



ARKANSAS
Department of Environmental Quality

**NOTICE OF INTENT
FOR DISCHARGES OF STORMWATER
ASSOCIATED WITH MEDIUM OR LARGE CONSTRUCTION ACTIVITY
AUTHORIZED UNDER NPDES GENERAL PERMIT ARR150000**

The enclosed form may be used to obtain coverage under NPDES general permit ARR150000 for discharges of stormwater associated with medium or large construction activity at any site or common plan of development or sale that will result in the disturbance of five (5) or more acres of total land area.

Return the completed form to:

Arkansas Department of Environmental Quality
Permit Branch, Water Division
5301 Northshore Drive
North Little Rock, AR 72118

Unless notified by the Director to the contrary, dischargers who submit a complete Notice of Intent in accordance with the requirements of this permit are authorized to discharge stormwater from construction sites under the terms and conditions of this permit two weeks after the date the NOI is postmarked.

As required by ADEQ Regulation No. 9, an initial permit fee of \$200.00 must be submitted with this NOI. Subsequent annual fees of \$200.00 per year will be billed by the Department. Failure to remit the required permit fee may be grounds for the Director to deny coverage under this general permit, and to require the owner or operator to apply for an individual NPDES permit.

NOTE: A STORMWATER POLLUTION PREVENTION PLAN (SWPPP) SHALL BE PREPARED PRIOR TO SUBMITTAL OF THIS NOI PER PART II.A OF THE GENERAL PERMIT. THE SWPPP MUST BE SUBMITTED FOR REVIEW ALONG WITH THIS NOI FOR LARGE CONSTRUCTION SITES PER PART I.B.6.a OF THE GENERAL PERMIT.

For additional information please contact:

Stormwater Runoff Engineer
Ph.: (501) 682-0623
Fax: (501) 682-0880
Email: adeq@state.ar.us

INSTRUCTIONS

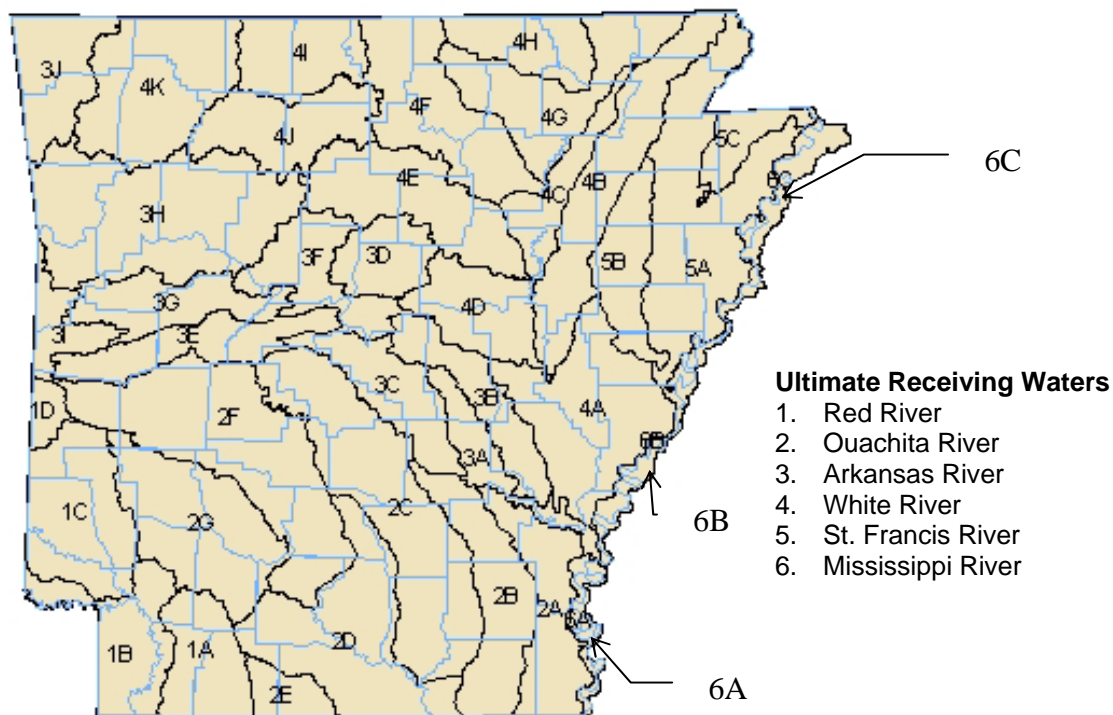
I. How to Determine Latitude and Longitude:

1. If a physical address is known go to www.terraserver-usa.com.
2. Select Advanced Find
3. Select Address
4. Input address
5. Click on Aerial Photo
6. Click on the Info link at the top of the page
7. Note the Latitude and Longitude are in Decimal Coordinates.
8. Go to www.geology.enr.state.nc.us/gis/latlon.html to convert coordinates to Degrees, Minutes, and Seconds.

NOTE: If a physical address does not exist you may find the coordinates in the Legal Description of the property.

II. How to Determine your Ultimate Receiving Waters:

1. Locate the county of your project.
2. Find the numbered segment overlaying the county. For example 2C overlays most of Saline County.
3. Match the number from the segment to the one of the numbered Ultimate Receiving Waters. For example: A project located in Western Saline County is in segment 2C. The "2" determines that the Ultimate Receiving Water for the project is the Ouachita River.



WATER DIVISION

5301 NORTHSORE DRIVE / NORTH LITTLE ROCK, ARKANSAS 72118 / PHONE 501-682-2199 / FAX 501-682-0880

www.adeq.state.ar.us

Medium or Large Construction NOI / Revision date 2/5/2008



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III. How to determine if the receiving stream is on the approved Arkansas 303(d) List:

1. Go to www.epa.gov/owow/tmdl
2. Using the map of the United States, click on Arkansas.
3. Using the "Waters Listed by Waterbody Type" links search for your receiving stream.
4. If your receiving stream is not listed, than your receiving stream is not on the approved Arkansas 303(d) List.
5. If your receiving stream is listed, than click on the links for that receiving stream to determine the pollutants causing the impairment.
6. Once a determination is made that your receiving stream is on the approved Arkansas 303(d) List, than you must determine if the receiving stream has an approved TMDL by using the "Approved TMDLs by Pollutant since January 1, 1996" links toward the bottom of the webpage.

IV. How to obtain information in regard to Endangered Species:

Contact the U.S. Fish and Wildlife Service at (501) 513-4470 or www.fws.com/arkansas-es .

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North Little Rock, AR 72118
(501) 682-0623

**NOTICE OF INTENT
FOR DISCHARGERS OF STORMWATER RUNOFF
ASSOCIATED WITH MEDIUM OR LARGE CONSTRUCTION ACTIVITY
AUTHORIZED UNDER NPDES GENERAL PERMIT ARR150000**

Application Type: New ☐ Renewal ☐

I. OPERATOR INFORMATION

Name: _____	Operator Type:
Mailing Address: _____	<input type="checkbox"/> STATE <input type="checkbox"/> PARTNERSHIP
City: _____	<input type="checkbox"/> FEDERAL <input type="checkbox"/> CORPORATION*
State: _____ Zip: _____	<input type="checkbox"/> SOLE PROPRIETORSHIP
Telephone Number: _____	*State of Incorporation: _____
Fax Number: _____	
E-mail Address (Optional): _____	

II. INVOICE MAILING INFORMATION

Invoice Contact Person: _____	City: _____
Invoice Mailing Company: _____	State: _____ Zip: _____
Invoice Mailing Address: _____	Telephone: _____

III. OWNER INFORMATION, IF DIFFERENT FROM OPERATOR

Name: _____	State: _____	Zip: _____
Address: _____	Telephone: _____	
City: _____	E-Mail: _____	

IV. PROJECT CONSTRUCTION SITE INFORMATION

Project Name: _____	Project Contact Person: _____
Project County: _____	Project Physical Address: _____
Directions to the Project: _____	Project City: _____ Zip: _____
	Telephone Number: _____
Project Start Date: _____	Total amount of soil to be disturbed (estimate to nearest 1/2 acre): _____
Project End Date: _____	Total Project Acreage (Estimate to nearest 1/2 acre): _____

1 acre = 43,560 square feet

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IV. PROJECT CONSTRUCTION SITE INFORMATION (Continued)

Project Latitude: _____ degrees _____ minutes _____ seconds
Project Longitude: _____ degrees _____ minutes _____ seconds
Type of Project: Subdivision ☐ School ☐ Other: _____
Is the Project part of a larger common plan of development or sale? Yes ☐ No ☐

V. DISCHARGE INFORMATION

Name of Receiving Stream (i.e. an unnamed tributary of Mill Creek, thence into Mill Creek; thence into Arkansas River):

Choose Your Ultimate Receiving Stream: Red River ☐ Ouachita River ☐ Arkansas River ☐
White River ☐ St. Francis River ☐ Mississippi River ☐

Is the Receiving Stream listed in the Approved Arkansas 303(d) List? Yes ☐ No ☐

Name of Receiving Municipal Storm Sewer System (If applicable): _____

Is the stormwater discharge from the construction site likely to adversely affect a listed endangered or threatened species or its critical habitat? Yes ☐ No ☐

VI. FACILITY/SITE PERMIT INFORMATION

NPDES Individual Permit Number (If Applicable): AR00

NPDES General Permit Number (If Applicable): ARG

NPDES General Industrial Stormwater Permit Number (If Applicable): ARR00

NPDES General Construction Stormwater Permit Number (If Applicable): ARR15

VII. OTHER INFORMATION:

Location of SWPPP on the Construction Site: _____

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NPDES Branch, Water Division
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VIII. CERTIFICATION OF OPERATOR

_____ (Initial) "I certify that, if this facility is a corporation, it is registered with the Secretary of State of Arkansas. Please provide the full name of corporation if different than that listed in Section I above. "

_____ (Initial) "I certify that as a whole the stormwater discharge(s), and the construction and implementation of Best Management Practices (BMP's) to control stormwater runoff, are not likely to adversely affect species of critical habitat for a listed species."

_____ (Initial) "I certify that a stormwater pollution prevention plan has been prepared for this facility in accordance with Part II.A of this permit, which provides for, or will provide for, compliance with local sediment and erosion plans, local stormwater permits or stormwater management plans, in accordance with Part II.A.4.c of this permit."

_____ (Initial) "I certify that the cognizant official designated in Part IX of this Notice of Intent is qualified to act as a duly authorized representative under the provisions of 40 CFR 122.22(b). If no cognizant official has been designated, I understand that the Department will accept reports signed by the applicant"

"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 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."

Typed or Printed Name: _____ Title: _____
Signature: _____ Date: _____

IX. COGNIZANT OFFICIAL

Typed or Printed Name: _____ Title: _____
Signature: _____ Telephone: _____

X. PERMIT REQUIREMENT VERIFICATION

Please check the following to verify completion of permit requirements.

	Yes	No*
Submittal of Complete NOI?	<input type="checkbox"/>	<input type="checkbox"/>
Submittal of Required Permit Fee?	<input type="checkbox"/>	<input type="checkbox"/>
Check Number: _____		
Development of a Construction Site Map?	<input type="checkbox"/>	<input type="checkbox"/>
Development of Stormwater Pollution Prevention Plan (SWPPP)?	<input type="checkbox"/>	<input type="checkbox"/>
US Fish and Wildlife Letter?	<input type="checkbox"/>	<input type="checkbox"/>

*** If you answer No to any of the above questions, than a permit can not be issued!**

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