under penalty of law that the outfall(s) covered by this application have been tested or evaluated for the presence of nonstormwater discharges, and that all nonstormwater discharged from these outfall(s) are identified in either an accompanying Form 2C or Form 2E application for the outfall.

Name and Official Title (type or print)	Signature	Date Signed
LTC Robert J. Griggs, T.C. Dir.		6/30/2020

B. Provide a description of the method used, the date of any testing, and the onsite drainage points that were directly observed during a test.

VI. Significant Leaks or Spills

Provide existing information regarding the history of significant leaks or spills of toxic or hazardous pollutants at the facility in the last three years, including the approximate date and location of the spill or leak, and the type and amount of material released.

NONE

Continued from Page 2

EPA ID Number (copy from Item 1 of Form 1)

VII. Discharge Information

A, B, C, & D: See instructions before proceeding. Complete one set of tables for each outfall. Annotate the outfall number in the space provided.
Table VII-A, VII-B, VII-C are included on separate sheets numbers VII-1 and VII-2.

E. Potential discharges not covered by analysis – is any toxic pollutant listed in table 2F-2, 2F-3, or 2F-4, a substance or a component of a substance which you currently use or manufacture as an intermediate or final product or byproduct?

☐ Yes (list all such pollutants below)☒ No (go to Section IX)

REFER TO ATTACHMENT D - DISCHARGE INFORMATION

VIII. Biological Toxicity Testing Data

Do you have any knowledge or reason to believe that any biological test for acute or chronic toxicity has been made on any of your discharges or on a receiving water in relation to your discharge within the last 3 years?

☐ Yes (list all such pollutants below)☒ No (go to Section IX)**IX. Contract Analysis Information**

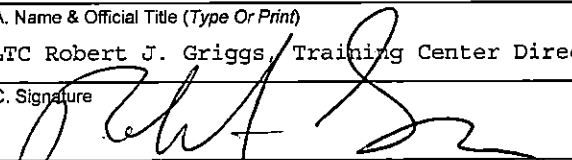
Were any of the analyses reported in Item VII performed by a contract laboratory or consulting firm?

☐ Yes (list the name, address, and telephone number of, and pollutants analyzed by, each such laboratory or firm below)☒ No (go to Section X)

A. Name	B. Address	C. Area Code & Phone No.	D. Pollutants Analyzed

X. Certification

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.

A. Name & Official Title (Type Or Print) LTC Robert J. Griggs, Training Center Director	B. Area Code and Phone No. (256) 847-4101
C. Signature 	D. Date Signed 6/30/2020

Part A – You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.

Part B – List each pollutant that is limited in an effluent guideline which the facility is subject to or any pollutant listed in the facility's NPDES permit for its process wastewater (if the facility is operating under an existing NPDES permit). Complete one table for each outfall. See the instructions for additional details and requirements.

Continue on Reverse

Continued from the Front

Part C - List each pollutant shown in Table 2F-2, 2F-3, and 2F-4 that you know or have reason to believe is present. See the instructions for additional details and requirements. Complete one table for each outfall.

[illegible]

Part D – Provide data for the storm event(s) which resulted in the maximum values for the flow weighted composite sample.

1. Date of Storm Event	2. Duration of Storm Event (in minutes)	3. Total rainfall during storm event (in inches)	4. Number of hours between beginning of storm measured and end of previous measurable rain event	5. Maximum flow rate during rain event (gallons/minute or specify units)	6. Total flow from rain event (gallons or specify units)

7. Provide a description of the method of flow measurement or estimate.

May 22, 2019

Form 1, SECTION XI

Form 187, SECTION B.3

Give a brief description of all operations at this facility including primary products or services:

Pelham Range is a military training area used by members of the Army and National Guard for mission training. The Site contains a wide array of training operations for the military.

The Pelham Range Master NPDES Plan will be an individual NPDES permit that will need to incorporate three sites located on Pelham Range. The three sites that currently need to be covered under the master plan are the UTES #1 facility, The Horizontal Engineering Training Area, and the Rock Crusher site.

The UTES #1 facility stores, maintains, and repairs armored vehicles for various Alabama Army National Guard units. Other ancillary equipment is also maintained and repaired at the facility. No manufacturing activities are conducted at the UTES #1 facility. Operations conducted at the facility include vehicle, maintenance bay floor and other equipment washing. Vehicles and equipment are washed with high pressure water only. Vehicle washing depends on military activity and funding, but typically occurs twice a week throughout the year. Shop floors are usually cleaned one day a week. All wash water flows through a settling basin and is treated by an oil water separator prior to discharging.

The Horizontal Engineering Training Area is a unit that the military uses to train soldiers to operate earth moving and other heavy equipment. The engineering school is operated during the spring and summer months and additionally six to eight weekends a year for drill operations. No manufacturing activities are conducted at the site. The site has four retention ponds on site that receive all storm water run-off and very rarely discharge unless there is a heavy rain event.

The Rock Crusher Site is currently under construction. The site, once completed, will be used by soldiers to train to crush rock to make gravel for paving operations. Rock will be purchased by a vendor, delivered to site and crushed. Currently there are no plans to use any water during this process; however, there is a pump located by the pond that could pump make-up water to the rock crusher. All storm water will flow through the discharge points. The site is estimated to be used eight to twelve weeks a year.

ADEM Permit Form 187, Section D - ATTACHMENT B

May 27, 2020

Form 187, Section D – Water Supply

1. Name of Provider: Anniston Water and Sewer Board

☐ Private Well ☐ Surface Water ☒ Municipal Water Utility (Specify City) ☐ Other (Specify)

Location of Provider: Anniston, Alabama Latitude: 33° 39' 24.9" N Longitude: 85° 49' 46.2" W

Name of Surface Water Source:

Coldwater 10 million gal/day and Hillabee 32 million gal/day for a combined 24-36 million gal/day based on an Environmental Assessment that was done for the county

2. Name of Provider: Calhoun County Water Authority

☐ Private Well ☐ Surface Water ☒ Municipal Water Utility (Specify City) ☐ Other (Specify)

Location of Provider: Alexandria, Alabama Latitude: 33° 46' 19.7" N Longitude: 33° 46' 19.7" N

Name of Surface Water Source:

3 Springs: Reads Mill, Websters Chapel, and Seven Springs – Fort Payne Chert & Knox Group

Three groundwater wells: Choccolocco, Possum Trot, and Ohatchee

Purchase water from Oxford Water Works - Source: Knox Group

Purchase water from Anniston Water and Sewer Board - Source: Source Flow is from Coldwater 10 million gal/day and Hillabee 32 million gal/day for a combined 24-36 million gal/day based on an Environmental Assessment that was done for the county

ADEM Permit Form 187, Section J and Form 2E, Section I / Section D - ATTACHMENT C

**Form 187, Section J. Receiving Waters
Form 2E: I. Receiving Waters and Table IV. Effluent Characteristics**

Form 187, Section J. RECEIVING WATERS and Form 2E, Section I. RECEIVING WATERS

For this outfall, list the latitude and longitude, and name of the receiving water(s).

Outfall Number (List)	Latitude			Direction	Longitude			Direction	Receiving Water (Name)	Hydrocategory
	Deg	Min	Sec		Deg	Min	Sec			
DC001	33	43	39	N	85	54	17	W	Cane Creek	Has water at all times of the year
DC002	33	43	41.2	N	85	53	57.6	W	Inactive	N/A
DC003	33	43	49.9	N	85	56	31.8	W	UT to Cane Creek	Flow ceases for weeks or months each year
DC004	33	43	40.4	N	85	56	22.8	W	UT to Cane Creek	Flow ceases for weeks or months each year
DC005	33	43	45	N	85	56	19	W	UT to Cane Creek	Flow ceases for weeks or months each year
DC006	33	43	48	N	85	56	11	W	UT to Cane Creek	Flow ceases for weeks or months each year
DC007	33	44	22.03	N	85	59	29	W	UT to Cane Creek	Flow ceases for weeks or months each year
DC008	33	44	21	N	85	59	29	W	UT to Cane Creek	Flow ceases for weeks or months each year
DC009	33	44	18	N	85	59	22	W	UT to Cane Creek	Flow ceases for weeks or months each year
DC010	33	44	40.4	N	85	59	20	W	UT to Cane Creek	Flow ceases for weeks or months each year

Form 2E: IV. EFFLUENT CHARACTERISTICS

UTES #1	
Pollutant/Parameter	Avg Daily Value
BOD	5.6
TSS	14
Oil and Grease	BDL
Ammonia	BDL
Flow	none past 24 hours
pH	6.42
Chlorine	0.05
Temp Winter	16.5 C

Horizontal Engineering Training Area	
Pollutant/Parameter	Avg Daily Value
BOD	19.3
TSS	1660
Oil and Grease	3.8
Ammonia	BDL
Flow	No Flow/grab sample
pH	4.45
Temp Winter	20.9 C

• Use HET data for Rock Crusher outfalls

ADEM Permit Form 2F, Section VII - ATTACHMENT D

**Form 2F
VII. Discharge Information**

Form 2F: VII DISCHARGE INFORMATION

For this outfall, list the latitude and longitude, and name of the receiving water(s).

Outfall Number (List)	Latitude			Direction	Longitude			Direction	Receiving Water (Name)	Hydrocategory
	Deg	Min	Sec		Deg	Min	Sec			
DC001	33	43	39	N	85	54	17	W	Cane Creek	Has water at all times of the year
DC002	33	43	41.2	N	85	53	57.6	W	Inactive	N/A
DC003	33	43	49.9	N	85	56	31.8	W	UT to Cane Creek	Flow ceases for weeks or months each year
DC004	33	43	40.4	N	85	56	22.8	W	UT to Cane Creek	Flow ceases for weeks or months each year
DC005	33	43	45	N	85	56	19	W	UT to Cane Creek	Flow ceases for weeks or months each year
DC006	33	43	48	N	85	56	11	W	UT to Cane Creek	Flow ceases for weeks or months each year
DC007	33	44	22.03	N	85	59	29	W	UT to Cane Creek	Flow ceases for weeks or months each year
DC008	33	44	21	N	85	59	29	W	UT to Cane Creek	Flow ceases for weeks or months each year
DC009	33	44	18	N	85	59	22	W	UT to Cane Creek	Flow ceases for weeks or months each year
DC010	33	44	40.4	N	85	59	20	W	UT to Cane Creek	Flow ceases for weeks or months each year

Form 2F: VI. DISCHARGE INFORMATION

UTES #1	
<u>Pollutant/Parameter</u>	<u>Avg Daily Value</u>
BOD	5.6
TSS	14
Oil and Grease	BDL
Ammonia	BDL
Flow	none past 24 hours
pH	6.42
Chlorine	0.05
Temp Winter	16.5 C

Horizontal Engineering Training Area	
<u>Pollutant/Parameter</u>	<u>Avg Daily Value</u>
BOD	19.3
TSS	1660
Oil and Grease	3.8
Ammonia	BDL
Flow	No Flow/grab sample
pH	4.45
Temp Winter	20.9 C

• Use HET data for Rock Crusher outfalls



Location Map



State Map



County Map



LEGEND	
★	Site Location
■	Entrance Gate
	Gate 3 Road
	33°43'43.4"N, 85°53'23.4"W

ATTACHMENT E

Alabama Army National Guard
ADEM Storm Water Permit
Pelham Range, Alexandria, Alabama





Location Map



Installation Map



County Map



OF = OUTFALL
DC = DISCHARGE
EO = EMERGENCY
OVERFLOW

LEGEND

- ★ Site Location
- Entrance Gate
Gate 3 Road
33°43'43.4"N, 85°53'23.4"W

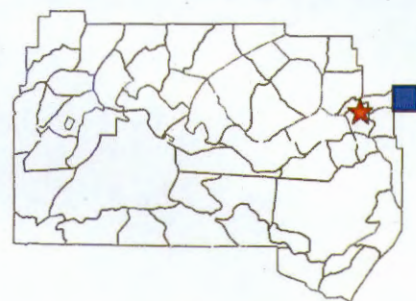
**UTES - 1 MILE BOUNDARY
SITE 1 - ATTACHMENT F**

Alabama Army National Guard
ADEM Storm Water Permit
Pelham Range, Alexandria, Alabama





Location Map



Installation Map



County Map



OF = OUTFALL
DC = DISCHARGE
EO = EMERGENCY
OVERFLOW

★	Site Location
■	Entrance Gate
	Gate 3 Road
	33°43'43.4"N,85°53'23.4"W

UTES
SITE 1 - ATTACHMENT G

Alabama Army National Guard
ADEM Storm Water Permit
Pelham Range, Alexandria, Alabama





Location Map



Installation Map



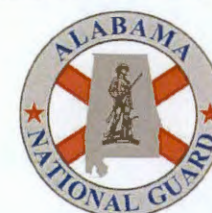
County Map



★	Site Location
■	Entrance Gate
	Gate 3 Road
	$33^{\circ}43'43.4''\text{N}, 85^{\circ}53'23.4''\text{W}$

HORIZONTAL ENG TRAINING SITE - 1 MILE BOUNDARY
SITE 2 - ATTACHMENT H

Alabama Army National Guard
ADEM Storm Water Permit
Pelham Range, Alexandria, Alabama





Location Map



Installation Map



County Map



DC = DISCHARGE

★	Site Location
■	Entrance Gate
	Gate 3 Road
	33°43'43.4"N, 85°53'23.4"W

HORIZONTAL ENG TRAINING SITE
SITE 2 - ATTACHMENT I

Alabama Army National Guard
ADEM Storm Water Permit
Pelham Range, Alexandria, Alabama





Installation Map



County Map



★	Site Location
■	Entrance Gate
	Gate 3 Road
	33°43'43.4"N, 85°53'23.4"W

ROCK CRUSHER - 1 MILE BOUNDARY
SITE 3 - ATTACHMENT J

Alabama Army National Guard
ADEM Storm Water Permit
Pelham Range, Alexandria, Alabama





Location Map



Installation Map



County Map



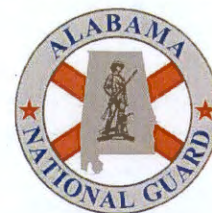
OF = OUTFALL
DC = DISCHARGE
EO = EMERGENCY
OVERFLOW


★ **Site Location**

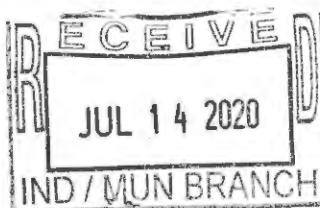
■ **Entrance Gate**
Gate 3 Road
33°43'43.4"N, 85°53'23.4"W

ROCK CRUSHER
SITE 3 - ATTACHMENT K

Alabama Army National Guard
ADEM Storm Water Permit
Pelham Range, Alexandria, Alabama



EPA Identification Number		NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004
Form 2D NPDES		U.S. Environmental Protection Agency Application for NPDES Permit to Discharge Wastewater NEW MANUFACTURING, COMMERCIAL, MINING, AND SILVICULTURAL OPERATIONS THAT HAVE NOT YET COMMENCED DISCHARGE OF PROCESS WASTEWATER		
SECTION 1. EXPECTED OUTFALL LOCATION (40 CFR 122.21(k)(1))				
Outfall Location	1.1	Provide information on each of the facility's outfalls in the table below.		
	Outfall Number	Receiving Water Name	Latitude	Longitude
		Attachment A	° ' "	° ' "
			° ' "	° ' "
			° ' "	° ' "
SECTION 2. EXPECTED DISCHARGE DATE (40 CFR 122.21(k)(2))				
Expected Discharge Date	2.1	Month	Day	Year
		January	1	2020
SECTION 3. AVERAGE FLOWS AND TREATMENT (40 CFR 122.21(k)(3)(i))				
Average Flows and Treatment	3.1	For each outfall identified under Item 1.1, provide average flow and treatment information. Add additional sheets as necessary.		
	Outfall Number			
	Operations Contributing to Flow			
	Operation		Average Flow	
	See Attachment B		mgd	
			mgd	
			mgd	
			mgd	
			mgd	
	Treatment Units			
	Description (include size, flow rate through each treatment unit, retention time, etc.)		Code from Exhibit 2D-1	Final Disposal of Solid or Liquid Wastes Other Than by Discharge
	See Attachment B			



EPA Identification Number		NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004
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Average Flows and Treatment Continued	3.1 Cont.	**Outfall Number** _____		
		Operations Contributing to Flow		
		Operation		Average Flow
		See Attachment B		mgd
				mgd
				mgd
				mgd
				mgd
		Treatment Units		
		Description (include size, flow rate through each treatment unit, retention time, etc.)	Code from Exhibit 2D-1	Final Disposal of Solid or Liquid Wastes Other Than by Discharge
		See Attachment B		
		Outfall Number _____		
		Operations Contributing to Flow		
		Operation		Average Flow
		See Attachment B		mgd
				mgd
				mgd
				mgd
				mgd
Treatment Units				
Description (include size, flow rate through each treatment unit, retention time, etc.)	Code from Exhibit 2D-1	Final Disposal of Solid or Liquid Wastes Other Than by Discharge		
See Attachment B				

EPA Identification Number	NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004
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SECTION 4. LINE DRAWING (40 CFR 122.21(k)(3)(ii))

Line Drawing	4.1	Have you attached a line drawing to this application that shows the water flow through your facility with a water balance? (See instructions for drawing requirements. See Exhibit 2D-2 at end of instructions for example.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
---------------------	-----	---

SECTION 5. INTERMITTENT OR SEASONAL FLOWS (40 CFR 122.21(k)(3)(iii))

Intermittent or Seasonal Flows	5.1	Except for stormwater runoff, leaks, or spills, are any expected discharges described in Sections 1 and 3 intermittent or seasonal? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Section 6.						
	5.2	Provide information on intermittent or seasonal flows for each applicable outfall. Attach additional pages, if necessary.						
		Outfall Number	Operations (list)	Frequency		Rate and Volume		Duration
				Average Days/Week	Average Months/Year	Maximum Daily Discharge	Maximum Total Volume	
		DC001 (Only)	Vehicle	2 days/week	12 months/year	0.0124 mgd	15,000 gallons	1 days
				days/week	months/year	mgd	gallons	days
				days/week	months/year	mgd	gallons	days
		Outfall Number	Operations (list)	Frequency		Rate and Volume		Duration
				Average Days/Week	Average Months/Year	Maximum Daily Discharge	Maximum Total Volume	
		DC003 - DC010 (Exempt)		days/week	months/year	mgd	gallons	days
				days/week	months/year	mgd	gallons	days
				days/week	months/year	mgd	gallons	days
		Outfall Number	Operations (list)	Frequency		Rate and Volume		Duration
				Average Days/Week	Average Months/Year	Maximum Daily Discharge	Maximum Total Volume	
				days/week	months/year	mgd	gallons	days
			days/week	months/year	mgd	gallons	days	
			days/week	months/year	mgd	gallons	days	

SECTION 6. PRODUCTION (40 CFR 122.21(k)(4))

Production	6.1	Do any effluent limitation guidelines (ELGs) promulgated by EPA under CWA Section 304 apply to your facility? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Section 7.		
	6.2	Provide the following information on applicable ELGs.		
		ELG Category	ELG Subcategory	Regulatory Citation

EPA Identification Number	NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004
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Production Continued	6.3	Are the limitations in the applicable ELGs expressed in terms of production (or other measure of operation)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Section 7.			
	6.4	Provide an expected measure of average daily production expressed in terms and units of applicable ELGs.			
	Expected Actual Average Daily Production for First Three Years				
	Outfall Number	Year	Operation, Product, or Material	Quantity per Day <small>(note basis if applicable)</small>	Unit of Measure
		Year 1			
		Year 2			
		Year 3			
		Year 1			
		Year 2			
		Year 3			

SECTION 7. EFFLUENT CHARACTERISTICS (40 CFR 122.21(k)(5))		
Effluent Characteristics	See the instructions to determine the parameters and pollutants you are required to monitor and, in turn, the tables you must complete. Note that not all applicants need to complete each table.	
	Table A. Conventional and Non-Conventional Parameters	
	7.1	Are you requesting a waiver from your NPDES permitting authority for one or more of the Table A parameters for any of your outfalls? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 7.3.
	7.2	If yes, indicate the applicable outfalls below. Attach waiver request and other required information to the application. Outfall number _____ Outfall number _____ Outfall number _____
	7.3	Have you have provided estimates or actual data for all Table A parameters for each of your outfalls for which a waiver has not been requested and attached the results to this application package? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No; a waiver has been requested from my NPDES permitting authority for all parameters at all outfalls.
	Table B. Certain Conventional and Non-Conventional Pollutants	
	7.4	Have you checked "Believed Present" for all pollutants listed in Table B that are limited directly or indirectly by an applicable ELG? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	7.5	Have you checked "Believed Present" or "Believed Absent" for all remaining pollutants listed in Table B? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	7.6	Have you provided estimated data for those Table B pollutants for which you have indicated are "Believed Present" in your discharge? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

EPA Identification Number	NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004
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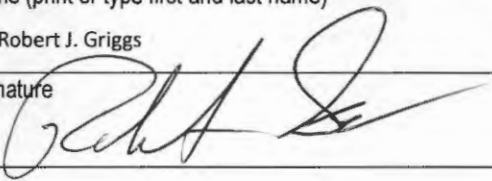
Effluent Characteristics Continued	Table C. Toxic Metals, Total Cyanide, and Total Phenols		
	7.7	Have you indicated whether pollutants are "Believed Present" or "Believed Absent" for all pollutants listed on Table C for all outfalls? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
	7.8	Have you completed Table C by providing estimated data for pollutants you indicated are "Believed Present," including the source of the information, for each applicable outfall? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
	Table D. Organic Toxic Pollutants (GC/MS Fractions)		
	7.9	Do you qualify for a small business exemption under the criteria specified in the Instructions? <input type="checkbox"/> Yes → Note that you qualify at the top of Table D, then SKIP to Item 7.12. <input checked="" type="checkbox"/> No	
	7.10	Have you indicated whether pollutants are "Believed Present" or "Believed Absent" for all pollutants listed on Table D for all outfalls? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
	7.11	Have you completed Table D by providing estimated data for pollutants you indicated are "Believed Present," including the source of the information, for each applicable outfall? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
	2,3,7,8-Tetrachlorodibenzo-p-Dioxin (TCDD)		
	7.12	Does the facility use or manufacture one or more of the 2,3,7,8-TCDD congeners listed in the Instructions, or do you know or have reason to believe that TCDD is or may be present in effluent from any of your outfalls? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	Table E. Certain Hazardous Substances and Asbestos		
	7.13	Have you indicated whether pollutants are "Believed Present" or "Believed Absent" for all pollutants listed in Table E for all outfalls? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
	7.14	Have you completed Table E by reporting the reason the pollutants are expected to be present and available quantitative data for pollutants you indicated are "Believed Present" for each applicable outfall? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Intake Credits, Tables A through E			
7.15	Are you applying for net credits for the presence of any of the pollutants on Tables A through E for any of your outfalls? <input type="checkbox"/> Yes → Consult with your NPDES permitting authority. <input checked="" type="checkbox"/> No		
SECTION 8. ENGINEERING REPORT (40 CFR 122.21(k)(6))			
Engineering Report	8.1	Do you have any technical evaluations of your wastewater treatment, including engineering reports or pilot plant studies? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 8.3.	
	8.2	Have you provided the technical evaluation and all related documents to this application package? <input type="checkbox"/> Yes <input type="checkbox"/> No	
	8.3	Are you aware of any existing plant(s) that resemble production processes, wastewater constituents, or wastewater treatment at your facility? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Section 9.	

EPA Identification Number		NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004
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Engineering Report Continued	8.4	Provide the name and location of the similar plants.		
		Name of Similar Plants	Location of Similar Plants	

SECTION 9. OTHER INFORMATION (40 CFR 122.21(k)(7))		
Other Information	9.1	Have you attached any optional information that you would like considered as part of the application review process (i.e., material beyond that which you have already noted in the application as being attached)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Section 10.
	9.2	List the additional items and briefly note why you have included them. <div style="border: 1px solid black; height: 40px; margin-top: 5px;"></div> <div style="border: 1px solid black; height: 20px; margin-top: 5px;"></div> <div style="border: 1px solid black; height: 20px; margin-top: 5px;"></div> <div style="border: 1px solid black; height: 20px; margin-top: 5px;"></div> <div style="border: 1px solid black; height: 20px; margin-top: 5px;"></div>

SECTION 10. CHECKLIST AND CERTIFICATION STATEMENT (40 CFR 122.22(a) and (d))			
Checklist and Certification Statement	10.1	In Column 1 below, mark the sections of Form 2D that you have completed and are submitting with your application. For each section, specify in Column 2 any attachments that you are enclosing to alert the permitting authority. Note that not all applicants are required to complete all sections or tables, or provide attachments.	
		Column 1	Column 2
	<input checked="" type="checkbox"/>	Section 1: Expected Outfall Location	<input checked="" type="checkbox"/> w/ attachments (e.g., responses for additional outfalls)
	<input checked="" type="checkbox"/>	Section 2: Expected Discharge Date	<input type="checkbox"/> w/ attachments
	<input checked="" type="checkbox"/>	Section 3: Average Flows and Treatment	<input checked="" type="checkbox"/> w/ attachments
	<input checked="" type="checkbox"/>	Section 4: Line Drawing	<input checked="" type="checkbox"/> w/ line drawing <input checked="" type="checkbox"/> w/ additional attachments
	<input checked="" type="checkbox"/>	Section 5: Intermittent or Seasonal Flows	<input checked="" type="checkbox"/> w/ attachments
	<input type="checkbox"/>	Section 6: Production	<input type="checkbox"/> w/ attachments
	<input checked="" type="checkbox"/>	Section 7: Effluent Characteristics	<input type="checkbox"/> w/ Table A waiver request or approval <input type="checkbox"/> Table A <input type="checkbox"/> Table B <input type="checkbox"/> Table C <input type="checkbox"/> Table D <input type="checkbox"/> Table E <input checked="" type="checkbox"/> w/ other attachments
	<input type="checkbox"/>	Section 8: Engineering Report	<input type="checkbox"/> w/ technical evaluations and related attachments
	<input type="checkbox"/>	Section 9: Other Information	<input type="checkbox"/> w/ optional information
	<input checked="" type="checkbox"/>	Section 10: Checklist and Certification Statement	<input type="checkbox"/> w/ attachments

EPA Identification Number		NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004
Checklist and Certification Statement Continued	10.2	Certification Statement <i>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.</i>		
		Name (print or type first and last name)		Official title
		LTC Robert J. Griggs		Training Center Director
		Signature 		Date signed 6/30/2020

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EPA Identification Number	Facility Name	Outfall Number
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Form Approved 03/05/19
OMB No. 2040-0004

TABLE A. CONVENTIONAL AND NON CONVENTIONAL PARAMETER ESTIMATES (40 CFR 122.21(k)(5)(i))¹

Pollutant	Waiver Requested (if applicable)	Units	Effluent Data			Intake Water		
			Maximum Daily Discharge (required)	Average Daily Discharge (if available)	Source of Information (use codes in instructions)	Believed Present? (check only one response per parameter)		
<input type="checkbox"/> Check here if you have applied to your NPDES authority for a waiver for all of the pollutants listed on this table for the noted outfall.								
1. Biochemical oxygen demand (BOD ₅)	<input type="checkbox"/>	Concentration				<input type="checkbox"/> Yes	<input type="checkbox"/> No	
		Mass						
2. Chemical oxygen demand (COD)	<input type="checkbox"/>	Concentration				<input type="checkbox"/> Yes	<input type="checkbox"/> No	
		Mass						
3. Total organic carbon (TOC)	<input type="checkbox"/>	Concentration				<input type="checkbox"/> Yes	<input type="checkbox"/> No	
		Mass						
4. Total suspended solids (TSS)	<input type="checkbox"/>	Concentration				<input type="checkbox"/> Yes	<input type="checkbox"/> No	
		Mass						
5. Ammonia (as N)	<input type="checkbox"/>	Concentration				<input type="checkbox"/> Yes	<input type="checkbox"/> No	
		Mass						
6. Flow	<input type="checkbox"/>	Rate				<input type="checkbox"/> Yes	<input type="checkbox"/> No	
7. Temperature	<input type="checkbox"/>	°C	°C			<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	<input type="checkbox"/>	°C	°C					
8. pH	<input type="checkbox"/>	Standard units	s.u.			<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	<input type="checkbox"/>	Standard units	s.u.					

¹ Sampling shall be conducted according to sufficiently sensitive test procedures (i.e., methods) approved under 40 CFR 136 for the analysis of pollutants or pollutant parameters or required under 40 CFR chapter I, subchapter N or O. See instructions and 40 CFR 122.21(e)(3).

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EPA Identification Number	Facility Name	Outfall Number
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Form Approved 03/05/19
OMB No. 2040-0004

TABLE B. CERTAIN CONVENTIONAL AND NON CONVENTIONAL POLLUTANTS (40 CFR 122.21(k)(5)(ii))¹

Pollutant	Presence or Absence (check one)		Estimated Data for Pollutants Expected to be Present or Limited by an ELG (Provide both concentration and mass estimates for each pollutant.)					Intake Water Believed Present? (check only one response per item)	
	Believed Present	Believed Absent	Effluent			Source of Information (use codes in instructions)			
			Units	Maximum Daily Discharge (required)	Average Daily Discharge (if available)				
<input type="checkbox"/> Check (✓) here if you believe all pollutants listed to be absent from the discharge. You need not complete Table B for the noted outfall <i>unless</i> you have quantitative data available.									
1. Bromide (24959-67-9)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes <input type="checkbox"/> No	
			Mass						
2. Chlorine, total residual	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes <input type="checkbox"/> No	
			Mass						
3. Color	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes <input type="checkbox"/> No	
			Mass						
4. Fecal coliform	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes <input type="checkbox"/> No	
			Mass						
5. Fluoride (16984-48-8)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes <input type="checkbox"/> No	
			Mass						
6. Nitrate-nitrite	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes <input type="checkbox"/> No	
			Mass						
7. Nitrogen, total organic (as N)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes <input type="checkbox"/> No	
			Mass						
8. Oil and grease	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes <input type="checkbox"/> No	
			Mass						
9. Phosphorus (as P), total (7723-14-0)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes <input type="checkbox"/> No	
			Mass						
10. Sulfate (as SO ₄) (14808-79-8)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes <input type="checkbox"/> No	
			Mass						
11. Sulfide (as S)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes <input type="checkbox"/> No	
			Mass						

TABLE B. CERTAIN CONVENTIONAL AND NON CONVENTIONAL POLLUTANTS (40 CFR 122.21(k)(5)(ii))¹

Pollutant		Presence or Absence (check one)		Estimated Data for Pollutants Expected to be Present or Limited by an ELG (Provide both concentration and mass estimates for each pollutant.)					
		Believed Present	Believed Absent	Effluent			Source of Information (use codes in instructions)	Intake Water	
				Units	Maximum Daily Discharge (required)	Average Daily Discharge (if available)		Believed Present? (check only one response per item)	
12.	Sulfite (as SO ₃) (14265-45-3)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration				<input type="checkbox"/> Yes <input type="checkbox"/> No	
				Mass					
13.	Surfactants	<input type="checkbox"/>	<input type="checkbox"/>	Concentration				<input type="checkbox"/> Yes <input type="checkbox"/> No	
				Mass					
14.	Aluminum, total (7429-90-5)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration				<input type="checkbox"/> Yes <input type="checkbox"/> No	
				Mass					
15.	Barium, total (7440-39-3)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration				<input type="checkbox"/> Yes <input type="checkbox"/> No	
				Mass					
16.	Boron, total (7440-42-8)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration				<input type="checkbox"/> Yes <input type="checkbox"/> No	
				Mass					
17.	Cobalt, total (7440-48-4)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration				<input type="checkbox"/> Yes <input type="checkbox"/> No	
				Mass					
18.	Iron, total (7439-89-6)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration				<input type="checkbox"/> Yes <input type="checkbox"/> No	
				Mass					
19.	Magnesium, total (7439-95-4)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration				<input type="checkbox"/> Yes <input type="checkbox"/> No	
				Mass					
20.	Molybdenum, total (7439-98-7)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration				<input type="checkbox"/> Yes <input type="checkbox"/> No	
				Mass					
21.	Manganese, total (7439-96-5)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration				<input type="checkbox"/> Yes <input type="checkbox"/> No	
				Mass					
22.	Tin, total (7440-31-5)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration				<input type="checkbox"/> Yes <input type="checkbox"/> No	
				Mass					

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TABLE B. CERTAIN CONVENTIONAL AND NON CONVENTIONAL POLLUTANTS (40 CFR 122.21(k)(5)(ii)) ¹									
Pollutant		Presence or Absence (check one)		Estimated Data for Pollutants Expected to be Present or Limited by an ELG (Provide both concentration and mass estimates for each pollutant.)					
				Effluent				Intake Water	
		Believed Present	Believed Absent	Units		Maximum Daily Discharge (required)	Average Daily Discharge (if available)	Source of Information (use codes in instructions)	Believed Present? (check only one response per item)
23.	Titanium, total (7440-32-6)			<input type="checkbox"/>	<input type="checkbox"/>				
				Mass					
24.	Radioactivity								
24.1	Alpha, total	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass					
24.2	Beta, total	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass					
24.3.	Radium, total	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass					
24.4	Radium 226, total	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass					

¹ Sampling shall be conducted according to sufficiently sensitive test procedures (i.e., methods) approved under 40 CFR 136 for the analysis of pollutants or pollutant parameters or required under 40 CFR chapter I, subchapter N or O. See instructions and 40 CFR 122.21(e)(3).

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TABLE C. TOXIC METALS, TOTAL CYANIDE, AND TOTAL PHENOLS (40 CFR 122.21(k)(5)(iii)(A))¹

Pollutant (CAS Number, if available)	Presence or Absence (check one)		Estimated Data for Pollutants Expected to be Present in Discharge (Provide both concentration and mass estimates for each pollutant.)						Intake Water Believed Present? (Check only one response per pollutant.)	
	Believed Present	Believed Absent	Effluent				Source of Information (Use codes in Instructions.)			
			Units	Maximum Daily Discharge (required)	Average Daily Discharge (if available)					
<input checked="" type="checkbox"/> Check (✓) here if you believe all pollutants listed to be absent from the discharge. You need not complete Table C for the noted outfall <i>unless</i> you have quantitative data available.										
1. Antimony, Total (7440-36-0)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration						<input type="checkbox"/> Yes <input type="checkbox"/> No	
			Mass							
2. Arsenic, Total (7440-38-2)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration						<input type="checkbox"/> Yes <input type="checkbox"/> No	
			Mass							
3. Beryllium, Total (7440-41-7)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration						<input type="checkbox"/> Yes <input type="checkbox"/> No	
			Mass							
4. Cadmium, Total (7440-43-9)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration						<input type="checkbox"/> Yes <input type="checkbox"/> No	
			Mass							
5. Chromium, Total (7440-47-3)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration						<input type="checkbox"/> Yes <input type="checkbox"/> No	
			Mass							
6. Copper, Total (7440-50-8)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration						<input type="checkbox"/> Yes <input type="checkbox"/> No	
			Mass							
7. Lead, Total (7439-92-1)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration						<input type="checkbox"/> Yes <input type="checkbox"/> No	
			Mass							
8. Mercury, Total (7439-97-6)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration						<input type="checkbox"/> Yes <input type="checkbox"/> No	
			Mass							
9. Nickel, Total (7440-02-0)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration						<input type="checkbox"/> Yes <input type="checkbox"/> No	
			Mass							
10. Selenium, Total (7782-49-2)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration						<input type="checkbox"/> Yes <input type="checkbox"/> No	
			Mass							
11. Silver, Total (7440-22-4)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration						<input type="checkbox"/> Yes <input type="checkbox"/> No	
			Mass							
12. Thallium, Total (7440-28-0)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration						<input type="checkbox"/> Yes <input type="checkbox"/> No	
			Mass							
13. Zinc, Total (7440-66-6)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration						<input type="checkbox"/> Yes <input type="checkbox"/> No	
			Mass							
14. Cyanide, Total (57-12-5)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration						<input type="checkbox"/> Yes <input type="checkbox"/> No	
			Mass							
15. Phenols, Total	<input type="checkbox"/>	<input type="checkbox"/>	Concentration						<input type="checkbox"/> Yes <input type="checkbox"/> No	
			Mass							

¹ Sampling shall be conducted according to sufficiently sensitive test procedures (i.e., methods) approved under 40 CFR 136 for the analysis of pollutants or pollutant parameters or required under 40 CFR chapter I, subchapter N or O. See Instructions and 40 CFR 122.21(e)(3).

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TABLE D. ORGANIC TOXIC POLLUTANTS (Gas Chromatography/Mass Spectrometry or GC/MS Fractions) (40 CFR 122.21(k)(5)(iii)(B)) ¹									
Pollutant (CAS Number, if available)		Presence or Absence (check one)		Estimated Data for Pollutants Expected to Be Present in Discharge (provide both concentration and mass estimates for each pollutant)					
		Believed Present	Believed Absent	Units	Effluent			Intake Water	
					Maximum Daily Discharge	Average Daily Discharge	Source of Information (use codes in instructions)	Believed Present? (check only one response per pollutant)	
<input type="checkbox"/>	Check here if all pollutants listed in Table D are expected to be absent from your facility's discharge.								
<input type="checkbox"/>	Check here if the facility believes it is exempt from Table D reporting requirements because it is a qualified small business. See the instructions for exemption criteria and for a list of materials you must attach to the application.								
Note: If you check either of the above boxes, you do not need to complete Table D for the noted outfall <i>unless</i> you have quantitative data available.									
1. Organic Toxic Pollutants (GC/MS Fraction—Volatile Compounds)									
1.1	Acrolein (107-02-8)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass					
1.2	Acrylonitrile (107-13-1)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass					
1.3	Benzene (71-43-2)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass					
1.4	Bromoform (75-25-2)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass					
1.5	Carbon tetrachloride (56-23-5)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass					
1.6	Chlorobenzene (108-90-7)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass					
1.7	Chlorodibromomethane (124-48-1)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass					
1.8	Chloroethane (75-00-3)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass					
1.9	2-chloroethylvinyl ether (110-75-8)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass					
1.10	Chloroform (67-66-3)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass					
1.11	Dichlorobromomethane (75-27-4)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass					

TABLE D. ORGANIC TOXIC POLLUTANTS (Gas Chromatography/Mass Spectrometry or GC/MS Fractions) (40 CFR 122.21(k)(5)(iii)(B))¹

Pollutant (CAS Number, if available)		Presence or Absence (check one)		Estimated Data for Pollutants Expected to Be Present in Discharge (provide both concentration and mass estimates for each pollutant)				
		Believed Present	Believed Absent	Units	Effluent			Intake Water
					Maximum Daily Discharge	Average Daily Discharge	Source of Information (use codes in instructions)	Believed Present? (check only one response per pollutant)
1.12	1,1-dichloroethane (75-34-3)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration				<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass				
1.13	1,2-dichloroethane (107-06-2)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration				<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass				
1.14	1,1-dichloroethylene (75-35-4)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration				<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass				
1.15	1,2-dichloropropane (78-87-5)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration				<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass				
1.16	1,3-dichloropropylene (542-75-6)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration				<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass				
1.17	Ethylbenzene (100-41-4)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration				<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass				
1.18	Methyl bromide (74-83-9)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration				<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass				
1.19	Methyl chloride (74-87-3)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration				<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass				
1.20	Methylene chloride (75-09-2)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration				<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass				
1.21	1,1,2,2-tetrachloroethane (79-34-5)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration				<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass				
1.22	Tetrachloroethylene (127-18-4)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration				<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass				
1.23	Toluene (108-88-3)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration				<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass				
1.24	1,2-trans-dichloroethylene (156-60-5)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration				<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass				

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TABLE D. ORGANIC TOXIC POLLUTANTS (Gas Chromatography/Mass Spectrometry or GC/MS Fractions) (40 CFR 122.21(k)(5)(iii)(B))¹

Pollutant (CAS Number, if available)		Presence or Absence (check one)		Estimated Data for Pollutants Expected to Be Present in Discharge (provide both concentration and mass estimates for each pollutant)					Intake Water	
		Believed Present	Believed Absent	Units	Effluent			Source of Information (use codes in instructions)		
					Maximum Daily Discharge	Average Daily Discharge		Believed Present? (check only one response per pollutant)		
1.25	1,1,1-trichloroethane (71-55-6)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes	<input type="checkbox"/> No
				Mass						
1.26	1,1,2-trichloroethane (79-00-5)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes	<input type="checkbox"/> No
				Mass						
1.27	Trichloroethylene (79-01-6)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes	<input type="checkbox"/> No
				Mass						
1.28	Vinyl chloride (75-01-4)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes	<input type="checkbox"/> No
				Mass						
2. Organic Toxic Pollutants (GC/MS Fraction—Acid Compounds)										
2.1	2-chlorophenol (95-57-8)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes	<input type="checkbox"/> No
				Mass						
2.2	2,4-dichlorophenol (120-83-2)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes	<input type="checkbox"/> No
				Mass						
2.3	2,4-dimethylphenol (105-67-9)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes	<input type="checkbox"/> No
				Mass						
2.4	4,6-dinitro-o-cresol (534-52-1)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes	<input type="checkbox"/> No
				Mass						
2.5	2,4-dinitrophenol (51-28-5)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes	<input type="checkbox"/> No
				Mass						
2.6	2-nitrophenol (88-75-5)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes	<input type="checkbox"/> No
				Mass						
2.7	4-nitrophenol (100-02-7)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes	<input type="checkbox"/> No
				Mass						
2.8	p-chloro-m-cresol (59-50-7)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes	<input type="checkbox"/> No
				Mass						
2.9	Pentachlorophenol (87-86-5)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes	<input type="checkbox"/> No
				Mass						

TABLE D. ORGANIC TOXIC POLLUTANTS (Gas Chromatography/Mass Spectrometry or GC/MS Fractions) (40 CFR 122.21(k)(5)(iii)(B))¹

Pollutant (CAS Number, if available)		Presence or Absence (check one)		Estimated Data for Pollutants Expected to Be Present in Discharge (provide both concentration and mass estimates for each pollutant)					
		Believed Present	Believed Absent	Units	Effluent			Intake Water	
					Maximum Daily Discharge	Average Daily Discharge	Source of Information (use codes in instructions)	Believed Present? (check only one response per pollutant)	
2.10	Phenol (108-95-2)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration				<input type="checkbox"/> Yes <input type="checkbox"/> No	
				Mass					
2.11	2,4,6-trichlorophenol (88-05-2)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration				<input type="checkbox"/> Yes <input type="checkbox"/> No	
				Mass					
3. Organic Toxic Pollutants (GC/MS Fraction—Base/Neutral Compounds)									
3.1	Acenaphthene (83-32-9)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration				<input type="checkbox"/> Yes <input type="checkbox"/> No	
				Mass					
3.2	Acenaphthylene (208-96-8)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration				<input type="checkbox"/> Yes <input type="checkbox"/> No	
				Mass					
3.3	Anthracene (120-12-7)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration				<input type="checkbox"/> Yes <input type="checkbox"/> No	
				Mass					
3.4	Benzidine (92-87-5)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration				<input type="checkbox"/> Yes <input type="checkbox"/> No	
				Mass					
3.5	Benzo (a) anthracene (56-55-3)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration				<input type="checkbox"/> Yes <input type="checkbox"/> No	
				Mass					
3.6	Benzo (a) pyrene (50-32-8)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration				<input type="checkbox"/> Yes <input type="checkbox"/> No	
				Mass					
3.7	3,4-benzofluoranthene (205-99-2)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration				<input type="checkbox"/> Yes <input type="checkbox"/> No	
				Mass					
3.8	Benzo (ghi) perylene (191-24-2)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration				<input type="checkbox"/> Yes <input type="checkbox"/> No	
				Mass					
3.9	Benzo (k) fluoranthene (207-08-9)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration				<input type="checkbox"/> Yes <input type="checkbox"/> No	
				Mass					
3.10	Bis (2-chloroethoxy) methane (111-91-1)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration				<input type="checkbox"/> Yes <input type="checkbox"/> No	
				Mass					
3.11	Bis (2-chloroethyl) ether (111-44-4)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration				<input type="checkbox"/> Yes <input type="checkbox"/> No	
				Mass					

TABLE D. ORGANIC TOXIC POLLUTANTS (Gas Chromatography/Mass Spectrometry or GC/MS Fractions) (40 CFR 122.21(k)(5)(iii)(B))¹

Pollutant (CAS Number, if available)		Presence or Absence (check one)		Estimated Data for Pollutants Expected to Be Present in Discharge (provide both concentration and mass estimates for each pollutant)					
		Believed Present	Believed Absent	Units		Effluent			Intake Water
						Maximum Daily Discharge	Average Daily Discharge	Source of Information (use codes in instructions)	Believed Present? (check only one response per pollutant)
3.12	Bis (2-chloroisopropyl) ether (102-80-1)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass					
3.13	Bis (2-ethylhexyl) phthalate (117-81-7)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass					
3.14	4-bromophenyl phenyl ether (101-55-3)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass					
3.15	Butyl benzyl phthalate (85-68-7)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass					
3.16	2-chloronaphthalene (91-58-7)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass					
3.17	4-chlorophenyl phenyl ether (7005-72-3)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass					
3.18	Chrysene (218-01-9)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass					
3.19	Dibenzo (a,h) anthracene (53-70-3)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass					
3.20	1,2-dichlorobenzene (95-50-1)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass					
3.21	1,3-dichlorobenzene (541-73-1)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass					
3.22	1,4-dichlorobenzene (106-46-7)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass					
3.23	3,3-dichlorobenzidine (91-94-1)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass					
3.24	Diethyl phthalate (84-66-2)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass					
3.25	Dimethyl phthalate (131-11-3)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass					

TABLE D. ORGANIC TOXIC POLLUTANTS (Gas Chromatography/Mass Spectrometry or GC/MS Fractions) (40 CFR 122.21(k)(5)(iii)(B))¹

Pollutant (CAS Number, if available)		Presence or Absence (check one)		Estimated Data for Pollutants Expected to Be Present in Discharge (provide both concentration and mass estimates for each pollutant)					Intake Water	
		Believed Present	Believed Absent	Units	Effluent			Source of Information (use codes in instructions)	Believed Present? (check only one response per pollutant)	
					Maximum Daily Discharge	Average Daily Discharge				
3.26	Di-n-butyl phthalate (84-74-2)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes	<input type="checkbox"/> No
				Mass						
3.27	2,4-dinitrotoluene (121-14-2)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes	<input type="checkbox"/> No
				Mass						
3.28	2,6-dinitrotoluene (606-20-2)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes	<input type="checkbox"/> No
				Mass						
3.29	Di-n-octyl phthalate (117-84-0)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes	<input type="checkbox"/> No
				Mass						
3.30	1,2-diphenylhydrazine (as azobenzene) (122-66-7)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes	<input type="checkbox"/> No
				Mass						
3.31	Fluoranthene (206-44-0)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes	<input type="checkbox"/> No
				Mass						
3.32	Fluorene (86-73-7)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes	<input type="checkbox"/> No
				Mass						
3.33	Hexachlorobenzene (118-74-1)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes	<input type="checkbox"/> No
				Mass						
3.34	Hexachlorobutadiene (87-68-3)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes	<input type="checkbox"/> No
				Mass						
3.35	Hexachlorocyclopentadiene (77-47-4)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes	<input type="checkbox"/> No
				Mass						
3.36	Hexachloroethane (67-72-1)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes	<input type="checkbox"/> No
				Mass						
3.37	Indeno (1,2,3-cd) pyrene (193-39-5)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes	<input type="checkbox"/> No
				Mass						
3.38	Isophorone (78-59-1)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes	<input type="checkbox"/> No
				Mass						
3.39	Naphthalene (91-20-3)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes	<input type="checkbox"/> No
				Mass						

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TABLE D. ORGANIC TOXIC POLLUTANTS (Gas Chromatography/Mass Spectrometry or GC/MS Fractions) (40 CFR 122.21(k)(5)(iii)(B)) ¹										
Pollutant (CAS Number, if available)		Presence or Absence (check one)		Estimated Data for Pollutants Expected to Be Present in Discharge (provide both concentration and mass estimates for each pollutant)						
		Believed Present	Believed Absent	Units		Effluent			Intake Water	
						Maximum Daily Discharge	Average Daily Discharge	Source of Information (use codes in instructions)	Believed Present? (check only one response per pollutant)	
3.40	Nitrobenzene (98-95-3)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration						<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass						
3.41	N-nitrosodimethylamine (62-75-9)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration						<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass						
3.42	N-nitrosodi-n-propylamine (621-64-7)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration						<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass						
3.43	N-nitrosodiphenylamine (86-30-6)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration						<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass						
3.44	Phenanthrene (85-01-8)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration						<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass						
3.45	Pyrene (129-00-0)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration						<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass						
3.46	1,2,4-trichlorobenzene (120-82-1)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration						<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass						
4. Organic Toxic Pollutants (GC/MS Fraction—Pesticides)										
4.1.	Aldrin (309-00-2)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration						<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass						
4.2	α -BHC (319-84-6)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration						<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass						
4.3	β -BHC (319-85-7)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration						<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass						
4.4	γ -BHC (58-89-9)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration						<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass						
4.5	δ -BHC (319-86-8)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration						<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass						
4.6	Chlordane (57-74-9)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration						<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass						

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TABLE D. ORGANIC TOXIC POLLUTANTS (Gas Chromatography/Mass Spectrometry or GC/MS Fractions) (40 CFR 122.21(k)(5)(iii)(B)) ¹									
Pollutant (CAS Number, if available)		Presence or Absence (check one)		Estimated Data for Pollutants Expected to Be Present in Discharge (provide both concentration and mass estimates for each pollutant)					
		Believed Present	Believed Absent	Units	Effluent			Intake Water	
					Maximum Daily Discharge	Average Daily Discharge	Source of Information (use codes in instructions)	Believed Present? (check only one response per pollutant)	
4.7	4,4'-DDT (50-29-3)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass					
4.8	4,4'-DDE (72-55-9)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass					
4.9	4,4'-DDD (72-54-8)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass					
4.10	Dieldrin (60-57-1)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass					
4.11	α-endosulfan (115-29-7)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass					
4.12	β-endosulfan (115-29-7)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass					
4.13	Endosulfan sulfate (1031-07-8)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass					
4.14	Endrin (72-20-8)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass					
4.15	Endrin aldehyde (7421-93-4)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration					<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass					

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TABLE D. ORGANIC TOXIC POLLUTANTS (Gas Chromatography/Mass Spectrometry or GC/MS Fractions) (40 CFR 122.21(k)(5)(iii)(B)) ¹										
Pollutant (CAS Number, if available)		Presence or Absence (check one)		Estimated Data for Pollutants Expected to Be Present in Discharge (provide both concentration and mass estimates for each pollutant)						
		Believed Present	Believed Absent	Units		Effluent			Intake Water	
						Maximum Daily Discharge	Average Daily Discharge	Source of Information (use codes in instructions)	Believed Present? (check only one response per pollutant)	
4.16	Heptachlor (76-44-8)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration						<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass						
4.17	Heptachlor epoxide (1024-57-3)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration						<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass						
4.18	PCB-1242 (53469-21-9)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration						<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass						
4.19	PCB-1254 (11097-69-1)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration						<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass						
4.20	PCB-1221 (11104-28-2)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration						<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass						
4.21	PCB-1232 (11141-16-5)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration						<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass						
4.22	PCB-1248 (12672-29-6)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration						<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass						
4.23	PCB-1260 (11096-82-5)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration						<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass						
4.24	PCB-1016 (12674-11-2)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration						<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass						
4.25	Toxaphene (8001-35-2)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration						<input type="checkbox"/> Yes <input type="checkbox"/> No
				Mass						

¹ Sampling shall be conducted according to sufficiently sensitive test procedures (i.e., methods) approved under 40 CFR 136 for the analysis of pollutants or pollutant parameters or required under 40 CFR chapter I, subchapter N or O. See instructions and 40 CFR 122.21(e)(3).

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TABLE E. CERTAIN HAZARDOUS SUBSTANCES AND ASBESTOS (40 CFR 122.21(k)(5)(v))¹

Pollutant	Presence or Absence (check one)		Reason Pollutant Believed Present in Discharge	Available Quantitative Data (specify units)
	Believed Present	Believed Absent		
<input checked="" type="checkbox"/> Check (✓) here if you believe all pollutants listed to be absent from the discharge. You need not complete Table E for the noted outfall <i>unless</i> you have quantitative data available.				
1. Asbestos	<input type="checkbox"/>	<input type="checkbox"/>		
2. Acetaldehyde	<input type="checkbox"/>	<input type="checkbox"/>		
3. Allyl alcohol	<input type="checkbox"/>	<input type="checkbox"/>		
4. Allyl chloride	<input type="checkbox"/>	<input type="checkbox"/>		
5. Amyl acetate	<input type="checkbox"/>	<input type="checkbox"/>		
6. Aniline	<input type="checkbox"/>	<input type="checkbox"/>		
7. Benzonitrile	<input type="checkbox"/>	<input type="checkbox"/>		
8. Benzyl chloride	<input type="checkbox"/>	<input type="checkbox"/>		
9. Butyl acetate	<input type="checkbox"/>	<input type="checkbox"/>		
10. Butylamine	<input type="checkbox"/>	<input type="checkbox"/>		
11. Captan	<input type="checkbox"/>	<input type="checkbox"/>		
12. Carbaryl	<input type="checkbox"/>	<input type="checkbox"/>		
13. Carbofuran	<input type="checkbox"/>	<input type="checkbox"/>		
14. Carbon disulfide	<input type="checkbox"/>	<input type="checkbox"/>		
15. Chlorpyrifos	<input type="checkbox"/>	<input type="checkbox"/>		
16. Coumaphos	<input type="checkbox"/>	<input type="checkbox"/>		
17. Cresol	<input type="checkbox"/>	<input type="checkbox"/>		
18. Crotonaldehyde	<input type="checkbox"/>	<input type="checkbox"/>		

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TABLE E. CERTAIN HAZARDOUS SUBSTANCES AND ASBESTOS (40 CFR 122.21(k)(5)(v))¹

Pollutant	Presence or Absence (check one)		Reason Pollutant Believed Present in Discharge	Available Quantitative Data (specify units)
	Believed Present	Believed Absent		
19. Cyclohexane	<input type="checkbox"/>	<input type="checkbox"/>		
20. 2,4-D (2,4-dichlorophenoxyacetic acid)	<input type="checkbox"/>	<input type="checkbox"/>		
21. Diazinon	<input type="checkbox"/>	<input type="checkbox"/>		
22. Dicamba	<input type="checkbox"/>	<input type="checkbox"/>		
23. Dichlobenil	<input type="checkbox"/>	<input type="checkbox"/>		
24. Dichlone	<input type="checkbox"/>	<input type="checkbox"/>		
25. 2,2-dichloropropionic acid	<input type="checkbox"/>	<input type="checkbox"/>		
26. Dichlorvos	<input type="checkbox"/>	<input type="checkbox"/>		
27. Diethyl amine	<input type="checkbox"/>	<input type="checkbox"/>		
28. Dimethyl amine	<input type="checkbox"/>	<input type="checkbox"/>		
29. Dinitrobenzene	<input type="checkbox"/>	<input type="checkbox"/>		
30. Diquat	<input type="checkbox"/>	<input type="checkbox"/>		
31. Disulfoton	<input type="checkbox"/>	<input type="checkbox"/>		
32. Diuron	<input type="checkbox"/>	<input type="checkbox"/>		
33. Epichlorohydrin	<input type="checkbox"/>	<input type="checkbox"/>		
34. Ethion	<input type="checkbox"/>	<input type="checkbox"/>		
35. Ethylene diamine	<input type="checkbox"/>	<input type="checkbox"/>		
36. Ethylene dibromide	<input type="checkbox"/>	<input type="checkbox"/>		
37. Formaldehyde	<input type="checkbox"/>	<input type="checkbox"/>		

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TABLE E. CERTAIN HAZARDOUS SUBSTANCES AND ASBESTOS (40 CFR 122.21(k)(5)(v))¹

Pollutant		Presence or Absence (check one)		Reason Pollutant Believed Present in Discharge	Available Quantitative Data (specify units)
		Believed Present	Believed Absent		
38.	Furfural	<input type="checkbox"/>	<input type="checkbox"/>		
39.	Guthion	<input type="checkbox"/>	<input type="checkbox"/>		
40.	Isoprene	<input type="checkbox"/>	<input type="checkbox"/>		
41.	Isopropanolamine	<input type="checkbox"/>	<input type="checkbox"/>		
42.	Kelthane	<input type="checkbox"/>	<input type="checkbox"/>		
43.	Kepone	<input type="checkbox"/>	<input type="checkbox"/>		
44.	Malathion	<input type="checkbox"/>	<input type="checkbox"/>		
45.	Mercaptodimethur	<input type="checkbox"/>	<input type="checkbox"/>		
46.	Methoxychlor	<input type="checkbox"/>	<input type="checkbox"/>		
47.	Methyl mercaptan	<input type="checkbox"/>	<input type="checkbox"/>		
48.	Methyl methacrylate	<input type="checkbox"/>	<input type="checkbox"/>		
49.	Methyl parathion	<input type="checkbox"/>	<input type="checkbox"/>		
50.	Mevinphos	<input type="checkbox"/>	<input type="checkbox"/>		
51.	Mexacarbate	<input type="checkbox"/>	<input type="checkbox"/>		
52.	Monoethyl amine	<input type="checkbox"/>	<input type="checkbox"/>		
53.	Monomethyl amine	<input type="checkbox"/>	<input type="checkbox"/>		
54.	Naled	<input type="checkbox"/>	<input type="checkbox"/>		
55.	Naphthenic acid	<input type="checkbox"/>	<input type="checkbox"/>		
56.	Nitrotoluene	<input type="checkbox"/>	<input type="checkbox"/>		

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TABLE E. CERTAIN HAZARDOUS SUBSTANCES AND ASBESTOS (40 CFR 122.21(k)(5)(v))¹

Pollutant		Presence or Absence (check one)		Reason Pollutant Believed Present in Discharge	Available Quantitative Data (specify units)
		Believed Present	Believed Absent		
57.	Parathion	<input type="checkbox"/>	<input type="checkbox"/>		
58.	Phenolsulfonate	<input type="checkbox"/>	<input type="checkbox"/>		
59.	Phosgene	<input type="checkbox"/>	<input type="checkbox"/>		
60.	Propargite	<input type="checkbox"/>	<input type="checkbox"/>		
61.	Propylene oxide	<input type="checkbox"/>	<input type="checkbox"/>		
62.	Pyrethrins	<input type="checkbox"/>	<input type="checkbox"/>		
63.	Quinoline	<input type="checkbox"/>	<input type="checkbox"/>		
64.	Resorcinol	<input type="checkbox"/>	<input type="checkbox"/>		
65.	Strontium	<input type="checkbox"/>	<input type="checkbox"/>		
66.	Strychnine	<input type="checkbox"/>	<input type="checkbox"/>		
67.	Styrene	<input type="checkbox"/>	<input type="checkbox"/>		
68.	2,4,5-T (2,4,5-trichlorophenoxyacetic acid)	<input type="checkbox"/>	<input type="checkbox"/>		
69.	TDE (tetrachlorodiphenyl ethane)	<input type="checkbox"/>	<input type="checkbox"/>		
70.	2,4,5-TP [2-(2,4,5-trichlorophenoxy) propanoic acid]	<input type="checkbox"/>	<input type="checkbox"/>		
71.	Trichlorofon	<input type="checkbox"/>	<input type="checkbox"/>		
72.	Triethanolamine	<input type="checkbox"/>	<input type="checkbox"/>		
73.	Triethylamine	<input type="checkbox"/>	<input type="checkbox"/>		
74.	Trimethylamine	<input type="checkbox"/>	<input type="checkbox"/>		
75.	Uranium	<input type="checkbox"/>	<input type="checkbox"/>		

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TABLE E. CERTAIN HAZARDOUS SUBSTANCES AND ASBESTOS (40 CFR 122.21(k)(5)(v))¹

Pollutant		Presence or Absence (check one)		Reason Pollutant Believed Present in Discharge	Available Quantitative Data (specify units)
		Believed Present	Believed Absent		
76.	Vanadium	<input type="checkbox"/>	<input type="checkbox"/>		
77.	Vinyl acetate	<input type="checkbox"/>	<input type="checkbox"/>		
78.	Xylene	<input type="checkbox"/>	<input type="checkbox"/>		
79.	Xylenol	<input type="checkbox"/>	<input type="checkbox"/>		
80.	Zirconium	<input type="checkbox"/>	<input type="checkbox"/>		

¹ Sampling shall be conducted according to sufficiently sensitive test procedures (i.e., methods) approved under 40 CFR 136 for the analysis of pollutants or pollutant parameters or required under 40 CFR chapter I, subchapter N or O. See instructions and 40 CFR 122.21(e)(3).

ADEM Permit Form 2D NPDES - ATTACHMENT A

Section 1. Expected Outfall Location									
Provide information on each of the facility's outfalls in the table below.									
Outfall Number (List)	Receiving Water (Name)	Latitude			Direction	Longitude			Direction
		Deg	Min	Sec		Deg	Min	Sec	
DC001	Cane Creek	33	43	39	N	85	54	17	W
DC002	UT to Cane Creek	33	43	41.2	N	85	53	57.6	W
DC003	UT to Cane Creek	33	43	49.9	N	85	56	31.8	W
DC004	UT to Cane Creek	33	43	40.4	N	85	56	22.8	W
DC005	UT to Cane Creek	33	43	45	N	85	56	19	W
DC006	UT to Cane Creek	33	43	48	N	85	56	11	W
DC007	UT to Cane Creek	33	44	22.03	N	85	59	29	W
DC008	UT to Cane Creek	33	44	21	N	85	59	29	W
DC009	UT to Cane Creek	33	44	18	N	85	59	22	W
DC010	UT to Cane Creek	33	44	40.4	N	85	59	20	W

ADEM Permit Form 2D NPDES - ATTACHMENT B

3.1 For each outfall identified under Item 1.1, provide average flow and treatment information. Add additional sheets as necessary.

UNIT TRAINING EQUIPMENT SITE (UTES) #1 SITE 1

Outfall Number DC001

Operations Contributing to Flow

Operation	Average Flow
UTES #1: Discharge Associated with Vehicle and Equipment Exterior Washing Operations	0.0062 MGD

Treatment Units

Description (include size, flow rate through each treatment unit, retention time, etc.)	Code from Exhibit 2D-1	Final Disposal of Solid or Liquid Wastes Other Than by Discharge
All wash water flows through a settling basin and is treated by an Oil Water Separator (OWS) prior to discharging. Size: 15,000 Gallon Tank, 177 SY Settling basin / Flow Rate:	1-H, 1-U	OWS Sludge Off-Site Treatment Facility / Sediment accumulated inside the settling basin is removed when it reaches 1/2 the height of the original dam. System inspected regularly to ensure proper function, Advanced Disposal-Cedar Hill Landfill.

UNIT TRAINING EQUIPMENT SITE (UTES) FORMER FMS 10 SITE 2

Outfall Number DC002

Operations Contributing to Flow

Operation	Average Flow
UTES #1 / FMS 10: Discharge Associated with Vehicle and Equipment Exterior Washing Operations	0.0000 MGD

Treatment Units

Description (include size, flow rate through each treatment unit, retention time, etc.)	Code from Exhibit 2D-1	Final Disposal of Solid or Liquid Wastes Other Than by Discharge
All wash water flows through a settling basin and is treated by an Oil Water Separator (OWS) prior to discharging. Size: Inactive / Flow Rate: 0.0	1-H, 1-U	OWS Sludge Off-Site Treatment Facility / Sediment accumulated inside the settling basin is removed when it reaches 1/2 the height of the original dam. System inspected regularly to ensure proper function, Advanced Disposal-Cedar Hill Landfill.

ADEM Permit Form 2D NPDES - ATTACHMENT B

HORIZONTAL ENGINEERING TRAINING SITE 3		
Outfall Number DC003		
Operations Contributing to Flow		
Operation	Average Flow	
Horizontal Engineering Training: Storm Water Discharges Associated with Construction Activities Land Disturbance	0.002 MGD	
Treatment Units		
Description (include size, flow rate through each treatment unit, retention time, etc.)	Code from Exhibit 2D-1	Final Disposal of Solid or Liquid Wastes Other Than by Discharge
All storm water flows through a settlement pond and skimmer outlet prior to discharging.	1-H, 1-U	Sediment accumulated inside the settling basin is removed when it reaches 1/2 the height of the original dam. System inspected regularly to ensure proper function, Advanced Disposal-Cedar Hill Landfill.
Size: / Flow Rate:		
Outfall Number DC004		
Operations Contributing to Flow		
Operation	Average Flow	
Horizontal Engineering Training: Storm Water Discharges Associated with Construction Activities Land Disturbance	0.002 MGD	
Treatment Units		
Description (include size, flow rate through each treatment unit, retention time, etc.)	Code from Exhibit 2D-1	Final Disposal of Solid or Liquid Wastes Other Than by Discharge
All storm water flows through a settlement pond and skimmer outlet prior to discharging.	1-H, 1-U	Sediment accumulated inside the settling basin is removed when it reaches 1/2 the height of the original dam. System inspected regularly to ensure proper function, Advanced Disposal-Cedar Hill Landfill.
Size: / Flow Rate:		
Outfall Number DC005		
Operations Contributing to Flow		
Operation	Average Flow	
Horizontal Engineering Training: Storm Water Discharges Associated with Construction Activities Land Disturbance	0.002 MGD	
Treatment Units		
Description (include size, flow rate through each treatment unit, retention time, etc.)	Code from Exhibit 2D-1	Final Disposal of Solid or Liquid Wastes Other Than by Discharge
All storm water flows through a settlement pond and skimmer outlet prior to discharging.	1-H, 1-U	Sediment accumulated inside the settling basin is removed when it reaches 1/2 the height of the original dam. System inspected regularly to ensure proper function, Advanced Disposal-Cedar Hill Landfill.
Size: / Flow Rate:		
Outfall Number DC006		
Operations Contributing to Flow		
Operation	Average Flow	
Horizontal Engineering Training: Storm Water Discharges Associated with Construction Activities Land Disturbance	0.002 MGD	
Treatment Units		
Description (include size, flow rate through each treatment unit, retention time, etc.)	Code from Exhibit 2D-1	Final Disposal of Solid or Liquid Wastes Other Than by Discharge
All storm water flows through a settlement pond and skimmer outlet prior to discharging.	1-H, 1-U	Sediment accumulated inside the settling basin is removed when it reaches 1/2 the height of the original dam. System inspected regularly to ensure proper function, Advanced Disposal-Cedar Hill Landfill.
Size: / Flow Rate:		

ADEM Permit Form 2D NPDES - ATTACHMENT B

ROCK CRUSHER SITE 4

Outfall Number OF007

Operations Contributing to Flow

Operation	Average Flow
Rock Crusher Site 3: Storm Water Discharges Associated with the Manufacture of Stone, Glass, and Clay Products	0.010 MGD

Treatment Units

Description (include size, flow rate through each treatment unit, retention time, etc.)	Code from Exhibit 2D-1	Final Disposal of Solid or Liquid Wastes Other Than by Discharge
All storm water flows through a settlement pond and skimmer outlet prior to discharging.	1-H, 1-U	Sediment accumulated inside the settling basin is removed when it reaches 1/2 the height of the original dam. System inspected regularly to ensure proper function, Advanced Disposal-Cedar Hill Landfill.
Size: / Flow Rate:		

Outfall Number OF008

Operations Contributing to Flow

Operation	Average Flow
Rock Crusher Site 3: Storm Water Discharges Associated with the Manufacture of Stone, Glass, and Clay Products	0.010 MGD

Treatment Units

Description (include size, flow rate through each treatment unit, retention time, etc.)	Code from Exhibit 2D-1	Final Disposal of Solid or Liquid Wastes Other Than by Discharge
All storm water flows through a settlement pond and skimmer outlet prior to discharging.	1-H, 1-U	Sediment accumulated inside the settling basin is removed when it reaches 1/2 the height of the original dam. System inspected regularly to ensure proper function, Advanced Disposal-Cedar Hill Landfill.
Size: / Flow Rate:		

Outfall Number OF009

Operations Contributing to Flow

Operation	Average Flow
Rock Crusher Site 3: Storm Water Discharges Associated with the Manufacture of Stone, Glass, and Clay Products	0.010 MGD

Treatment Units

Description (include size, flow rate through each treatment unit, retention time, etc.)	Code from Exhibit 2D-1	Final Disposal of Solid or Liquid Wastes Other Than by Discharge
All storm water flows through a settlement pond and skimmer outlet prior to discharging.	1-H, 1-U	Sediment accumulated inside the settling basin is removed when it reaches 1/2 the height of the original dam. System inspected regularly to ensure proper function, Advanced Disposal-Cedar Hill Landfill.
Size: / Flow Rate:		

Outfall Number OF010

Operations Contributing to Flow

Operation	Average Flow
Rock Crusher Site 3: Storm Water Discharges Associated with the Manufacture of Stone, Glass, and Clay Products	0.010 MGD

Treatment Units

Description (include size, flow rate through each treatment unit, retention time, etc.)	Code from Exhibit 2D-1	Final Disposal of Solid or Liquid Wastes Other Than by Discharge
All storm water flows through a settlement pond and skimmer outlet prior to discharging.	1-H, 1-U	Sediment accumulated inside the settling basin is removed when it reaches 1/2 the height of the original dam. System inspected regularly to ensure proper function, Advanced Disposal-Cedar Hill Landfill.
Size: / Flow Rate:		

ADEM Permit Form 2D NPDES - ATTACHMENT C

Section 5: Intermittent or Seasonal Flows (40 CFR 122.21(k)(3)(iii))

5.2 Provide information on intermittent or seasonal flows for each applicable outfall. Attach additional pages, if necessary.

UNIT TRAINING EQUIPMENT SITE (UTES) #1 SITE 1

Outfall Number	Operations (list)	Frequency		Rate and Volume		Duration
		Average Days / Week	Average Days / Week	Maximum Days / Week	Maximum Days / Week	
DC001	Discharge Associated with Vehicle and Equipment Exterior Washing Operations	days / weeks	Months / year	mgd	gallons	

UNIT TRAINING EQUIPMENT SITE (UTES) #1 / FMS 10 SITE 2

Outfall Number	Operations (list)	Frequency		Rate and Volume		Duration
		Average Days / Week	Average Days / Week	Maximum Days / Week	Maximum Days / Week	
DC002	Discharge Associated with Vehicle and Equipment Exterior Washing Operations	days / weeks	Months / year	mgd	gallons	

HORIZONTAL ENGINEERING TRAINING SITE 3

Outfall Number	Operations (list)	Frequency		Rate and Volume		Duration
		Average Days / Week	Average Days / Week	Maximum Days / Week	Maximum Days / Week	
DC003	Storm Water Discharges Associated with Construction Activities Land Disturbance	days / weeks	Months / year	mgd	gallons	
DC004	Storm Water Discharges Associated with Construction Activities Land Disturbance	days / weeks	Months / year	mgd	gallons	
DC005	Storm Water Discharges Associated with Construction Activities Land Disturbance	days / weeks	Months / year	mgd	gallons	
DC006	Storm Water Discharges Associated with Construction Activities Land Disturbance	days / weeks	Months / year	mgd	gallons	

ROCK CRUSHER SITE 4

Outfall Number	Operations (list)	Frequency		Rate and Volume		Duration
		Average Days / Week	Average Days / Week	Maximum Days / Week	Maximum Days / Week	
DC007	Storm Water Discharges Associated with the Manufacture of Stone, Glass, and Clay Products	days / weeks	Months / year	mgd	gallons	
DC008	Storm Water Discharges Associated with the Manufacture of Stone, Glass, and Clay Products	days / weeks	Months / year	mgd	gallons	
DC009	Storm Water Discharges Associated with the Manufacture of Stone, Glass, and Clay Products	days / weeks	Months / year	mgd	gallons	
DC010	Storm Water Discharges Associated with the Manufacture of Stone, Glass, and Clay Products	days / weeks	Months / year	mgd	gallons	

ADEM Permit Form 2D NPDES - ATTACHMENT D

SECTION 7. EFFLUENT CHARACTERISTICS (40 CFR 122.21(k)(5))

UTES #1	
<u>Pollutant/Parameter</u>	<u>Avg Daily Value</u>
BOD	5.6
TSS	14
Oil and Grease	BDL
Ammonia	BDL
Flow	none past 24 hours
pH	6.42
Chlorine	0.05
Temp Winter	16.5 C

Horizontal Engineering Training Area	Grab sample from Retention Pond
<u>Pollutant/Parameter</u>	<u>Avg Daily Value</u>
BOD	19.3
TSS	1660
Oil and Grease	3.8
Ammonia	BDL
Flow	No Flow/grab sample
pH	4.45
Temp Winter	20.9 C

- Use HET data for Rock Crusher outfalls

FIGURE 1: UTES #1

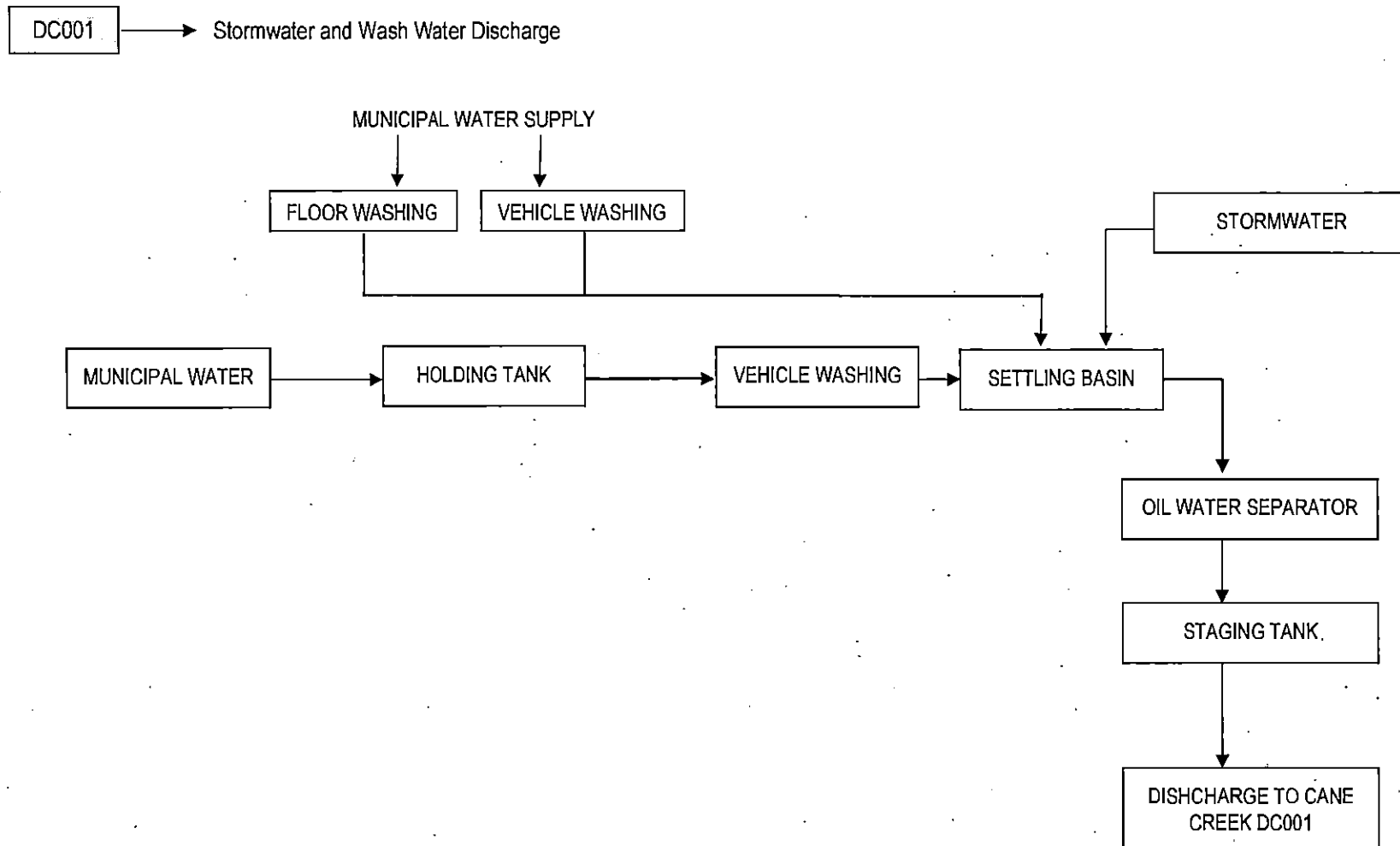


FIGURE 2: UTES #1 (FMS 10)

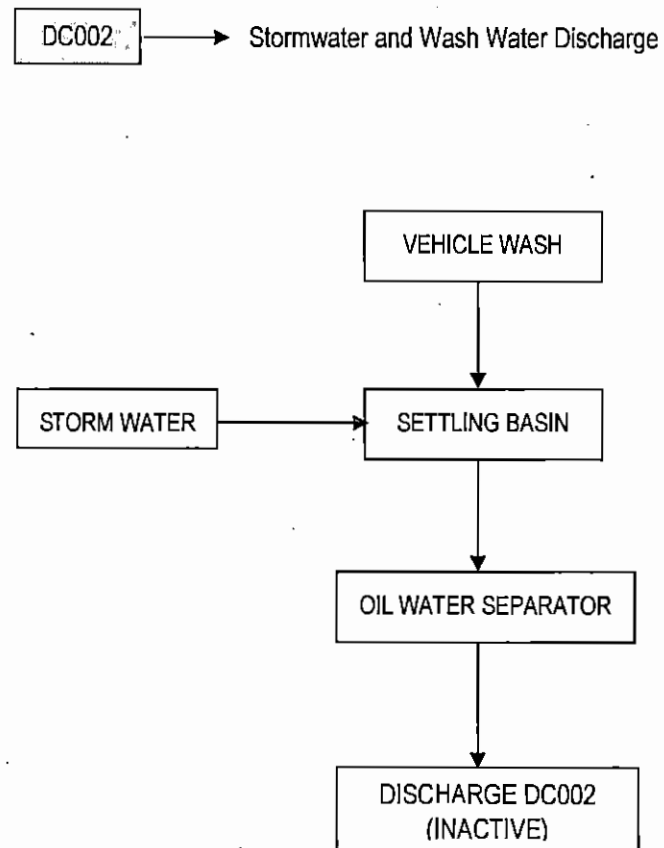


FIGURE 3: HORIZONTAL ENGINEERING TRAINING SITE

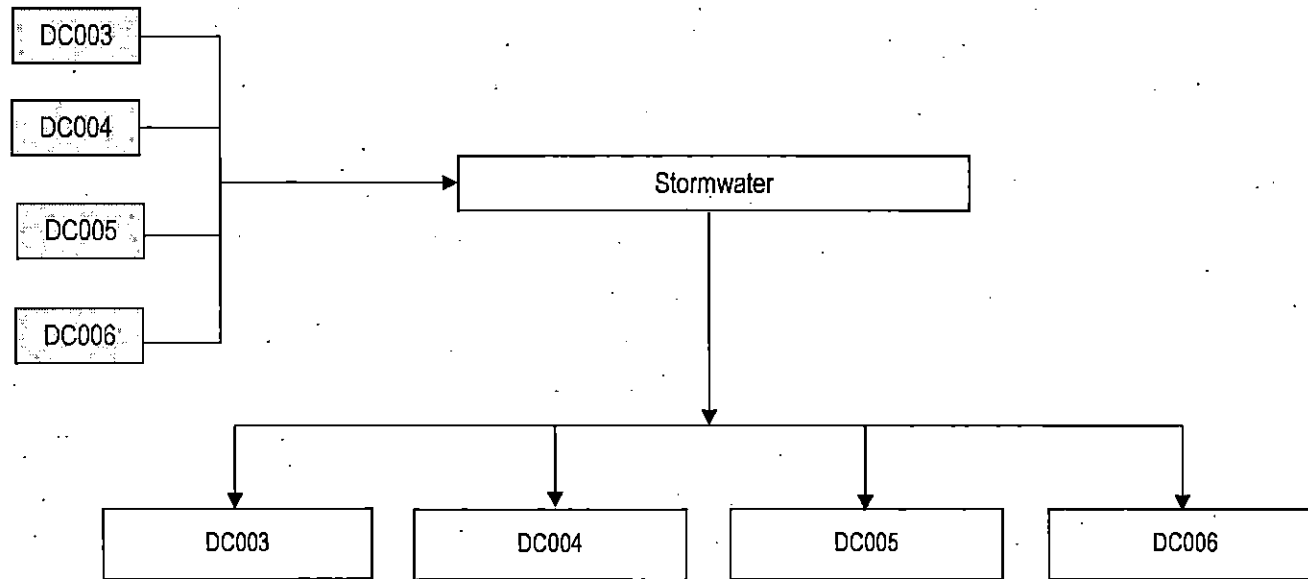
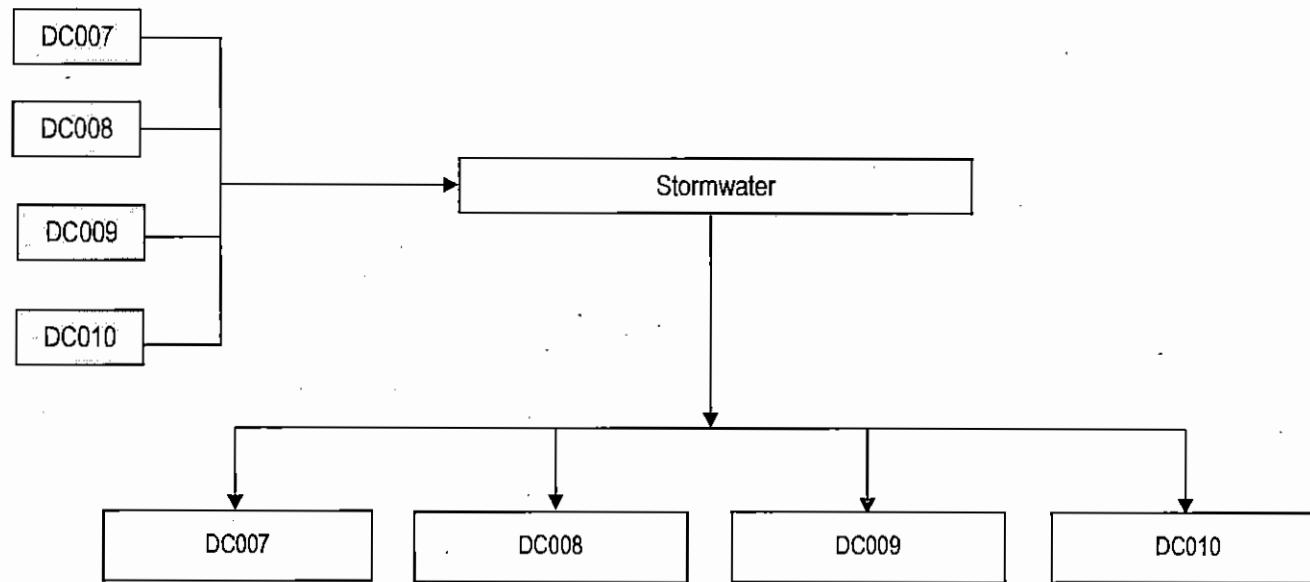


FIGURE 4: ROCK CRUSHER



ALABAMA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT (ADEM)
NOTICE OF INTENT – NPDES GENERAL PERMIT NUMBER ALG230000

Instructions: This form should be used to submit a Notice of Intent for coverage under NPDES General Permit Number ALG230000, which is the general permit authorizing storm water discharges associated with the manufacture of stone, glass, and clay products; non-contact cooling water; uncontaminated condensate; cooling tower blowdown; boiler blowdown; demineralizer wastewater; vehicle and equipment washwater; and storm water associated with fueling, petroleum storage and handling, equipment storage, and maintenance areas. Please mark the "Not Applicable" box if a section is not applicable. Incomplete or wrong answers could result in more stringent permit requirements. If space is insufficient to address any item below please continue answer on an attached sheet of paper. Mail completed form to:

ADEM-Water Division
Industrial General Permit Section
PO Box 301463
Montgomery, Alabama 36130-1463

FOR ADEM USE ONLY
NPDES PERMIT NUMBER
FACILITY NUMBER

PURPOSE OF THIS NOTICE OF INTENT

- [X] Initial request for coverage under NPDES General Permit Number ALG230000
[] Reissuance of coverage under NPDES General Permit Number ALG230000 (Current Permit No. ALG23_____)
[] Modification of coverage under NPDES General Permit Number ALG230000 (Current Permit No. ALG23_____)

FACILITY IDENTIFICATION INFORMATION

- A. Name of Permittee: Alabama Army National Guard
Name of Facility: Pelham Range Site 1, Site 2, and Site 3
- B. Mailing Address of Facility: – PO Box or Street Route 1720 Congressman Dickinson Drive
City, State and Zip Code Montgomery, Alabama 36109-0711
- C. Location (STREET ADDRESS) of Facility: Gate 3 Road
City, County: Alexandria, Alabama
- D. Provide the latitudinal and longitudinal coordinates of the facility location. (Front Gate):
Latitude (33) ° (44) ' (23.66) " N Longitude (85) ° (59) ' (16.78) " W
- E. Facility Contact Person:
Name: Brad Curvin Title: Environmental Compliance Supervisor
Phone Number: 334-523-4027 Email Address: bradley.n.curvin.nfg@mail.mil
- F. Standard Industrial Code (SIC) [The primary SIC Code should reflect the primary activity of business (i.e. generates the highest revenue)]:
- | <u>SIC Code</u> | <u>SIC Description</u> |
|----------------------------|---------------------------------|
| 1. <u>7542</u> (Primary) | <u>Vehicle Wash</u> |
| 2. <u>1429</u> (Secondary) | <u>Crushed and Broken Stone</u> |
| 3. _____ (Tertiary) | _____ |
- G. Description of industrial activity and land use at the facility:

The facility is a training area for soldiers to practice crushing rock and stone in order to make gravel for road and paving operations in theatre.

- H. Check the type of discharge at your facility and complete the applicable sections associated with the type checked:
- ☐ Storm water discharges associated with the manufacture of stone, glass, and clay products (DSN001)
 - ☐ Discharges associated with non-contact cooling water, cooling tower blowdown, uncontaminated condensate, boiler blowdown, and demineralizer wastewater (DSN002)
 - ☐ Storm water discharges associated with fueling, petroleum storage and handling, equipment storage, and maintenance areas (DSN004 and DSN006)
 - ☒ Discharges associated with vehicle and equipment exterior washing operations that DO NOT use solvents (DSN007)
- I. Are any discharges in H. above combined? ☐ Yes ☐ No If YES, indicate which discharges are combined:
-
- J. Has the facility been issued an NPDES **INDIVIDUAL** permit?
- ☐ Yes ☒ No If YES, NPDES Permit No. AL00_____
- Do you intend to replace your individual permit with this General Permit? ☐ Yes ☐ No
- K. Has the facility been issued a State Indirect Discharge (SID) Permit?
- ☐ Yes ☒ No If YES, SID Permit No. IU_____
- L. Has the facility ever been issued coverage under an NPDES **GENERAL** Permit other than a permit listed in the "Purpose of this Notice of Intent" section? ☒ Yes ☐ No If YES, please provide the following:
- Permit Number: AL_0073016 Facility Name on Permit: Alabama Army National Guard UTES #1 Pelham Range
- M. Are any discharges that you intend to be covered by this general permit going to municipal storm sewer?
- ☐ Yes ☒ No
- N. Name of surface water to which the municipal storm sewer discharges: _____
- O. Have you notified the municipality by letter as required by 40 CFR §122.26(a)(4)? ☐ Yes ☐ No
- P. Date facility started or will start operations: August 1, 2018
- Q. What is the size of the site in acres? Approximately 13.4 Acres
- R. Do you discharge to any waters of the State that are impaired (303(d) or TMDL)? ☐ Yes ☒ No
- (A list of the impaired waters can be found at <http://www.adem.state.al.us/programs/water/303d.cnt> for 303(d) listed waters and <http://www.adem.state.al.us/programs/water/approvedTMDLs.htm> for waters subject to a TMDL.)
- If YES, do your discharges contain pollutants of concern listed for the impaired water(s)? ☐ Yes ☐ No
- If YES, then enhanced BMPs are required. Also, an Individual NPDES Permit may be required, so please contact the Industrial Section of ADEM's Water Division before proceeding.
- S. Is your facility located in a coastal zone (i.e. within 10-foot contour of sea-level)? ☐ Yes ☒ No
- T. Does any discharge or runoff from the facility reach a public water supply stream segment as defined by ADEM Administrative Code r. 335-6-11-.02? ☐ Yes ☒ No
- U. Does any discharge or runoff from the facility reach an Outstanding Alabama Water or Outstanding Natural Resource Water stream segment as defined by ADEM Administrative Code r. 335-6-11-.02? ☐ Yes ☒ No
- If YES, the facility cannot be covered under this general permit. Please contact the Industrial Section of ADEM's Water Division before proceeding.

DSN001: STORM WATER DISCHARGES ASSOCIATED WITH STORAGE THE MANUFACTURING OF STONE, GLASS, AND CLAY PRODUCTS

NOT APPLICABLE []

A. List latitude and longitude (to seconds) of the point where each discharge exits your property (i.e. outfall) and name of receiving stream: Refer to Attachment C, DC003 - DC006

1. Latitude ()° ()' ()" N Longitude ()° ()' ()" W

Receiving Stream _____

2. Latitude ()° ()' ()" N Longitude ()° ()' ()" W

Receiving Stream _____

3. Latitude ()° ()' ()" N Longitude ()° ()' ()" W

Receiving Stream _____

B. Has storm water runoff from the facility been analyzed for presence of any known pollutants? [] Yes [X] No
If YES, attach the most recent copy of the analysis.

C. Storm water runoff primarily discharges to (check only one):

[] Surface water

[X] Seeps into the ground

[] Municipal storm sewer

D. This general permit requires the development and implementation of a Best Management Practice (BMP) Plan. Does the facility have a BMP Plan? [X] Yes [] No

E. Does the facility have any of the following other control measures to prevent pollution?

1. Structural control measures (basins, etc.) [X] Yes [] No

2. Treatment of groundwater (retention, aeration) [] Yes [X] No

3. Other. If so, please describe:

F. Are there any known impacts on the receiving water as a result of any discharges under DSN001? [] Yes [X] No
If YES, to what extent?

G. Were there any past industrial activities on the site that would contribute to storm water contamination?
[] Yes [X] No If YES, please explain:

H. Is process/wash down water mixed with storm water during rain events? [] Yes [X] No If NO, please explain:

- I. Are any raw materials, finished products, waste products or chemicals exposed to storm water currently or in the last three years? ☒ Yes ☐ No If YES, please list:

The raw stone material and the finished gravel will be exposed to storm water

DSN002: DISCHARGES ASSOCIATED WITH NON-CONTACT COOLING WATER, COOLING TOWER BLOWDOWN, UNCONTAMINATED CONDENSATE, BOILER BLOWDOWN, AND DEMINERALIZER WASTEWATER

NOT APPLICABLE [X]

A. List latitude and longitude (to seconds) of the point where each discharge exits your property (i.e. outfall), name of receiving stream, and type of discharge (non-contact cooling water, cooling tower blowdown, uncontaminated condensate, boiler blowdown, or demineralizer wastewater):

1. Latitude ()° ()' ()" N Longitude ()° ()' ()" W

Receiving Stream _____

Type of Discharge _____

2. Latitude ()° ()' ()" N Longitude ()° ()' ()" W

Receiving Stream _____

Type of Discharge _____

3. Latitude ()° ()' ()" N Longitude ()° ()' ()" W

Receiving Stream _____

Type of Discharge _____

4. Latitude ()° ()' ()" N Longitude ()° ()' ()" W

Receiving Stream _____

Type of Discharge _____

5. Latitude ()° ()' ()" N Longitude ()° ()' ()" W

Receiving Stream _____

Type of Discharge _____

B. If more than one discharge is listed for DSN002, can they be sampled separately? [] Yes [] No

C. Is there any process water commingled with the cooling and/or blowdown water prior to discharge? [] Yes [] No

If YES, can they all be sampled separately prior to commingling? [] Yes [] No

D. Does surface water intake total 2 million gallons per day or more? [] Yes [] No

If YES, is 25% or more of the surface water intake used for cooling purposes? [] Yes [] No

E. Is the non-contact cooling water and the cooling tower blowdown discharge less than 100,000 gallons per day (GPD)?

[] Yes [] No If NO, provide the estimated gallons per day of discharge: _____ GPD

F. Do you use biocides, corrosion inhibitors, or chemical additives in your cooling or blowdown water? [] Yes [] No

If YES, please submit a list of the biocides, corrosion inhibitors, or chemical additives used with this NOI and submit an MSDS sheet for each biocide or chemical. The applicant must also provide the following information for each biocide or chemical:

(1) Name and general composition of biocide or chemical (if composition is not provided on MSDS sheet),

- (2) 48-hour or 96-hour LC50 data for organisms representative of the biota of the waterway into which the discharge will ultimately reach. For freshwater, the fathead minnow (*Pimephales promelas*) and cladoceran (*Ceriodaphnia dubia*) are the test organisms. For salt water, the mysid shrimp and the sheepshead minnow or inland silverside are the test organisms. Other acceptable aquatic organisms may be allowed by the Department if sufficient information is provided. *If the MSDS sheet does not provide data for the organisms specified above, the facility must provide the data unless the Department grants approval for an alternate organism.*
- (3) Quantities to be used,
- (4) Frequencies of use,
- (5) Maximum proposed discharge concentrations, and
- (6) EPA registration of number, if applicable and is not provided on the MSDS sheet.

*BIOCIDES THAT CONTAIN TRIBUTYL TIN, TRIBUTYL TIN OXIDE, ZINC AND/OR CHROMIUM ARE PROHIBITED BY THIS GENERAL PERMIT

G. Is any discharge located in the Tennessee or Cahaba River Basin or on the Tallapoosa River between Thurlow Dam at Tallassee and the junction of the Coosa River and Tallapoosa River? ☐ Yes ☐ No

H. Is the boiler blowdown discharge less than 5,000 gallons per day (GPD)? ☐ Yes ☐ No

If NO, provide the estimated gallons per day of discharge _____ GPD

I. Is shock chlorination used at the facility? ☐ Yes ☐ No

J. Is any source water chlorinated? ☐ Yes ☐ No If YES, please list the applicable outfall number(s) from DSN002.

K. Is demineralizer wastewater discharged? ☐ Yes ☐ No

L. Are there any known impacts on the receiving water as a result of any discharges under DSN002? ☐ Yes ☐ No

If YES, to what extent?

M. Is there a cooling water intake structure (CWIS) associated with this facility? ☐ Yes ☐ No

N. Does the provider of your source water operate a CWIS? ☐ Yes ☐ No (Note: If your source water is from a WTP that also supplies drinking water, then the answer is "No").

If the answer to either M. or N. above (or both) is YES, then a Cooling Water Intake Structure Form (ADEM Form 510) must be completed and attached to this NOI.

O. Is cooling/blowdown water **chlorine free** from the time it enters your facility until it is discharged (Note: city water usually contains chlorine)? ☐ Yes ☐ No If YES, skip P. and Q. below.

P. If you answered NO to O. above, is the distance from the point of the facility's discharge to the point of entry into the receiving stream greater than 2,500 feet for any of the chlorinated outfalls listed for DSN002?

☐ Yes ☐ No If YES, list which outfalls meet this criteria:

For outfalls listed in P. above, you are not required to monitor for chlorine at that outfall if you meet the following criteria:

1. Submit lab data with the Notice of Intent (NOI) that demonstrates that the chlorine concentration at the point the discharge enters the impacted stream is 0.011 mg/l or less, **AND**
2. Submit a site drawing showing that the distance from the discharge point to the point the effluent enters the impacted stream is greater than 2,500 feet.

Q. For outfalls listed in P. above, do you intend to exercise the no chlorine monitoring option? ☐ Yes ☐ No

For which outfall(s)? _____

If you answered Yes to Q. above, you are certifying by signing this form that the criteria for not being required to monitor for chlorine have been met and you are certifying that you understand that you are required to notify ADEM if these conditions change during the term of the permit.

DSN004 AND DSN006: STORM WATER DISCHARGES ASSOCIATED WITH FUELING, PETROLEUM STORAGE AND HANDLING, EQUIPMENT STORAGE, AND MAINTENANCE AREAS

NOT APPLICABLE [X]

A. List latitude and longitude (to seconds) of the point where each discharge exits your property (i.e. outfall) and name of receiving stream:

1. Latitude ()° ()' ()" N Longitude ()° ()' ()" W

Receiving Stream _____

2. Latitude ()° ()' ()" N Longitude ()° ()' ()" W

Receiving Stream _____

3. Latitude ()° ()' ()" N Longitude ()° ()' ()" W

Receiving Stream _____

4. Latitude ()° ()' ()" N Longitude ()° ()' ()" W

Receiving Stream _____

B. List type(s), size(s), and number of storage tanks of each type and size.

Type	Size (gallons)	Number of Tanks
[] AST [] UST		
[] AST [] UST		
[] AST [] UST		
[] AST [] UST		
[] AST [] UST		
[] AST [] UST		
[] AST [] UST		
[] AST [] UST		
[] AST [] UST		
[] AST [] UST		
[] AST [] UST		
[] AST [] UST		
[] AST [] UST		

AST = Aboveground Storage Tank

UST = Underground Storage Tank

C. Has storm water runoff from the facility been analyzed for presence of any known pollutants? [] Yes [] No
If YES, attach the most recent copy of analysis.

D. Storm water runoff primarily discharges to (check only one):

[] Surface water

[] Seeps into the ground

[] Municipal storm sewer

E. This general permit requires the development and implementation of a Best Management Practices (BMP) plan.
Does the facility have a BMP Plan? [] Yes [] No

F. Does the facility have any of the following other control measures to prevent pollution?

1. Structural control measures (basins, etc.) ☐ Yes ☐ No
2. Treatment of groundwater (retention, aeration) ☐ Yes ☐ No
3. Other. If so, please describe:

G. Are there any known impacts on the receiving water as a result of any discharges under DSN004 and DSN006?
☐ Yes ☐ No If YES, to what extent?

H. Have any leaks, spills or other instances of storm water contamination occurred within the last 3 years?

☐ Yes ☐ No If YES, what occurred and how did it happen?

I. For above ground tanks that contain a possible pollutant, are all of the tanks either double-walled construction and/or located within secondary containment (diked)? ☐ Yes ☐ No If NO, identify each tank, its capacity, and its contents:

J. Are there tanks located within secondary containment (diked)? ☐ Yes ☐ No If YES, answer 1. and 2. below:

1. Can dikes contain 110% of the contents of the largest tank in the dike? ☐ Yes ☐ No
2. Are the walls and floors of the dikes relatively impermeable to the stored substance? ☐ Yes ☐ No

K. From which outfalls listed for DSN004 and DSN006 is uncontaminated storm water from secondary containment areas discharged (for above ground storage tanks only)? _____

L. Is treated or untreated water from tank bottoms or water draws discharged on site? ☐ Yes ☐ No

If YES, this particular discharge cannot be covered under this general permit. Please contact the Industrial Section of ADEM's Water Division before proceeding.

M. Were there any past industrial activities on the site that would contribute to storm water contamination?
☐ Yes ☐ No If YES, please explain:

N. Does the facility handle leaded fuels? ☐ Yes ☐ No

O. Does the facility handle aviation fuel, jet fuel, or diesel fuel? ☐ Yes ☐ No

P. Is hydrostatic testing of petroleum handling equipment done on site? ☐ Yes ☐ No If YES, this particular discharge cannot be covered under this general permit. Please contact the Industrial Section of ADEM's Water Division before proceeding.

Q. Are any trucks or equipment fueled at this facility? ☐ Yes ☐ No

If YES, is your fueling area protected from storm water, including flowing water? ☐ Yes ☐ No

If YES, please explain:

R. Is storm water from the fueling/loading area treated (oil/water separator, etc.) prior to discharge? ☐ Yes ☐ No

S. Is this facility subject to the requirement to prepare and implement a Spill Prevention, Control, and Countermeasure (SPCC) Plan under 40 CFR Part 112? ☐ Yes ☐ No

If YES, on what date was the SPCC Plan last certified: _____

In accordance with 40 CFR §112.5(b), applicable facilities must complete a review of the SPCC Plan **at least once every five years**. If the SPCC Plan has not been certified in the last five years, is the SPCC Plan currently being reviewed by a Professional Registered Engineer? ☐ Yes ☐ No If NO, please explain why:

T. Is storm water from fueling areas allowed to mix with storm water from other industrial activities? ☐ Yes ☐ No

DSN007: DISCHARGES ASSOCIATED WITH VEHICLE AND EQUIPMENT EXTERIOR WASHING OPERATIONS

NOT APPLICABLE [X]

A. List latitude and longitude (to seconds) of the point where each discharge exits your property (i.e. outfall) and name of receiving stream:

1. Latitude ()° ()' ()" N Longitude ()° ()' ()" W

Receiving Stream _____

2. Latitude ()° ()' ()" N Longitude ()° ()' ()" W

Receiving Stream _____

3. Latitude ()° ()' ()" N Longitude ()° ()' ()" W

Receiving Stream _____

4. Latitude ()° ()' ()" N Longitude ()° ()' ()" W

Receiving Stream _____

B. Is this process water commingled with storm water prior to discharge? [] Yes [] No

C. Has the process water been analyzed for presence of any known pollutants? [] Yes [] No
If YES, attach the most recent copy of the analysis.

D. Give a detailed description of wash water use, additives, location, ultimate disposal, etc.

E. Do you wash interior of tank rail cars or tank trailers? [] Yes [] No

If YES, the facility cannot be covered under this General Permit. Please contact the Industrial Section of ADEM's Water Division before proceeding.

F. How do you dispose of spent oil, hydraulic fluids and any other potential pollutants that you handle?

G. Does the facility handle diesel equipment or diesel fuel? [] Yes [] No

H. Does your facility use organic or petroleum based solvents in its washing operations? [] Yes [] No

If YES, the facility cannot be covered under this general permit. Please contact the Industrial Section of ADEM's Water Division before proceeding.

GENERAL INFORMATION

Have you included a check for the application fee? [] Yes [X] No

DO NOT SUBMIT APPLICATION AND PERMIT FEE SEPARATELY

CERTIFICATION: 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 or imprisonment for knowing violations.

SIGNATURES

Responsible Official Signature:  Date Signed: 6/30/2020

Name (type or print): _____ Official Title: Training Center Director

NOTE: This Notice of Intent must be signed by the official representative of the facility who is: the owner, the sole proprietor of a sole proprietorship, a general partner for a partnership, or by a ranking elected official or other duly authorized representative for a unit of government or principal executive officer **of at least the level of vice president**, or a manager assigned or delegated in accordance with corporate procedures, with such delegation submitted in writing if required by the Department, who is responsible for manufacturing, production, or operating facilities and is authorized to make management decisions which govern the operation of the regulated. If the Notice of Intent is not signed, or is found to be incomplete, it will be returned.

RO Mailing Address: Ft. McClellan Army National Guard Training Center, Attn: _____, P.O. Box 5280, Ft. McClellan, AL 36205-0280

RO Phone Number: 256-847-4101 RO Email Address: _____

DISCHARGE MONITORING REPORTS (DMR) CONTACT – PLEASE COMPLETE

DMR Contact Name (type or print): Brad Curvin Official Title: Environmental Compliance Supervisor

DMR Contact Address: 1720 Congressman Dickinson Drive, Montgomery, AL 36109

DMR Contact Phone Number: 334-523-4027 Email Address: bradley.n.curvin.nfg@mail.mil

NOI PREPARER

Name of Individual (type or print): Brad Curvin

Name of Firm: Alabama Army National Guard

Address: 1720 Congressman Dickinson Drive, Montgomery, AL 36109

Phone Number: 334-523-4027 Email Address: bradley.n.curvin.nfg@mail.mil

Please attach or in the space below draw a map showing the location of the facility including major highways and/or landmarks.

JMR+H

Architecture, PC

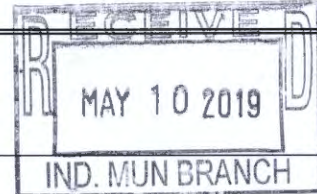
TRANSMITTAL

TO:

Scott Ramsey
NFG NG ALARNG (US)

FROM:

Leah Ackerman



COMPANY:

ADEM

DATE:

May 10, 2019

ADDRESS:

Industrial Permits Section
Water Division
1400 Coliseum Blvd
Montgomery, AL 36110-2400

PROJECT:

National Pollutant Discharge Elimination System
(NPDES) Permit Application for the Alabama Army
National Guard's Pelham Range Training Area

PHONE NUMBER:

(334) 271-7700

ARCHITECT'S PROJECT NUMBER:

18-827

☒ REVIEW ☒ APPROVAL ☐ DISTRIBUTION TO PARTIES ☐ RECORD ☐ INFORMATION

☐ DRAWINGS ☐ PROJECT MANUAL ☐ CHANGE ORDER ☒ OTHER

COPIES:

1

DATE:

5/10/19

DESCRIPTION:

NPDES Permit Application

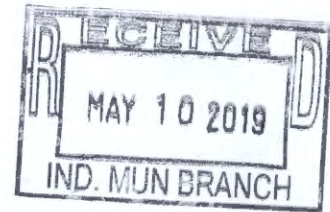
NOTES/COMMENTS:

Thank You!



STATE MILITARY DEPARTMENT
JOINT FORCES HEADQUARTERS ALABAMA NATIONAL GUARD
1720 CONGRESSMAN WILLIAM L. DICKINSON DRIVE
P. O. BOX 3711
MONTGOMERY, AL 36109-0711

7 May 2019



Mr. Scott Ramsey
ADEM
Industrial Permits Section
Water Division
1400 Coliseum Blvd
Montgomery, AL 36110-2400

SUBJECT: Industrial Permit for Pelham Range

Dear Mr. Ramsey,

Attached you will find the National Pollutant Discharge Elimination System (NPDES) permit application for the Alabama Army National Guard's Pelham Range Training Area. Pelham Range is located in Alexandria, AL in Calhoun County. As we previously discussed, the NPDES permit for Pelham Range will cover multiple sites located throughout the range. These areas will include the UTES #1 facility, the Horizontal Engineering Training Area, and the Rock Crusher Site.

The permit application prepared by JMR+H PC along with the permit application fee of \$5615.00 are enclosed.

Additional questions or comments should be addressed to Mr. Brad Curvin at (334) 523-4027 or emailed to Bradley.n.curvin.nfg@mail.mil.

Sincerely,

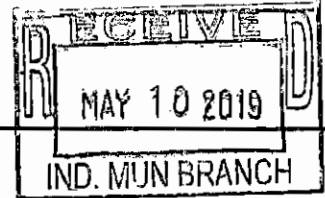
Gregory S. Hayes
State Military Environmental Manager
Joint Force Headquarters
Alabama Army National Guard

Enclosure

ALABAMA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT (ADEM)
NPDES INDIVIDUAL PERMIT APPLICATION
SUPPLEMENTARY INFORMATION FOR INDUSTRIAL FACILITIES

Instructions: This form should be used to submit the required supplementary information for an application for an NPDES individual permit for industrial facilities. The completed application should be submitted to ADEM in duplicate. If insufficient space is available to address any item, please continue on an attached sheet of paper. Please mark "N/A" in the appropriate box when an item is not applicable to the applicant. Please type or print legibly in blue or black ink. Mail the completed application to:

ADEM-Water Division
Industrial Section
P O Box 301463
Montgomery, AL 36130-1463



PURPOSE OF THIS APPLICATION

- ☐ Initial Permit Application for New Facility*
☐ Modification of Existing Permit
☐ Revocation & Reissuance of Existing Permit

- ☒ Initial Permit Application for Existing Facility*
☐ Reissuance of Existing Permit

* An application for participation in the ADEM's Electronic Environmental (E2) Reporting must be submitted to allow permittee to electronically submit reports as required.

SECTION A - GENERAL INFORMATION

1. Facility Name: Pelham Range
 - a. Operator Name: Alabama Army National Guard
 - b. Is the operator identified in A.1.a, the owner of the facility? ☐ Yes ☒ No
If no, provide name and address of the operator and submit information indicating the operator's scope of responsibility for the facility.
The United States Corps of Engineers
The Alabama Army National Guard is responsible party for the entire Pelham Range
2. NPDES Permit Number: AL _____ (not applicable if initial permit application)
3. SID Permit Number (if applicable): IU _____ - _____ - _____
4. NPDES General Permit Number (if applicable): ALG _____
5. Facility Physical Location: (Attach a map with location marked; street, route no. or other specific identifier)
Street: Gate 3 Road
City: Alexandria County: Calhoun State: AL Zip: 36250
Facility Location (Front Gate): Latitude: 33 degrees 43'43"N Longitude: 85 degrees 53'23"W
6. Facility Mailing Address: 1720 Congressman Dickinson Drive
City: Montgomery County: Montgomery State: AL Zip: 36109
7. Responsible Official (as described on the last page of this application):
Name and Title: LTC Robert A. Bjornson, Training Center Director
Address: 1720 Congressman Dickinson Drive
City: Montgomery State: AL Zip: 36109
Phone Number: 256-847-4101 Email Address: robert.a.bjornson.mil@mail.mil
8. Designated Facility Contact:
Name and Title: Brad Curvin, Environmental Compliance Supervisor
Phone Number: 334-523-4027 Email Address: bradley.n.curvin.nfg@mail.mil

9. Designated Discharge Monitoring Report (DMR) Contact:

Name and Title: Brad Curvin, Environmental Compliance Supervisor

Phone Number: 334-523-4027

Email Address: bradley.n.curvin.nfg@mail.mil

10. Type of Business Entity:

- ☐ Corporation ☐ General Partnership ☐ Limited Partnership ☐ Limited Liability Company ☐ Sole Proprietorship
☒ Other (Please Specify) Government/Military

11. Complete this section if the Applicant's business entity is a Corporation

a) Location of Incorporation:

Address: NA

City: NA County: NA State: NA Zip: NA

b) Parent Corporation of Applicant:

Name: NA

Address: NA

City: NA State: NA Zip: NA

c) Subsidiary Corporation(s) of Applicant:

Name: NA

Address: NA

City: NA State: NA Zip: NA

d) Corporate Officers:

Name: NA

Address: N/A

City: NA State: NA Zip: NA

Name: NA

Address: NA

City: NA State: NA Zip: NA

e) Agent designated by the corporation for purposes of service:

Name: NA

Address: NA

City: NA State: NA Zip: NA

12. If the Applicant's business entity is a Partnership, please list the general partners.

Name: NA

Address: NA

City: NA State: NA Zip: NA

Name: NA

Address: NA

City: NA State: NA Zip: NA

13. If the Applicant's business entity is a Proprietorship, please enter the proprietor's information.

Name: NA
Address: NA
City: NA State: NA Zip: NA

14. Permit numbers for Applicant's previously issued NPDES Permits and identification of any other State of Alabama Environmental Permits presently held by the Applicant, its parent corporation, or subsidiary corporations within the State of Alabama:

<u>Permit Name</u>	<u>Permit Number</u>	<u>Held By</u>
UTES #1 Pelham Range	AL0073016	Alabama Army National Guard
FT. Rucker - UTES #2	AL0056502	Alabama Army National Guard

15. Identify all Administrative Complaints, Notices of Violation, Directives, Administrative Orders, or Litigation concerning water pollution, if any, against the Applicant, its parent corporation or subsidiary corporations within the State of Alabama within the past five years (attach additional sheets if necessary):

<u>Facility Name</u>	<u>Permit Number</u>	<u>Type of Action</u>	<u>Date of Action</u>
N/A			
N/A			
N/A			
N/A			
N/A			

SECTION B – BUSINESS ACTIVITY

1. Indicate applicable Standard Industrial Classification (SIC) Codes for all processes. If more than one applies, list in order of importance:

a. 9711
b. 7538
c. 1629
d. 1429
e.
f.

2. If your facility conducts or will be conducting any of the processes listed below (regardless of whether they generate wastewater, waste sludge, or hazardous waste), place a check beside the category of business activity (check all that apply):

Industrial Categories

- | | |
|--|---|
| <input type="checkbox"/> Aluminum Forming
<input type="checkbox"/> Asbestos Manufacturing
<input type="checkbox"/> Battery Manufacturing
<input type="checkbox"/> Can Making
<input type="checkbox"/> Canned and Preserved Fruit and Vegetables
<input type="checkbox"/> Canned and Preserved Seafood
<input type="checkbox"/> Cement Manufacturing
<input type="checkbox"/> Centralized Waste Treatment
<input type="checkbox"/> Carbon Black
<input type="checkbox"/> Coal Mining
<input type="checkbox"/> Coil Coating
<input type="checkbox"/> Copper Forming
<input type="checkbox"/> Electric and Electronic Components Manufacturing
<input type="checkbox"/> Electroplating
<input type="checkbox"/> Explosives Manufacturing
<input type="checkbox"/> Feedlots
<input type="checkbox"/> Ferroalloy Manufacturing
<input type="checkbox"/> Fertilizer Manufacturing
<input type="checkbox"/> Foundries (Metal Molding and Casting)
<input type="checkbox"/> Glass Manufacturing
<input type="checkbox"/> Grain Mills
<input type="checkbox"/> Gum and Wood Chemicals Manufacturing
<input type="checkbox"/> Inorganic Chemicals
<input type="checkbox"/> Iron and Steel
<input type="checkbox"/> Leather Tanning and Finishing
<input type="checkbox"/> Metal Finishing
<input type="checkbox"/> Meat Products | <input type="checkbox"/> Metal Molding and Casting
<input type="checkbox"/> Metal Products
<input type="checkbox"/> Nonferrous Metals Forming
<input type="checkbox"/> Nonferrous Metals Manufacturing
<input type="checkbox"/> Oil and Gas Extraction
<input type="checkbox"/> Organic Chemicals Manufacturing
<input type="checkbox"/> Paint and Ink Formulating
<input type="checkbox"/> Paving and Roofing Manufacturing
<input type="checkbox"/> Pesticides Manufacturing
<input type="checkbox"/> Petroleum Refining
<input type="checkbox"/> Phosphate Manufacturing
<input type="checkbox"/> Photographic
<input type="checkbox"/> Pharmaceutical
<input type="checkbox"/> Plastic & Synthetic Materials
<input type="checkbox"/> Plastics Processing Manufacturing
<input type="checkbox"/> Porcelain Enamel
<input type="checkbox"/> Pulp, Paper, and Fiberboard Manufacturing
<input type="checkbox"/> Rubber
<input type="checkbox"/> Soap and Detergent Manufacturing
<input type="checkbox"/> Steam and Electric
<input type="checkbox"/> Sugar Processing
<input type="checkbox"/> Textile Mills
<input type="checkbox"/> Timber Products
<input type="checkbox"/> Transportation Equipment Cleaning
<input type="checkbox"/> Waste Combustion
<input type="checkbox"/> Other (specify) _____ |
|--|---|

A facility with processes inclusive in these business areas may be covered by Environmental Protection (EPA) categorical standards. These facilities are termed "categorical users" and should skip to question 2 of Section C.

3. Give a brief description of all operations at this facility including primary products or services (attach additional sheets if necessary):

See Attachment A

SECTION C – WASTEWATER DISCHARGE INFORMATION

Facilities that checked activities in B.2 and are considered Categorical Industrial Users should skip to C.2 of this section.

1. **For Non-Categorical Users Only:** Provide wastewater flows for each of the processes or proposed processes. Using the process flow schematic (Figure 1), enter the description that corresponds to each process. **(The flow schematic should include all treatment units as well as monitoring and discharge points).** [New facilities should provide estimates for each discharge.]

Process Description	Last 12 Months (gals/day) Highest Month Avg. Flow	Highest Flow Year of Last 5 (gals/day) Monthly Avg. Flow	Discharge Type (batch, continuous, intermittent)
Vehicle Washing	7000 gal/day	5000 gal/day	Intermittent

If batch discharge occurs or will occur, indicate: [new facilities may estimate.]

- a. Number of batch discharges: _____ per day
- b. Average discharge per batch: _____ (GPD)
- c. Time of batch discharges _____ at _____
(days of week) (hours of day)
- d. Flow rate: _____ gallons/minute
- e. Percent of total discharge: _____

Non-Process Discharges (e.g. non-contact cooling water)	Last 12 Months (gals/day) Highest Month Avg. Flow	Highest Flow Year of Last 5 (gals/day) Monthly Avg. Flow
_____	_____	_____
_____	_____	_____

2. Complete this Section only if you are subject to **Categorical Standards** and plan to directly discharge the associated wastewater to a water of the State. If Categorical wastewater is discharged exclusively via an indirect discharge to a public or privately-owned treatment works, check "Yes" in the appropriate space below and proceed directly to part 2.c.

☐ Yes

For Categorical Users: Provide the wastewater discharge flows or production (whichever is applicable by the effluent guidelines) for each of your processes or proposed processes. Using the process flow schematic (Figure 1, pg 14), enter the description that corresponds to each process. [New facilities should provide estimates for each discharge.]

2a.

Regulated Process	Applicable Category	Applicable Subpart	Type of Discharge Flow (batch, continuous, intermittent)
N/A	N/A	N/A	N/A
_____	_____	_____	_____
_____	_____	_____	_____

2b.

Process Description	Last 12 Months (gals/day), (lbs/day), etc. Highest Month Average*	Highest Flow Year of Last 5 (gals/day), (lbs/day), etc. Monthly Average*	Discharge Type (batch, continuous, intermittent)
N/A	N/A	N/A	N/A
_____	_____	_____	_____
_____	_____	_____	_____

* Reported values should be expressed in units of the applicable Federal production-based standard. For example, flow (MGD), production (pounds per day), etc.

If batch discharge occurs or will occur, indicate: [new facilities may estimate.]

- a. Number of batch discharges: _____ per day
- b. Average discharge per batch: _____ (GPD)
- c. Time of batch discharges _____ at _____
(days of week) (hours of day)
- d. Flow rate: _____ gallons/minute
- e. Percent of total discharge: _____

2c.

Non categorical Process Description	Last 12 Months (gals/day) Highest Month Avg. Flow	Highest Flow Year of Last 5 (gals/day) Monthly Avg. Flow	Discharge Type (batch, continuous, intermittent)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

If batch discharge occurs or will occur, indicate: [new facilities may estimate.]

- a. Number of batch discharges: _____ per day
- b. Average discharge per batch: _____ (GPD)
- c. Time of batch discharges _____ at _____
(days of week) (hours of day)
- d. Flow rate: _____ gallons/minute
- e. Percent of total discharge: _____

2d.

Non-Process Discharges (e.g. non-contact cooling water)	Last 12 Months (gals/day) Highest Month Avg. Flow	Highest Flow Year of Last 5 (gals/day) Monthly Avg. Flow
_____	_____	_____
_____	_____	_____

All Applicants must complete C.3 – C.6.

3. Do you share an outfall with another facility? ☐ Yes ☒ No (If no, continue to C.4)

For each shared outfall, provide the following:

Applicant's Outfall No.	Name of Other Permittee/Facility	NPDES Permit No.	Where is sample collected by Applicant?
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

4. Do you have, or plan to have, automatic sampling equipment or continuous wastewater flow metering equipment at this facility?

Current: Flow Metering ☒ Yes ☐ No ☐ N/A
 Sampling Equipment ☐ Yes ☒ No ☐ N/A

Planned: Flow Metering ☒ Yes ☐ No ☐ N/A
 Sampling Equipment ☐ Yes ☒ No ☐ N/A

If so, please attach a schematic diagram of the sewer system indicating the present or future location of this equipment and describe the equipment below:

5. Are any process changes or expansions planned during the next three years that could alter wastewater volumes or characteristics?
☐ Yes ☒ No (If no, continue to C.6)

Briefly describe these changes and their anticipated effects on the wastewater volume and characteristics:

6. List the trade name and chemical composition of all biocides and corrosion inhibitors used:

Trade Name	Chemical Composition
N/A	

For each biocide and/or corrosion inhibitor used, please include the following information:

- (1) 96-hour median tolerance limit data for organisms representative of the biota of the waterway into which the discharge will ultimately reach,
- (2) quantities to be used,
- (3) frequencies of use,
- (4) proposed discharge concentrations, and
- (5) EPA registration number, if applicable

SECTION D – WATER SUPPLY

Water Sources (check as many as are applicable):

☐ Private Well

☒ Surface Water

☒ Municipal Water Utility (Specify City):

☐ Other (Specify):

IF MORE THAN ONE WELL OR SURFACE INTAKE, PROVIDE DATA FOR EACH ON AN ATTACHMENT

City: _____ MGD* Well: _____ MGD* Well Depth: _____ Ft. Latitude: _____ Longitude: _____

Surface Intake Volume: 0.00005 MGD* Intake Elevation in Relation to Bottom: _____ Ft.

Intake Elevation: 575 Ft. Latitude: 33.727554 Longitude: -85.904547

Name of Surface Water Source: Cane Creek

* MGD – Million Gallons per Day

Cooling Water Intake Structure Information

Complete D.1 and D.2 if your water supply is provided by an outside source and not by an onsite water intake structure? (e.g., another industry, municipality, etc...)

1. Does the provider of your source water operate a surface water intake? Yes ☐ No ☒
(If yes, continue, if no, go to Section E.)

a) Name of Provider: See Attachment B

b) Location of Provider: _____

c) Latitude: _____ Longitude: _____

2. Is the provider a public water system (defined as a system which provides water to the public for human consumption or which provides only treated water, not raw water)? ☒ Yes ☐ No (If yes, go to Section E, if no, continue.)

Only to be completed if you have a cooling water intake structure or the provider of your water supply uses an intake structure and does not treat the raw water.

3. Is any water withdrawn from the source water used for cooling? ☐ Yes ☒ No

4. Using the average monthly measurements over any 12-month period, approximately what percentage of water withdrawn is used exclusively for cooling purposes? _____ %

5. Does the cooling water consist of treated effluent that would otherwise be discharged? ☐ Yes ☐ No
(If yes, go to Section E, if no, complete D.6 – D.17)

6. a. Is the cooling water used in a once-through cooling system? ☐ Yes ☐ No

- b. Is the cooling water used in a closed cycle cooling system? ☐ Yes ☐ No

7. When was the intake installed? _____
(Please provide dates for all major construction/installation of intake components including screens)
8. What is the maximum intake volume? _____
(maximum pumping capacity in gallons per day)
9. What is the average intake volume? _____
(average intake pump rate in gallons per day average in any 30-day period)
10. What is the actual intake flow (AIF) as defined in 40 CFR §125.92(a)? _____ MGD
11. How is the intake operated? (e.g., continuously, intermittently, batch) _____
12. What is the mesh size of the screen on your intake? _____
13. What is the intake screen flow-through area? _____
14. What is the through-screen design intake flow velocity? _____ ft/sec
15. What is the through-screen actual velocity (in ft/sec)? _____ ft/sec
16. What is the mechanism for cleaning the screen? (e.g., does it rotate for cleaning) _____
17. Do you have any additional fish detraction technology on your intake? ☐ Yes ☐ No
18. Have there been any studies to determine the impact of the intake on aquatic organisms? ☐ Yes ☐ No (If yes, please provide.)
19. Attach a site map showing the location of the water intake in relation to the facility, shoreline, water depth, etc.

SECTION E – WASTE STORAGE AND DISPOSAL INFORMATION

Provide a description of the location of all sites involved in the storage of solids or liquids that could be accidentally discharged to a water of the state, either directly or indirectly via such avenues as storm water drainage, municipal wastewater systems, etc., which are located at the facility for which the NPDES application is being made. Where possible, the location should be noted on a map and included with this application:

Description of Waste	Description of Storage Location
Waste Oil	AST
Fuel	AST

Provide a description of the location of the ultimate disposal sites of solid or liquid waste by-products (such as sludges) from any wastewater treatment system located at the facility.

Description of Waste	Quantity (lbs/day)	Disposal Method*
OWS Sludge	< 1 ton / year	Off-Site Treatment Facility
Settling Basin Sediment	45.33 tons/year	Advanced Disposal-Cedar Hill Landfill

*Indicate which wastes identified above are disposed of at an off-site treatment facility and which are disposed of on-site. If any wastes are sent to an off-site centralized waste treatment facility, identify the waste and the facility.

SECTION F – COASTAL ZONE INFORMATION

Is the discharge(s) located within the 10-foot elevation contour and within the limits of Mobile or Baldwin County? ☐ Yes ☒ No
If yes, complete items F.1 – F.12:

- | | | | |
|---|------------------------|--------------------------|-------------------------------------|
| | No Construction | Yes | No |
| 1. Does the project require new construction? | | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 2. Will the project be a source of new air emissions? | N/A | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

	Yes	No
3. Does the project involve dredging and/or filling of a wetland area or water way? <u>N/A</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If Yes, has the Corps of Engineers (COE) permit been received? <u>N/A</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
COE Project No. <u>N/A</u>		
4. Does the project involve wetlands and/or submersed grassbeds? <u>N/A</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. Are oyster reefs located near the project site? <u>N/A</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If Yes, include a map showing project and discharge location with respect to oyster reefs		
6. Does the project involve the site development, construction and operation of an energy facility as defined in ADEM Admin. Code r. 335-8-1-.02(bb)? <u>N/A</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7. Does the project involve mitigation of shoreline or coastal area erosion? <u>N/A</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8. Does the project involve construction on beaches or dune areas? <u>N/A</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9. Will the project interfere with public access to coastal waters? <u>N/A</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10. Does the project lie within the 100-year floodplain? <u>N/A</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
11. Does the project involve the registration, sale, use, or application of pesticides? <u>N/A</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
12. Does the project propose or require construction of a new well or to alter an existing groundwater well to pump more than 50 gallons per day (GPD)? <u>N/A</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, has the applicable permit for groundwater recovery or for groundwater well installation been obtained? <u>N/A</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

SECTION G – ANTI-DEGRADATION EVALUATION

In accordance with 40 CFR §131.12 and the ADEM Admin. Code r. 335-6-10-.04 for anti-degradation, the following information must be provided, if applicable. It is the applicant's responsibility to demonstrate the social and economic importance of the proposed activity. If further information is required to make this demonstration, attach additional sheets to the application.

- Is this a new or increased discharge that began after April 3, 1991? ☐ Yes ☒ No
If yes, complete G.2 below. If no, go to Section H.
- Has an Anti-Degradation Analysis been previously conducted and submitted to the Department for the new or increased discharge referenced in G.1? ☐ Yes ☒ No

If yes, do not complete this section. If no, and the discharge is to a Tier II waterbody as defined in ADEM Admin. Code r. 335-6-10-.12(4), complete G.2.A – G.2.F below and ADEM Forms 311 and 313 (attached). ADEM Form 313 must be provided for each alternative considered technically viable.

Information required for new or increased discharges to high quality waters:

A. What environmental or public health problem will the discharger be correcting?

B. How much will the discharger be increasing employment (at its existing facility or as the result of locating a new facility)?

C. How much reduction in employment will the discharger be avoiding?

D. How much additional state or local taxes will the discharger be paying?

E. What public service to the community will the discharger be providing?

F. What economic or social benefit will the discharger be providing to the community?

SECTION H – EPA Application Forms

All Applicants must submit EPA permit application forms. More than one application form may be required from a facility depending on the number and types of discharges or outfalls found. The EPA application forms are found on the Department's website at <http://www.adem.alabama.gov/programs/water/waterforms.cnt>. The EPA application forms must be submitted in duplicate as follows:

1. All applicants must submit Form 1.
2. Applicants for existing industrial facilities (including manufacturing facilities, commercial facilities, mining activities, and silvicultural activities) which discharge process wastewater must submit Form 2C.
3. Applicants for new industrial facilities which propose to discharge process wastewater must submit Form 2D.
4. Applicants for new and existing industrial facilities which discharge only non-process wastewater (i.e., non-contact cooling water and/or sanitary wastewater) must submit Form 2E.
5. Applicants for new and existing facilities whose discharge is composed entirely of storm water associated with industrial activity must submit Form 2F, unless exempted by § 122.26(c)(1)(ii). If the discharge is composed of storm water and non-storm water, the applicant must also submit Forms 2C, 2D, and/or 2E, as appropriate (in addition to Form 2F).

SECTION I – ENGINEERING REPORT/BMP PLAN REQUIREMENTS

See ADEM 335-6-6-.08(i) & (j)

SECTION J– RECEIVING WATERS

Outfall No.	Receiving Water(s)	303(d) Segment?		Included in TMDL?*	
	See Attachment C	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
		<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
		<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
		<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
		<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No

*If a TMDL Compliance Schedule is requested, the following should be attached as supporting documentation:

- (1) Justification for the requested Compliance Schedule (e.g. time for design and installation of control equipment, etc.);
- (2) Monitoring results for the pollutant(s) of concern which have not previously been submitted to the Department (sample collection dates, analytical results (mass and concentration), methods utilized, MDL/ML, etc. should be submitted as available);
- (3) Requested interim limitations, if applicable;
- (4) Date of final compliance with the TMDL limitations; and,
- (5) Any other additional information available to support requested compliance schedule.

SECTION K – APPLICATION CERTIFICATION

The information contained in this form must be certified by a responsible official as defined in ADEM Administrative Code r. 335-6-6-.09 "signatories to permit applications and reports" (see below).

"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."

Signature of Responsible Official:  Date Signed: 9 May 19

Name and Title: LTC Robert A. Bjornson, Training Center Director

If the Responsible Official signing this application is not identified in Section A.7, provide the following information:

Mailing Address: P.O. Box 5280 Building 1060


City: Ft McClellan State: AL Zip: 36205

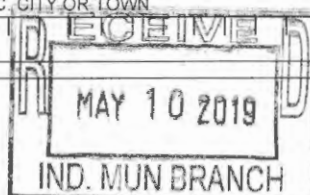
Phone Number: (256) 847-4101 Email Address: robert.a.bjornson.mil@mail.mil

335-6-6-.09 SIGNATORIES TO PERMIT APPLICATIONS AND REPORTS.

(1) The application for an NPDES permit shall be signed by a responsible official, as indicated below:

- (a) In the case of a corporation, by a principal executive officer of at least the level of vice president, or a manager assigned or delegated in accordance with corporate procedures, with such delegation submitted in writing if required by the Department, who is responsible for manufacturing, production, or operating facilities and is authorized to make management decisions which govern the operation of the regulated facility;
- (b) In the case of a partnership, by a general partner;
- (c) In the case of a sole proprietorship, by the proprietor; or
- (d) In the case of a municipal, state, federal, or other public entity, by either a principal executive officer, or ranking elected official.

FORM 1 GENERAL		 U.S. ENVIRONMENTAL PROTECTION AGENCY GENERAL INFORMATION Consolidated Permits Program <i>(Read the "General Instructions" before starting.)</i>		I. EPA I.D. NUMBER		
		S		T/A		
		F		D		
		1 2		13 14 15		
LABEL ITEMS		PLEASE PLACE LABEL IN THIS SPACE		GENERAL INSTRUCTIONS		
I. EPA I.D. NUMBER				If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent (the area to the left of the label space lists the information that should appear), please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete Items I, III, V, and VI (except VI-B which must be completed regardless). Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.		
III. FACILITY NAME						
V. FACILITY MAILING ADDRESS						
VI. FACILITY LOCATION						
II. POLLUTANT CHARACTERISTICS						
INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms .						
SPECIFIC QUESTIONS		Mark "X"		SPECIFIC QUESTIONS		
		YES	NO	FORM ATTACHED		
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S. ? (FORM 2A)			X			
		16	17	18		
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)		X				
		22	23	24		
E. Does or will this facility treat, store, or dispose of hazardous wastes ? (FORM 3)			X			
		28	29	30		
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)			X			
		34	35	36		
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)			X			
		40	41	42		
B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S. ? (FORM 2B)			X			
		19	20	21		
D. Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S. ? (FORM 2D)		X				
		25	26	27		
F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)			X			
		31	32	33		
H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)			X			
		37	38	39		
J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)			X			
		43	44	45		
III. NAME OF FACILITY						
C	1	SKIP	Pelham Range			
	15	16 - 29	30			
			66			
IV. FACILITY CONTACT						
A. NAME & TITLE (last, first, & title)			B. PHONE (area code & no.)			
C	2	Curvin, Brad	Environmental Compliance Manager		(334) 523-4027	
	15	16	45		46 48 49 51 52 55	
V. FACILITY MAILING ADDRESS						
A. STREET OR P.O. BOX						
C	3	1720 Congressman Dickinson Drive				
	15	16	45			
B. CITY OR TOWN			C. STATE	D. ZIP CODE		
C	4	Montgomery	AL	36109		
	15	16	40 41 42	47 51		
VI. FACILITY LOCATION						
A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER						
C	5	Gate 3 Road				
	15	16	45			
B. COUNTY NAME						
	Calhoun					
	46	70				
C. CITY OR TOWN			D. STATE	E. ZIP CODE	F. COUNTY CODE (if known)	
C	6	Alexandria	AL	36250	015	
	15	16	40 41 42	47	51 52 54	



CONTINUED FROM THE FRONT

VII. SIC CODES (4-digit, in order of priority)

A. FIRST										B. SECOND									
C	7									E	7								
(specify)										(specify)									
15	16									15	16								
C. THIRD										D. FOURTH									
C	7									E	7								
(specify)										(specify)									
15	16									15	16								

VIII. OPERATOR INFORMATION

A. NAME										B. Is the name listed in Item VIII-A also the owner?													
C	8	Alabama Army National Guard																		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
15	16																			55	56		
C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box: if "Other," specify.)										D. PHONE (area code & no.)													
F = FEDERAL S = STATE P = PRIVATE										M = PUBLIC (other than federal or state) O = OTHER (specify)										S (specify)		A (334) 450-0557	
																				56		15 16 18 19 21 22 25	

E. STREET OR P.O. BOX																			
1720 Congressman Dickinson Drive																			
26																			55

F. CITY OR TOWN										G. STATE		H. ZIP CODE		IX. INDIAN LAND	
C	B	Montgomery								AL		36109		Is the facility located on Indian lands? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
15	16									40	41	42	47	51	52

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water)										D. PSD (Air Emissions from Proposed Sources)									
C	T	I								C	T	I							
9	N		AL0073016							9	P								
15	16	17	18					30	15	16	17	18					30		
B. UIC (Underground Injection of Fluids)										E. OTHER (specify)									
C	T	I								C	T	I							
9	U									9			(specify)						
15	16	17	18					30	15	16	17	18					30		
C. RCRA (Hazardous Wastes)										E. OTHER (specify)									
C	T	I								C	T	I							
9	R									9			(specify)						
15	16	17	18					30	15	16	17	18					30		

XI. MAP

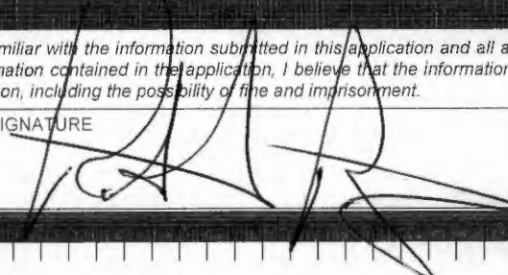
Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers, and other surface water bodies in the map area. See instructions for precise requirements.

XII. NATURE OF BUSINESS (provide a brief description)

See Attachment A: Operational Description
See Attachments E - K: Maps

XIII. CERTIFICATION (see instructions)

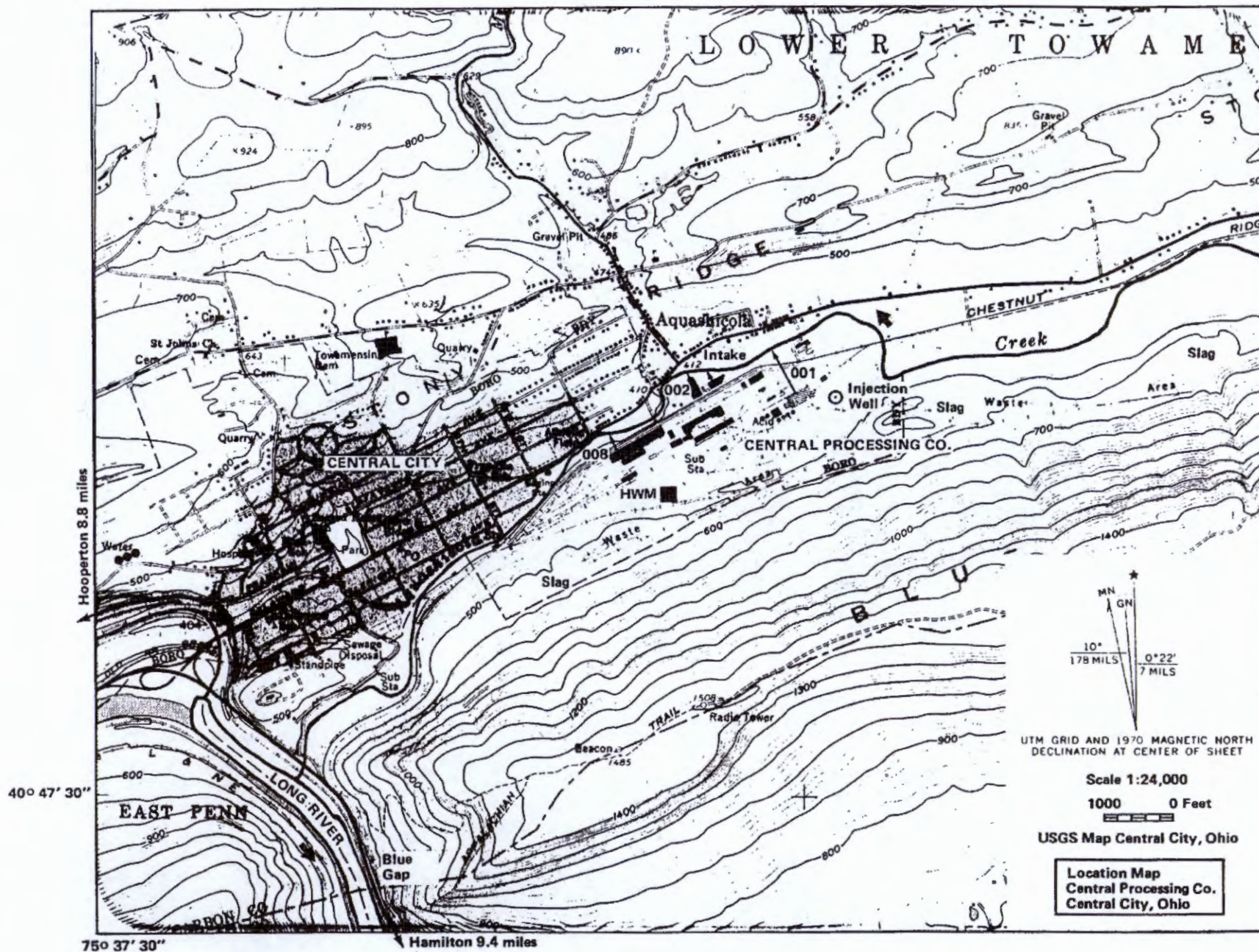
I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME & OFFICIAL TITLE (type or print)										B. SIGNATURE										C. DATE SIGNED									
LTC Robert A. Bjornson, Training Center Director																				9 May 19									

COMMENTS FOR OFFICIAL USE ONLY

C																				
15	16																			55

FIGURE 1-1



Please print or type in the unshaded areas only.

EPA ID Number (copy from Item 1 of Form 1)

Form Approved. OMB No. 2040-0086.
Approval expires 5-31-92.FORM
2E
NPDES**Facilities Which Do Not Discharge Process Wastewater****I. RECEIVING WATERS**

For this outfall, list the latitude and longitude, and name of the receiving water(s).

Outfall Number (list)	Latitude			Longitude			Receiving Water (name)
	Deg	Min	Sec	Deg	Min	Sec	
							See Attachment C, Section I & IV

II. DISCHARGE DATE (If a new discharger, the date you expect to begin discharging)**III. TYPE OF WASTE**

A. Check the box(es) indicating the general type(s) of wastes discharged.

- ☐ Sanitary Wastes
 ☐ Restaurant or Cafeteria Wastes
 ☐ Noncontact Cooling Water
 ☐ Other Nonprocess Wastewater (Identify)

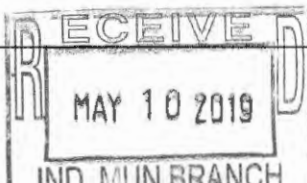
B. If any cooling water additives are used, list them here. Briefly describe their composition if this information is available.

See Attachments E - K

IV. EFFLUENT CHARACTERISTICSA. **Existing Sources** — Provide measurements for the parameters listed in the left-hand column below, unless waived by the permitting authority (see instructions).B. **New Dischargers** — Provide estimates for the parameters listed in the left-hand column below, unless waived by the permitting authority. Instead of the number of measurements taken, provide the source of estimated values (see instructions).

Pollutant or Parameter	(1) Maximum Daily Value (include units)		(2) Average Daily Value (last year) (include units)		(3) Number of Measurements Taken (last year)	(4) Source of Estimate (if new discharger)
	Mass	Concentration	Mass	Concentration		
Biochemical Oxygen Demand (BOD)						
Total Suspended Solids (TSS)						
Fecal Coliform (if believed present or if sanitary waste is discharged)						
Total Residual Chlorine (if chlorine is used)						
Oil and Grease						
*Chemical oxygen demand (COD)						
*Total organic carbon (TOC)						
Ammonia (as N)						
Discharge Flow	Value					
pH (give range)	Value					
Temperature (Winter)			°C			
Temperature (Summer)			°C			

*If noncontact cooling water is discharged



V. Except for leaks or spills, will the discharge described in this form be intermittent or seasonal?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, briefly describe the frequency of flow and duration.			

All Year, Intermittent (Oil and Water Separators)

VI. TREATMENT SYSTEM (Describe briefly any treatment system(s) used or to be used)

Oil and Water Separators

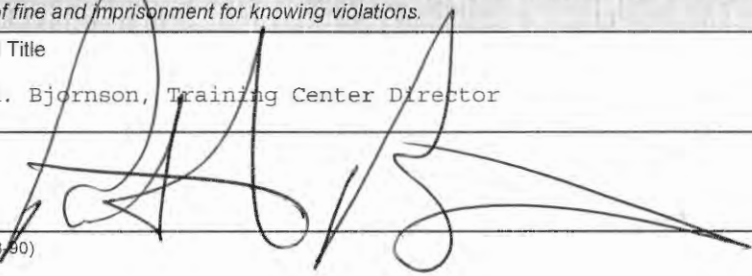
VII. OTHER INFORMATION (Optional)

Use the space below to expand upon any of the above questions or to bring to the attention of the reviewer any other information you feel should be considered in establishing permit limitations. Attach additional sheets, if necessary.

The results for the Rock Crusher Discharge will be the same as the discharge for the Horizontal Engineering Training Area.

VIII. CERTIFICATION

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.

A. Name & Official Title	B. Phone No. (area code & no.)
LTC Robert A. Bjornson, Training Center Director	(256) 847-4101
C. Signature	D. Date Signed
	9 May 19

**FORM
2F
NPDES**



Application for Permit to Discharge Storm Water Discharges Associated with Industrial Activity

Public reporting burden for this application is estimated to average 28.6 hours per application, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate, any other aspect of this collection of information, or suggestions for improving this form, including suggestions which may increase or reduce this burden to: Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 1200 Pennsylvania Avenue, NW, Washington, DC 20460, or Director, Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.

For each outfall, list the latitude and longitude of its location to the nearest 15 seconds and the name of the receiving water.

A. Outfall Number (list)	B. Latitude			C. Longitude			D. Receiving Water (name)
OF001	33.00	43.00	39.00	-85.00	54.00	17.00	U.T. to Cane Creek
OF002	33.00	43.00	47.60	-85.00	56.00	36.60	U.T. to Cane Creek
OF003	33.00	43.00	40.40	-85.00	56.00	22.80	U.T. to Cane Creek
OF004	33.00	43.00	39.20	-85.00	56.00	9.60	U.T. to Cane Creek
OF005	33.00	44.00	22.03	-85.00	59.00	29.00	U.T. to Cane Creek
OF006	33.00	44.00	21.00	-85.00	59.00	29.00	U.T. to Cane Creek
OF007	33.00	44.00	18.00	-85.00	59.00	22.00	U.T. to Cane Creek
OF008	33.00	43.00	40.40	-85.00	56.00	22.80	U.T. to Cane Creek

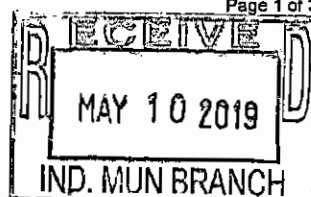
A. Are you now required by any Federal, State, or local authority to meet any implementation schedule for the construction, upgrading or operation of wastewater treatment equipment or practices or any other environmental programs which may affect the discharges described in this application? This includes, but is not limited to, permit conditions, administrative or enforcement orders, enforcement compliance schedule letters, stipulations, court orders, and grant or loan conditions.

[illegible]

8: You may attach additional sheets describing any additional water pollution (or other environmental projects which may affect your discharges) you now have under way or which you plan. Indicate whether each program is now under way or planned, and indicate your actual or planned schedules for construction.

Attach a site map showing topography (or indicating the outline of drainage areas served by the outfalls(s) covered in the application if a topographic map is unavailable) depicting the facility including: each of its intake and discharge structures; the drainage area of each storm water outfall; paved areas and buildings within the drainage area of each storm water outfall, each known past or present areas used for outdoor storage of disposal of significant materials, each existing structural control measure to reduce pollutants in storm water runoff, materials loading and access areas, areas where pesticides, herbicides, soil conditioners and fertilizers are applied; each of its hazardous waste treatment, storage or disposal units (including each area not required to have a RCRA permit which is used for accumulating hazardous waste under 40 CFR 262.34); each well where fluids from the facility are injected underground; springs, and other surface water bodies which received storm water discharges from the facility. **ATTACHMENT E - K**

ATTACHMENT E - K



Continued from the Front

IV. Narrative Description of Pollutant Sources

A. For each outfall, provide an estimate of the area (include units) of impervious surfaces (including paved areas and building roofs) drained to the outfall, and an estimate of the total surface area drained by the outfall.

Outfall Number	Area of Impervious Surface (provide units)	Total Area Drained (provide units)	Outfall Number	Area of Impervious Surface (provide units)	Total Area Drained (provide units)
OF001 OF002-4	107,644 SY 2,827 SY		OF005-8	16,414 SY	

B. Provide a narrative description of significant materials that are currently or in the past three years have been treated, stored or disposed in a manner to allow exposure to storm water; method of treatment, storage, or disposal; past and present materials management practices employed to minimize contact by these materials with storm water runoff; materials loading and access areas, and the location, manner, and frequency in which pesticides, herbicides, soil conditioners, and fertilizers are applied.

OF001 STORM WATER DISCHARGE / OIL WATER SEPARATOR HAS BEEN RENOVATED AND PIPED DIRECTLY TO CREEK
 OF002-4 STORM WATER DISCHARGE
 OF005-8 STORM WATER DISCHARGE

C. For each outfall, provide the location and a description of existing structural and nonstructural control measures to reduce pollutants in storm water runoff; and a description of the treatment the storm water receives, including the schedule and type of maintenance for control and treatment measures and the ultimate disposal of any solid or fluid wastes other than by discharge.

Outfall Number	Treatment	List Codes from Table 2F-1
OF001 OF002-4 OF005-8	SETTLING BASINS / OIL WATER SEPARATOR SEDIMENT PONDS SEDIMENT PONDS	

V. Nonstormwater Discharges

A. I certify under penalty of law that the outfall(s) covered by this application have been tested or evaluated for the presence of nonstormwater discharges, and that all nonstormwater discharged from these outfall(s) are identified in either an accompanying Form 2C or Form 2E application for the outfall.

Name and Official Title (type or print)	Signature	Date Signed
LTC Robert A. Bjornson, T.C. Dir.		

B. Provide a description of the method used, the date of any testing, and the onsite drainage points that were directly observed during a test.

VI. Significant Leaks or Spills

Provide existing information regarding the history of significant leaks or spills of toxic or hazardous pollutants at the facility in the last three years, including the approximate date and location of the spill or leak, and the type and amount of material released.

NONE

Continued from Page 2

EPA ID Number (copy from Item 1 of Form 1)

VII. Discharge Information

A, B, C, & D: See instructions before proceeding. Complete one set of tables for each outfall. Annotate the outfall number in the space provided.
Table VII-A, VII-B, VII-C are included on separate sheets numbers VII-1 and VII-2.

E. Potential discharges not covered by analysis – is any toxic pollutant listed in table 2F-2, 2F-3, or 2F-4, a substance or a component of a substance which you currently use or manufacture as an intermediate or final product or byproduct?

☐ Yes (list all such pollutants below)☒ No (go to Section IX)

REFER TO ATTACHMENT D - DISCHARGE INFORMATION

VIII. Biological Toxicity Testing Data

Do you have any knowledge or reason to believe that any biological test for acute or chronic toxicity has been made on any of your discharges or on a receiving water in relation to your discharge within the last 3 years?

☐ Yes (list all such pollutants below)☒ No (go to Section IX)**IX. Contract Analysis Information**

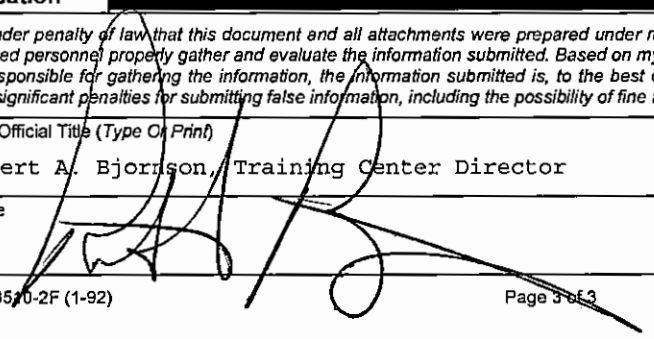
Were any of the analyses reported in Item VII performed by a contract laboratory or consulting firm?

☐ Yes (list the name, address, and telephone number of, and pollutants analyzed by, each such laboratory or firm below)☒ No (go to Section X)

A. Name	B. Address	C. Area Code & Phone No.	D. Pollutants Analyzed

X. Certification

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.

A. Name & Official Title (Type or Print)	B. Area Code and Phone No.
LTC Robert A. Bjornson, Training Center Director	(256) 847-4101
C. Signature	D. Date Signed
	9 May 19

Part A – You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.

Part B – List each pollutant that is limited in an effluent guideline which the facility is subject to or any pollutant listed in the facility's NPDES permit for its process wastewater (if the facility is operating under an existing NPDES permit). Complete one table for each outfall. See the instructions for additional details and requirements.

Continue on Reverse

Continued from the Front

Part C - List each pollutant shown in Table 2F-2, 2F-3, and 2F-4 that you know or have reason to believe is present. See the instructions for additional details and requirements. Complete one table for each outfall.

[illegible]

Part D – Provide data for the storm event(s) which resulted in the maximum values for the flow weighted composite sample.

Part 2. Provide data for the storm event(s) which resulted in the stormwater discharge(s) during the reporting period.					
1. Date of Storm Event	2. Duration of Storm Event (in minutes)	3. Total rainfall during storm event (in inches)	4. Number of hours between beginning of storm measured and end of previous measurable rain event	5. Maximum flow rate during rain event (gallons/minute or specify units)	6. Total flow from rain event (gallons or specify units)

7. Provide a description of the method of flow measurement or estimate.

[illegible]

**Table 2F-1
Codes for Treatment Units**

Physical Treatment Processes

1-A	Ammonia Stripping	1-M	Grit Removal
1-B	Dialysis	1-N	Microstraining
1-C	Diatomaceous Earth Filtration	1-O	Mixing
1-D	Distillation	1-P	Moving Bed Filters
1-E	Electrodialysis	1-Q	Multimedia Filtration
1-F	Evaporation	1-R	Rapid Sand Filtration
1-G	Flocculation	1-S	Reverse Osmosis (Hyperfiltration)
1-H	Flotation	1-T	Screening
1-I	Foam Fractionation	1-U	Sedimentation (Setting)
1-J	Freezing	1-V	Slow Sand Filtration
1-K	Gas-Phase Separation	1-W	Solvent Extraction
1-L	Grinding (Comminutors)	1-X	Sorption

Chemical Treatment Processes

2-A	Carbon Adsorption	2-G	Disinfection (Ozone)
2-B	Chemical Oxidation	2-H	Disinfection (Other)
2-C	Chemical Precipitation	2-I	Electrochemical Treatment
2-D	Coagulation	2-J	Ion Exchange
2-E	Dechlorination	2-K	Neutralization
2-F	Disinfection (Chlorine)	2-L	Reduction

Biological Treatment Processes

3-A	Activated Sludge	3-E	Pre-Aeration
3-B	Aerated Lagoons	3-F	Spray Irrigation/Land Application
3-C	Anaerobic Treatment	3-G	Stabilization Ponds
3-D	Nitrification-Denitrification	3-H	Trickling Filtration

Other Processes

4-A	Discharge to Surface Water	4-C	Reuse/Recycle of Treated Effluent
4-B	Ocean Discharge Through Outfall	4-D	Underground Injection

Sludge Treatment and Disposal Processes

5-A	Aerobic Digestion	5-M	Heat Drying
5-B	Anaerobic Digestion	5-N	Heat Treatment
5-C	Belt Filtration	5-O	Incineration
5-D	Centrifugation	5-P	Land Application
5-E	Chemical Conditioning	5-Q	Landfill
5-F	Chlorine Treatment	5-R	Pressure Filtration
5-G	Composting	5-S	Pyrolysis
5-H	Drying Beds	5-T	Sludge Lagoons
5-I	Elutriation	5-U	Vacuum Filtration
5-J	Flotation Thickening	5-V	Vibration
5-K	Freezing	5-W	Wet Oxidation
5-L	Gravity Thickening		

Table 2F-2

Conventional and Nonconventional Pollutants

Bromide
Chlorine, Total Residual
Color
Fecal Coliform
Fluoride
Nitrate-Nitrite
Nitrogen, Total Organic
Oil and Grease
Phosphorus, Total
Radioactivity
Sulfate
Sulfite
Surfactants
Aluminum, Total
Barium, Total
Boron, Total
Cobalt Total
Iron, Total
Magnesium, Total
Molybdenum, Total
Manganese, Total
Tin, Total
Titanium, Total

Table 2F-3

Toxic Pollutants

Toxic Pollutants and Total Phenol		
Antimony, Total	Copper, Total	Silver, Total
Arsenic, Total	Lead, Total	Thallium, Total
Beryllium, Total	Mercury, Total	Zinc, Total
Cadmium, Total	Nickel, Total	Cyanide, Total
Chromium, Total	Selenium, Total	Phenols, Total
GC/MS Fraction Volatiles Compounds		
Acrolein	Dichlorobromomethane	1,1,2,2-Tetrachloroethane
Acrylonitrile	1,1-Dichloroethane	Tetrachloroethylene
Benzene	1,2-Dichloroethane	Toluene
Bromoform	1,1-Dichloroethylene	1,2-Trans-Dichloroethylene
Carbon Tetrachloride	1,2-Dichloropropane	1,1,1-Trichloroethane
Chlorobenzene	1,3-Dichloropropylene	1,1,2-Trichloroethane
Chlorodibromomethane	Ethylbenzene	Trichloroethylene
Chloroethane	Methyl Bromide	Vinyl Chloride
2-Chloroethylvinyl Ether	Methyl Chloride	
Chloroform	Methylene Chloride	
Acid Compounds		
2-Chlorophenol	2,4-Dinitrophenol	Pentachlorophenol
2,4-Dichlorophenol	2-Nitrophenol	Phenol
2,4-Dimethylphenol	4-Nitrophenol	2,4,6-Trichlorophenol
4,6-Dinitro-O-Cresol	p-Chloro-M-Cresol	2-methyl-4,6 dinitrophenol
Base/Neutral		
Acenaphthene	2-Chloronaphthalene	Fluoranthene
Acenaphthylene	4-Chlorophenyl Phenyl Ether	Fluorene
Anthracene	Chrysene	Hexachlorobenzene
Benztidine	Dibenzo(a,h)anthracene	Hexachlorobutadiene
Benzo(a)anthracene	1,2-Dichlorobenzene	Hexachloroethane
Benzo(a)pyrene	1,3-Dichlorobenzene	Indeno(1,2,3-cd)pyrene
3,4-Benzofluoranthene	1,4-Dichlorobenzene	Isophorone
Benzo(ghi)perylene	3,3'-Dichlorobenzidine	Napthalene
Benzo(k)fluoranthene	Diethyl Phthalate	Nitrobenzene
Bis(2-chloroethoxy)methane	Dimethyl Phthalate	N-Nitrosodimethylamine
Bis(2-chloroethyl)ether	Di-N-Butyl Phthalate	N-Nitrosodi-N-Propylamine
Bis(2-chloroisopropyl)ether	2,4-Dinitrotoluene	N-Nitrosodiphenylamine
Bis(2-ethylhexyl)phthalate	2,6-Dinitrotoluene	Phenanthrene
4-Bromophenyl Phenyl Ether	Di-N-Octylphthalate	Pyrene
Butylbenzyl Phthalate	1,2-Diphenylhydrazine (as Azobenzene)	1,2,4-Trichlorobenzene
Pesticides		
Aldrin	Dieldrin	PCB-1254
Alpha-BHC	Alpha-Endosulfan	PCB-1221
Beta-BHC	Beta-Endosulfan	PCB-1232
Gamma-BHC	Endosulfan Sulfate	PCB-1248
Delta-BHC	Endrin	PGB-1260
Chlordane	Endrin Aldehyde	PCB-1016
4,4'-DDT	Heptachlor	Toxaphene
4,4'-DDE	Heptachlor Epoxide	
4,4'-DDD	PCB-1242	

Table 2F-4
Hazardous Substances

Toxic Pollutant

Asbestos

Hazardous Substances

Acetaldehyde	Dinitrobenzene	Napthenic acid
Allyl alcohol	Diquat	Nitrotoluene
Allyl chloride	Disulfoton	Parathion
Amyl acetate	Diuron	Phenolsulfonate
Aniline	Epichlorohydrin	Phosgene
Benzonitrile	Ethion	Propargite
Benzyl chloride	Ethylene diamine	Propylene oxide
Butyl acetate	Ethylene dibromide	Pyrethrins
Butylamine	Formaldehyde	Quinoline
Carbaryl	Furfural	Resorcinol
Carbofuran	Guthion	Stronthium
Carbon disulfide	Isoprene	Strychnine
Chlorpyrifos	Isopropanolamine	Styrene
Coumaphos	Kelthane	2,4,5-T (2,4,5-Trichlorophenoxyacetic acid)
Cresol	Kepone	TDE (Tetrachlorodiphenyl ethane)
Crotonaldehyde	Malathion	2,4,5-TP [2-(2,4,5-Trichlorophenoxy) propanoic acid]
Cyclohexane	Mercaptodimethur	Trichlorofan
2,4-D (2,4-Dichlorophenoxyacetic acid)	Methoxychlor	Triethylamine
Diazinon	Methyl mercaptan	Trimethylamine
Dicamba	Methyl methacrylate	Uranium
Dichlobenil	Methyl parathion	Vanadium
Dichlone	Mevinphos	Vinyl acetate
2,2-Dichloropropionic acid	Mexacarbate	Xylene
Dichlorvos	Monoethyl amine	Xylenol
Diethyl amine	Monomethyl amine	Zirconium
Dimethyl amine	Naled	

May 7, 2019

Form 1, SECTION XI

Form 187, SECTION B.3

Give a brief description of all operations at this facility including primary products or services:

Pelham Range is a military training area used by members of the Army and National Guard for mission training. The Site contains a wide array of training operations for the military.

The Pelham Range Master NPDES Plan will be an individual NPDES permit that will need to incorporate three sites located on Pelham Range. The three sites that currently need to be covered under the master plan are the UTES #1 facility, The Horizontal Engineering Training Area, and the Rock Crusher site.

The UTES #1 facility stores, maintains and repairs armored vehicles for various Alabama Army National Guard units. Other ancillary equipment is also maintained and repaired at the facility. No manufacturing activities are conducted at the UTES #1 facility. Operations conducted at the facility include vehicle, maintenance bay floor and other equipment washing. Vehicles and equipment are washed with high pressure water only. Vehicle washing occurs approximately one day every four to six weeks for a duration of around two hours. Shop floors are cleaned one day a week. All wash water flows through a settling basin and is treated by an oil water separator prior to discharging.

The Horizontal Engineering Training Area is a unit that the military uses to train soldiers to operate earth moving and other heavy equipment. The engineering school is operated during the spring and summer months and additionally six to eight weekends a year for drill operations. No manufacturing activities are conducted at the site. The site has four retention ponds on site that receive all storm water run-off and very rarely discharge unless there is a heavy rain event.

The Rock Crusher Site is currently under construction. The site when completed will be used by soldiers to train to crush rock to make gravel for paving operations. The site is estimated to be used eight to twelve weeks a year.

May 7, 2019

Form 187, Section D – Water Supply

1. Name of Provider: Anniston Water and Sewer Board☐ Private Well ☐ Surface Water ☒ Municipal Water Utility (Specify City) ☐ Other (Specify)Location of Provider: Anniston, Alabama Latitude: 33° 39' 24.9" N Longitude: 85° 49' 46.2" W

Name of Surface Water Source:

Coldwater 10 million gal/day and Hillabee 32 million gal/day for a combined 24-36 million gal/day based on an Environmental Assessment that was done for the county

2. Name of Provider: Calhoun County Water Authority☐ Private Well ☐ Surface Water ☒ Municipal Water Utility (Specify City) ☐ Other (Specify)Location of Provider: Alexandria, Alabama Latitude: 33° 46' 19.7" N Longitude: 33° 46' 19.7" N

Name of Surface Water Source:

3 Springs: Reads Mill, Websters Chapel, and Seven Springs – Fort Payne Chert & Knox Group

Three groundwater wells: Choccolocco, Possum Trot, and Ohatchee

Purchase water from Oxford Water Works - Source: Knox Group

Purchase water from Anniston Water and Sewer Board - Source: Source Flow is from Coldwater 10 million gal/day and Hillabee 32 million gal/day for a combined 24-36 million gal/day based on an Environmental Assessment that was done for the county

ADEM Permit Form 187, Section J and Form 2E, Section I / Section D - ATTACHMENT C

Form 187, Section J. Receiving Waters
Form 2E: I. Receiving Waters and Table IV. Effluent Characteristics

Form 187, Section J. RECEIVING WATERS and Form 2E, Section I. RECEIVING WATERS										
For this outfall, list the latitude and longitude, and name of the receiving water(s).										
Outfall Number (List)	Latitude			Direction	Longitude			Direction	Receiving Water (Name)	Hydrocategory
	Deg	Min	Sec		Deg	Min	Sec			
OF001	33	43	39	N	85	54	17	W	Cane Creek	Has water at all times of the year
OF002	33	43	34	N	85	56	29	W	Cane Creek	Flow ceases for weeks or months each year
OF003	33	43	34	N	85	56	29	W	Cane Creek	Flow ceases for weeks or months each year
OF004	33	43	34	N	85	56	29	W	Cane Creek	Flow ceases for weeks or months each year
OF005	33	44	0.4	N	85	59	21.1	W	Cane Creek	Flow ceases for weeks or months each year
OF006	33	44	0.4	N	85	59	21.1	W	Cane Creek	Flow ceases for weeks or months each year
OF007	33	44	0.4	N	85	59	21.1	W	Cane Creek	Flow ceases for weeks or months each year
OF008	33	44	0.4	N	85	59	21.1	W	Cane Creek	Flow ceases for weeks or months each year

Form 2E: IV. EFFLUENT CHARACTERISTICS

UTES #1	
Pollutant/Parameter	Avg Daily Value
BOD	5.6
TSS	14
Oil and Grease	BDL
Ammonia	BDL
Flow	none past 24 hours
pH	6.42
Chlorine	0.05
Temp Winter	16.5 C

Horizontal Engineering Training Area	
Pollutant/Parameter	Avg Daily Value
BOD	19.3
TSS	1660
Oil and Grease	3.8
Ammonia	BDL
Flow	No Flow/grab sample
pH	4.45
Temp Winter	20.9 C

• Use HET data for Rock Crusher outfalls

ADEM Permit Form 2F, Section VII - ATTACHMENT D

Form 2F
VII. Discharge Information

Form 2F: VII DISCHARGE INFORMATION

For this outfall, list the latitude and longitude, and name of the receiving water(s).

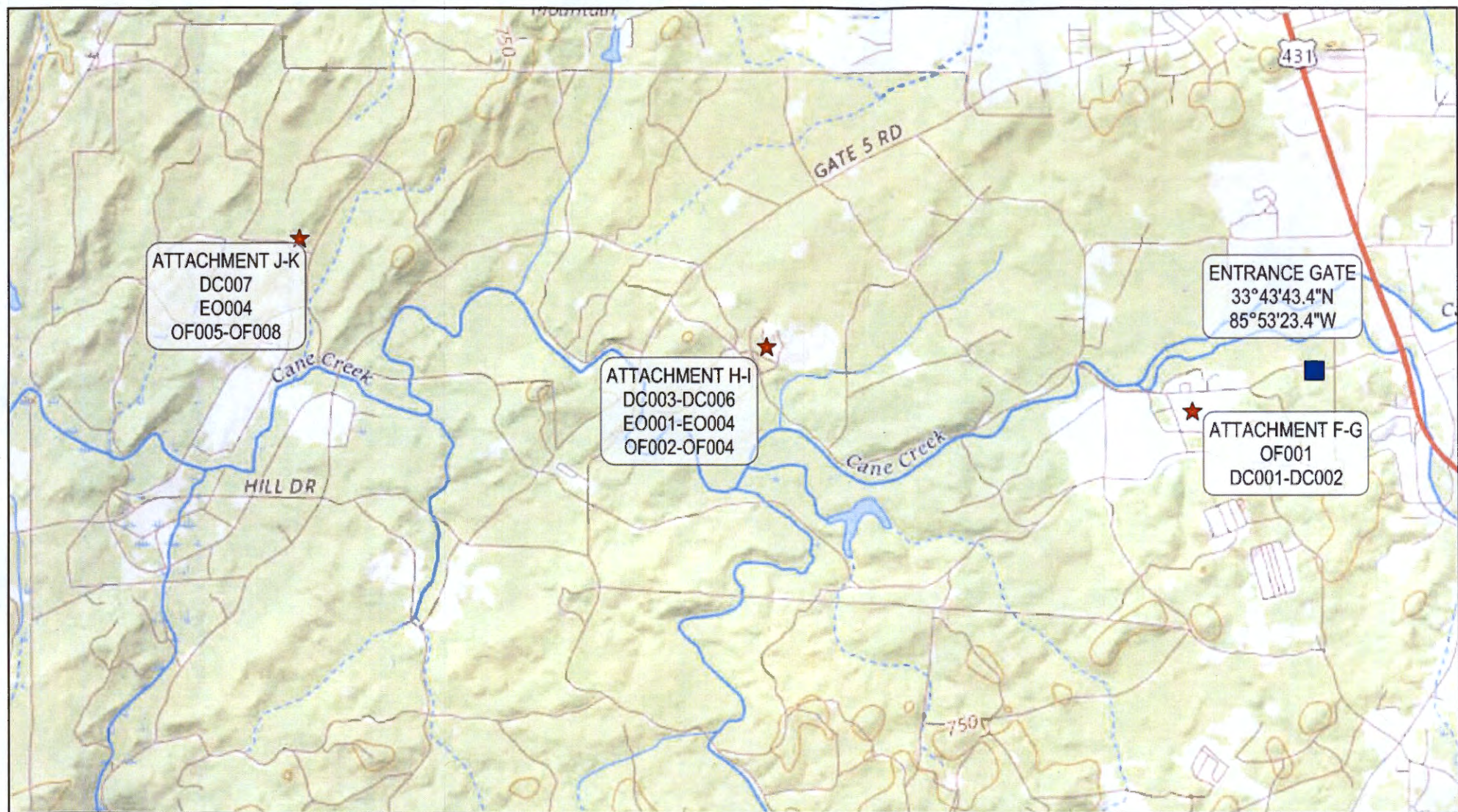
Outfall Number (List)	Latitude			Direction	Longitude			Direction	Receiving Water (Name)	Hydrocategory
	Deg	Min	Sec		Deg	Min	Sec			
OF001	33	43	39	N	85	54	17	W	Cane Creek	Has water at all times of the year
OF002	33	43	34	N	85	56	29	W	Cane Creek	Flow ceases for weeks or months each year
OF003	33	43	34	N	85	56	29	W	Cane Creek	Flow ceases for weeks or months each year
OF004	33	43	34	N	85	56	29	W	Cane Creek	Flow ceases for weeks or months each year
OF005	33	44	0.4	N	85	59	21.1	W	Cane Creek	Flow ceases for weeks or months each year
OF006	33	44	0.4	N	85	59	21.1	W	Cane Creek	Flow ceases for weeks or months each year
OF007	33	44	0.4	N	85	59	21.1	W	Cane Creek	Flow ceases for weeks or months each year
OF008	33	44	0.4	N	85	59	21.1	W	Cane Creek	Flow ceases for weeks or months each year

Form 2F: VI. DISCHARGE INFORMATION

UTES #1	
<u>Pollutant/Parameter</u>	<u>Avg Daily Value</u>
BOD	5.6
TSS	14
Oil and Grease	BDL
Ammonia	BDL
Flow	none past 24 hours
pH	6.42
Chlorine	0.05
Temp Winter	16.5 C

Horizontal Engineering Training Area	
<u>Pollutant/Parameter</u>	<u>Avg Daily Value</u>
BOD	19.3
TSS	1660
Oil and Grease	3.8
Ammonia	BDL
Flow	No Flow/grab sample
pH	4.45
Temp Winter	20.9 C

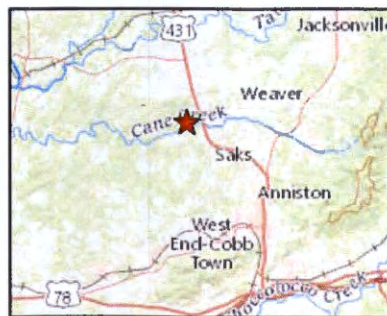
- Use HET data for Rock Crusher outfalls



Location Map



State Map



County Map



LEGEND	
★	Site Location
■	Entrance Gate
	Gate 3 Road
	33°43'43.4"N, 85°53'23.4"W

ATTACHMENT E

Alabama Army National Guard
ADEM Storm Water Permit
Pelham Range, Alexandria, Alabama

