

ATTACHMENT G
NOI FORMS AND ADEC ACKNOWLEDGEMENT(S)



THE STATE
of **ALASKA**
GOVERNOR BILL WALKER

Department of Environmental
Conservation

DIVISION OF WATER
Wastewater Discharge Authorization Program

555 Cordova Street
Anchorage, Alaska 99501-2617
Main: 907.269.6285
Fax: 907.334.2415
www.dec.alaska.gov/water/wwdp

October 15, 2015

Company: City and Borough of Juneau, Airport Dept.
ATTN: Patricia deLaBruere
1873 Shell Simmons Dr. Suite 200
Juneau, AK 99801

Facility:
Juneau International Airport
1873 Shell Simmons Dr.
Juneau, AK 99801

Permit Number: **AKR06AD42**

This email/letter acknowledges that you have submitted a complete Notice of Intent form to be covered under the APDES General Permit for Storm water Discharges for Multi-Sector General Permit Activity (MSGP). The permittee is authorized to discharge storm water under the terms and conditions of this permit **seven (7) calendar days** after acknowledgment of receipt of the permittee's completed NOI is posted on ADEC's Storm Water Permit Search website

(<http://www.dec.state.ak.us/Applications/Water/WaterPermitSearch/Search.aspx>).

Coverage under this permit begins seven-days from the "Date Issued" on the Water Permit Search website.

As stated above, this letter acknowledges receipt of a complete Notice of Intent. However, it is not an ADEC determination of the validity of the information you provided. Your eligibility for coverage under the Permit is based on the validity of the certification you provided. Your signature on the Notice of Intent certifies that you have read, understood, and are implementing all of the applicable requirements. An important aspect of this certification requires that you correctly determine whether you are eligible for coverage under this permit.

As you know, the Multi-Sector General Permit requires you to have developed and begun implementing a Storm water Pollution Prevention Plan (SWPPP) and outlines important inspection and record keeping requirements. You must also comply with any additional location-specific requirements applicable to your state or tribal area. A copy of the Multi-Sector General Permit must be kept with your SWPPP. An electronic copy of the Permit and additional guidance materials can be viewed and downloaded at <http://www.dec.state.ak.us/water/wnpspc/stormwater/index.htm>.

For tracking purposes, the following number has been assigned to your Notice of Intent Form: **AKR06AD42**

If you have general questions regarding the storm water program or your responsibilities under the Multi-Sector General Permit, please call William Ashton (907)269-6283.

Permit #: _____



Notice of Intent (NOI) For Storm Water Discharges Associated With Industrial Activity Under the APDES Multi-Sector General Permit

Submission of this completed Notice of Intent (NOI) constitutes notice that the operator identified in Section I of this form requests authorization to discharge pollutants to waters of the United States from the facility or site identified in Section III under Alaska's APDES Multi-Sector General Permit (MSGP) for industrial storm water. Submission of this NOI constitutes your notice to DEC that the facility identified in Section III of this form meets the eligibility conditions of Part 1.1 of the MSGP. Please read and make sure you comply with all eligibility requirements, including the requirement to prepare a storm water pollution prevention plan. Refer to the instructions at the end of this form to complete your NOI.

Section I. Operator Information			
Organization:		Contact Person:	
City and Borough of Juneau, Airport Department		Patricia deLaBruere, Airport Manager	
Mailing Address:	Street (PO Box):		
	1873 Shell Simmons Dr. Suite 200		
	City:	State:	Zip:
	Juneau	Alaska	99801
Phone:	Fax (optional):	Email:	
907-789-7821	907-789-1227	p.delabruere@jnuairport.com	
Section II. Billing Contact Information			
Organization:		Contact Person:	
City and Borough of Juneau, Airport Department		John Coleman	
Mailing Address:	Street (PO Box):		
	City:		
	State:		
	Zip:		
<input checked="" type="checkbox"/> Check here if same as Operator Information	Phone:	Fax (optional):	Email:
			john.coleman@jnuairport.com
Section III. Facility Information			
Facility Name: Juneau International Airport			
Have storm water discharges from your site been covered previously under an APDES or NPDES Permit? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
a. 1. If Yes, provide the Tracking Number if you have coverage under MSGP 2008 or the APDES permit number if you had coverage under a DEC individual permit.		AKR05CD55	
2. Have you paid a Multi-Sector General Permit (MSGP) authorization fee for this calendar year? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
b. If No, was your facility in operation and discharging storm water prior to September 29, 2013? <input type="checkbox"/> Yes <input type="checkbox"/> No			
c. If No to "b", did your facility commence discharging after September 29, 2013 and before the effective date of this permit <input type="checkbox"/> Yes <input type="checkbox"/> No			
Location Address:	Street:		Borough or similar government subdivision
	1873 Shell Simmons Dr.		Juneau
	City:	State:	Zip:
	Juneau	Alaska	99801
Latitude:	Longitude:	Determined By:	
N 58 21' 17"	W 134 34' 43"	<input type="checkbox"/> GPS <input type="checkbox"/> USGS Topographic Map <input checked="" type="checkbox"/> Other	
If you used a USGS Topographic map, what was the scale?			
Estimated area of industrial activity at your site exposed to storm water: 650 (acres)			Is this a federal facility? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Permit #: _____

Section IV. Discharge Information

Does your facility discharge into a Municipal Separate Storm Sewer System (MS4)? Yes No

If yes, name of the MS4 Operator: _____

Receiving Water and Wetlands Information: (if additional space is needed for this question, fill out Attachment 1.)

a. What is the name(s) of your receiving water(s) that receive storm water directly and/or through a MS4? If your receiving water is impaired, then identify the name of the impaired segment, if applicable, in parenthesis following the receiving water name.	b. Are any of your discharges directly into any segment of an "impaired" water?		c. If you answered yes to question b, then answer the following three questions: i. What pollutant(s) are causing the impairment?	ii. Are the pollutant(s) causing the impairment present in your discharge?		iii. Has the TMDL been completed for the pollutant(s) causing the impairment?	
	Yes	No		Yes	No	Yes	No
Gastineau Channel	<input type="checkbox"/>	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mendenhall River	<input type="checkbox"/>	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Duck Creek	<input checked="" type="checkbox"/>	<input type="checkbox"/>	See Attachment 1	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Jordan Creek	<input checked="" type="checkbox"/>	<input type="checkbox"/>	See Attachment 1	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Federal Effluent Limitation Guidelines and Sector-Specific Requirements

a. Are you requesting permit coverage for any storm water discharges subject to effluent limitation guidelines? Yes No

b. If yes, which effluent limitation guidelines apply to your storm water discharge?

40 CFR Part/Subpart	Eligible Discharges	Affected MSGP Sector	Check if applicable
Part 411, Subpart C	Runoff from material storage piles at cement manufacturing facilities.	E	<input type="checkbox"/>
Part 418, Subpart A	Runoff from phosphate fertilizer manufacturing facilities that comes into contact with any raw materials, finished products, by-products, or waste products (SIC 2874).	C	<input type="checkbox"/>
Part 423	Coal pile runoff at steam electric generating facilities.	O	<input type="checkbox"/>
Part 429, Subpart I	Discharges resulting from spray down or intentional wetting of logs at wet deck storage areas.	A	<input type="checkbox"/>
Part 436, Subpart B, C, or D	Mine dewatering discharges at crushed stone mines, construction sand and gravel mines, or industrial sand mines.	J	<input type="checkbox"/>
Part 443, Subpart A	Runoff from asphalt emulsion facilities.	D	<input type="checkbox"/>
Part 445, Subparts A & B	Runoff from hazardous waste and non-hazardous waste landfills.	K, L	<input type="checkbox"/>
Part 449, Subpart A	Runoff from Air Transportation	S	<input checked="" type="checkbox"/>

If you are a Sector S (Air Transportation) facility, do you anticipate using more than 100,000 gallons of glycol-based deicing/anti-icing chemicals and/or 100 tons or more of urea on an average annual basis? Yes No

Identify the 4-digit Standard Industrial Classification (SIC) code or 2-letter Activity Code that best represents the products produced or services rendered for which your facility is primarily engaged, as defined in MSGP: Primary SIC Code: **4581** or Primary Activity Code: _____

Identify the applicable sector(s) and subsector(s) of industrial activity, including co-located industrial activity, for which you are requesting permit coverage:

Sector	Subsector
S	

Sector	Subsector

Sector	Subsector

Is your site presently inactive or unstaffed? Yes No

a. If Yes, is your site expected to be inactive and unstaffed for the entire permit term? Yes No

b. If No to "a", then indicate the length of time that you expect your facility to be inactive and unstaffed.

Section V. Storm Water Pollution Prevention Plan (SWPPP) Contact Information

SWPPP Contact Name:

Patricia deLaBruere

Phone:

907-789-7821

Email:

p.delabruere@jnuairport.com

URL of SWPPP (if applicable): _____

Permit #: _____

Section VI. Certification Information

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Patricia deLaBruere

Airport Manager

Printed Name

Title



September 29, 2015

Signature

Date

City and Borough of Juneau, Airport Dept.

p.delabruere@jnuairport.com

Organization

Email

Section VII. NOI Preparer (Complete if NOI was prepared by someone other than the certifier.)

Kenneth S. Nichols, PE

Airport Engineer

Printed Name

Title

Nichols Engineering

208-215-6039

Organization

Phone

ken@nichols-eng.com

Email

Section VIII. Document Attachments

Documents attached with this application:

SWPPP

Permit #:

Attachment 1. (Fill in as necessary if more space is required for Receiving water and Wetlands Information.)

a. What is the name(s) of your receiving water(s) that receive storm water directly and/or through a MS4? if your receiving water is impaired, then identify the name of the impaired segment, if applicable, in parenthesis following the receiving water name.	b. Are any of your discharges directly into any segment of an "impaired" water?		i. What pollutant(s) are causing the impairment?	ii. Are the pollutant(s) causing the impairment present in your discharge?		iii. Has the TMDL been completed for the pollutant(s) causing the impairment?	
	Yes	No		Yes	No	Yes	No
Duck Creek	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Low Dissolved Oxygen, Debris, Iron...	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Duck Creek Contd.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	...Fecal Coliform, Bacteria, Turbidity	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Jordan Creek	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Debris, Sediment, Low Dissolved Oxygen	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>