State of Washington
DEPARTMENT OF FISH AND WILDLIFE
Mailing Address: P.O. Box 43200, Olympia, WA 98504-3200 • (360) 902-2200 • TDD (360) 902-2207
Main Office Location: Natural Resources Building, 1111 Washington Street SE, Olympia, WA

July 22, 2019

Laurie Niewolny
Washington State Department of Ecology
Water Quality Program
P.O. Box 47775
Olympia, WA 98504-7775

RE: **WDFW- Hatchery Production Increase- request for coverage modification under the Upland Fin-Fish Hatching and Rearing NPDES General Permit**

Dear Ms. Niewolny:

The Washington Department of Fish and Wildlife (WDFW) informed Ecology in March of this year of proposed increases in hatchery fish production. WDFW finalized plans and this letter is notification of planned increases. Enclosed are permit applications for eight (8) affected facilities. WDFW is requesting modifications to coverage as the increases planned are greater than twenty percent of the production applied for under the NPDES Upland Finfish Hatching and Rearing General Permit in January 2015.

The increases are primarily to provide additional prey for Southern resident killer whales, especially Chinook salmon.

Under the General Permit, S6.D. Production Changes: The Permittee must notify Ecology of any proposed significant production increase (20% or greater) or changes in the nature of the discharge which substantially deviates from the information submitted in the permit application.

The 2015 application form includes a table of highest production expected in the next five years- Section E: Production Information. The month with the highest production, or maximum amount of fish on hand in pounds, is the maximum annual production under the permit. The eight facilities plan to increase the monthly maximum pounds of fish by more than 20% of what was in the 2015 application.

WDFW planned increases with estimated percent increase in pounds by facility:

Facility	Permit Coverage #	2015 Permit Application Max Pounds	2019 Max Pounds planned	Estimated Percent Increase
Kendall Creek Hatchery	WAG133007	52,400	70,000	34%
Forks Creek Hatchery	WAG131049	50,000	70,100	40%
Ringold Springs Hatchery	WAG137009	55,500	80,949	46%
Wallace River Hatchery	WAG133006	66,800	98,200	47%
Dungeness Hatchery	WAG131037	35,000	52,935	51%
Palmer Ponds	WAG133002	30,500	51,000	67%

Samish Hatchery	WAG133011	35,000	65,000	86%
Marblemount Hatchery	WAG133015	25,500	84,700	>100%

The increases do not expand production from October 31, 1995 by fifty percent, as referenced under S10. Engineering Documents, of the General Permit.

Please notify WDFW if additional information is required for this notification. Please contact me at (360) 902-2418, or Eric.Kinne@dfw.wa.gov if you have any questions or comments.

Sincerely,

Eric Kinne
Hatcheries Division Manager
Washington Department of Fish and Wildlife

Enclosures
cc: Rob Allan, WDFW
Catie Mains, WDFW
Ann West, WDFW

WASHINGTON STATE DEPARTMENT OF ECOLOGY

For Office Use Only	
Date received:	
Application/Permit No.:	
Waterbody No.	
SIC:	

Request for Coverage under National Pollutant Discharge Elimination Systems (NPDES)

Upland Hatchery and Fish Farm Permit Application

✓ **General** ☐ **Individual** ☐ **Unknown**

All information and responses on this form will be used to determine if coverage under a General or Individual freshwater fish permit is needed. All information must be answered completely and accurately to be considered for coverage. If a question does not apply, answer with "not applicable" or "NA".

Section A: General Information

Does this facility currently have a wastewater discharge permit? ☐ No ☑Yes
If yes, **Permit Number**: WAG13-3006

1. Name of facility: Washington Department of Fish and Wildlife- Wallace River Hatchery

2. Mailing address *(legal notices are sent to this address unless otherwise requested.)*:
   Street: 600 Capitol Way North
   City, State, Zip: Olympia, WA 98501

3. Facility address:
   Street: 14418 383rd Ave SE
   City, State, Zip: Sultan, WA 98294
   County: Snohomish

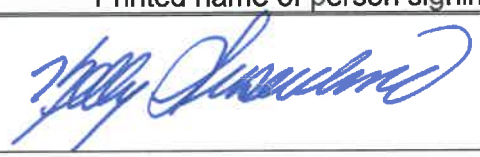
4. Owner information:
   Name: Washington Department of Fish and Wildlife
   Title: NA
   Phone: 360-902-2200
   E-mail: NA

5. Operator information:
   Name: same as owner
   Title:
   Phone:
   E-mail:

6. Primary contact:
Name: Trevor Jenison
Title: Fish Hatchery Specialist 3
Phone: 360-793-1382
E-mail: trevor.jenison@dfw.wa.gov

7. Alternate contact:
Name: David Cox
Title: Fish Hatchery Specialist
Phone: 360-793-1382
E-mail: David.Cox@dfw.wa.gov

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

Kelly Susewind	Director, WDFW
Printed name of person signing	Title
	
Applicant signature	Date signed

NOTE: Federal regulations require this application to be signed as follows:
(A) Corporation: By a principal officer of at least the level of vice president.

(B) Partnership or Sole Proprietorship: By a general partner or the proprietor, respectively.

(C) Municipality, State, Federal, or other public facility: By either a principal executive officer or ranking elected official.

Section B: Facility Information

1. Record the precise coordinates of the entrance to main facility. Use either latitude/longitude (method NAD27 or NAD83) **or** UTM zone. You do not have to list both.

14418 383rd Ave SE

	Degrees	Minutes	Seconds	UTM Zone	Easting	Northing
Latitude	N47°	52'	17.53'			
Longitude	W121°	42'	47.28'			

14418 383rd Ave SE, Sultan WA 98294

For assistance with latitude and longitude refer to any of the following websites:

- http://cfpub1.epa.gov/npdes/stormwater/latlong.cfm
- http://www.epa.gov/tri/report/siting_tool/index.htm.

2. Give directions to the facility from the nearest town or city. (Include a map if the address is not posted at site.)

From Monroe, WA
1.Head **northeast** on **WA-522** toward **Stevens Pass Hwy/US-2/WA-2**
2.Turn **left** at **Stevens Pass Hwy/US-2/WA-2**
3.Turn **left** at **383rd Ave SE**
14418 383rd Ave SE
Sultan, WA 98294

3. Attach a sketch, aerial photograph, or map of the existing or proposed facilities, with the following clearly marked. (Include scale.)

See Facility Sampling plan

a. Approximate overall dimensions of the facility;
b. All raceways and rearing ponds;
c. All water sources and water flow rates;
d. Any settling ponds, including dimensions and volume;
e. All discharge points and receiving waters;
f. All water flow paths;
g. Sludge disposal areas; **and**
h. Water conditioning units.

4. Is this a proposed facility: ☑ No ☐ Yes If yes, construction date: 1906

5. Date(s) facility remodeled, expanded, or upgraded: _____

6. Engineering Report. ☑ No ☐ Yes If yes, date submitted: _____

7. SEPA completed? ☑ No ☐ Yes If yes, date completed: _____

8.

Indicate the number of each type of facility associated with this site.		
Type of rearing facility	**Construction materials** *(specify type of liner: earthen, clay, gravel, synthetic)*	**Number of units**
Raceway *(permanent)*	concrete	10
Raceway *(temporary)*	synthetic	1
Circular pond	synthetic	4
Rearing pond *(more than 2 hour detention time)*	Asphalt	3
Rearing pond *(less than 2 hour detention time)*		
Acclimation pond		
Acclimation site	None	
Net pen	None	
Adult holding basin or raceway	concrete	1
Incubator stacks		104
Troughs for rearing fry	concrete	4
In-line settling basin	Asphalt	1
Offline settling basin	Concrete	1
Other (describe):		

Does the facility discharge to the ground? ☑ No ❑ Yes

Does the facility have unlined structures? ☑ No ❑ Yes If yes:
Type: _____ Quantity: _____

9. Are there any water conditioning facilities? (Examples include: settling basins to remove solids from incoming water, aeration, or pH adjustment.) ☑ No ❑ Yes If yes, describe:

Are solids removed from the influent water? ☑ No ☐ Yes If yes, describe:

10. List the most current dates for the following:

Spill Plan	Date:	January 2015
Pollution Prevention Plan	Date:	January 2015
Solid Waste Plan	Date:	January 2015

Section C: Influent and Effluent Information

1. Specify discharge location and name (if applicable): See Facility Sampling plan

- ☐ Infiltration/Groundwater
- ☑ Stream/River — Wallace River and May Creek
- ☐ Wetland
- ☐ Other (describe)

2. Under normal hatchery operation, analyze a representative flow weighted grab sample for the total hatchery influent. For hatchery effluent, analyze representative grab samples from **each outfall. For facilities with more than one outfall, attach separate sheet.**

NA- facility is applying for modification in coverage. See Section E.

Parameter	Influent	Offline settling basin Influent	Offline settling basin Effluent	Effluent Outfall
Sample date(s)				
Flow	gpd	gpd	gpd	gpd
pH (standard pH units)				
Total suspended solids	mg/L	mg/L	mg/L	mg/L
Settleable solids	mg/L	mg/L	mg/L	mg/L
Total phosphorous	mg/L	mg/L	mg/L	mg/L
Dissolved oxygen, minimum	mg/L	mg/L	mg/L	mg/L
Temperature, maximum (indicate °C or °F)				
Ammonia-N, NO_2-NO_3				
Gallons per day (gpd)		Milligrams per liter (mg/L)		

Section D: Water and Wastewater Treatment Systems

Chapters 90.48 and 90.54 RCW require that all discharges discharging to waters of the state use all known, available, and reasonable methods to prevent and control pollution. All known, available, and reasonable treatment for the upland fin-fish hatching and rearing industry has been determined to be settling for a minimum of 60 minutes of the entire facility's wastewater prior to discharge or the inline settling of solids with periodic removal by vacuuming or similar techniques to an offline settling basin with a detention time of 24 hours or more.

1. Indicate the type of effluent treatment provided at this facility.

❑ **In-line settling basins**

Do any rearing units discharge through the in-line settling basin? ☑ No ❑ Yes Explain:

☑ **Offline settling basins**

Does the facility use an offline settling basin for wastes from cleaning raceways?
❑ No ☑ Yes If yes, provide the following information:

Overflow rate: unknown	Units: unknown (gpd per sq ft)
Basin size: 24'x10'x8.5'	

Is there a mechanism to block discharge of floating material? ❑ No ☑ Yes

Estimate the number of discharges from offline setting basin per year: _____

Construction of offline settling basin (if known)		
Liner material	**Thickness**	**Condition**
Concrete	12inches	good
Asphalt	inches	
Clay or earthen	inches	
Plastic PVC/HDPE/other (describe):	mils	

How many times per year are these cleaned? 1

If an offline settling basin is used for cleaning wastes, is there a quiescent zone at the end of the last raceway or rearing pond in each series? ☑ No ❑ Yes If yes, describe:

2. Pond and raceway cleaning process.

How many times per year are ponds and raceways cleaned? See Facility Solids Waste Management plan
Methods of cleaning: See Facility Solids Waste Management plan
What is done with the removed solids? See Facility Solids Waste Management plan
Are ponds cleaned before fish release? ❑ No ❑ Yes See Facility Solids Waste Management plan
Does this facility have a permit from the local Health District for solids disposal? ☑No ❑ Yes If yes, describe:

3. Are any liquid or solid wastes discharged to ground? ❑ No ❑ Yes If yes, describe:

See Facility Solid Waste Management plan

4. Are any wastes (other than domestic sewage) discharged to a septic system?
☑No ❑ Yes If yes, describe:

5. Are any solids or wastes (other than domestic waste) discharged to a publicly owned treatment works (POTW)?
☑ No ❑ Yes If yes, name of POTW: _____

6. Are wastes discharged to any other waste treatment system?
☑ No ❑ Yes If yes, describe:

7.Provide the following information on water sources used by the facility for rearing fish.

Water sources: See Facility Sampling Plan				
Specify type:	❑ Springs	❑ Stream	❑ Surface water	❑ Well

	❑ Other (describe):

8. Where are flows measured?

Source:	❑ No	❑ Yes	If yes, describe: See Facility Sampling Plan
Outlet:	❑ No	❑ Yes	If yes, describe: See Facility Sampling Plan
Other:	❑ No	❑ Yes	If yes, describe:

Section E: Production Information

1. Fill in the following table for the highest production expected in the next five years. List the maximum amount of fish on hand and the maximum amount of food fed **per month** for the year of maximum production. For **new facilities**, provide information for the year of highest anticipated production within the next five years:

Month	Fish (pounds)	Food (pounds)	Month	Fish (pounds)	Food (pounds)
January	57,900	7,600	July	17,400	11,200
February	57,900	4,100	August	24,600	14,600
March	59,400	9,700	September	48,600	16,300
April	11,300	7,700	October	54,100	10,000
May	11,800	10,500	November	63,900	7,200
June	11,300	6,900	December	66,800	6,600

What year is this data from? 2019 proposed increase

Have you expanded or changed production or do you anticipate a production expansion from the initial application (or since 1990)? ❑ No ☑ Yes If yes, explain:

A program has been removed, another program has been added with a raise in production, and another program has had its production raised since the last update. Current numbers are likely to remain in the future.

2. Operations:
   Does this facility process fish for market at this location? ☑ No ❑ Yes

   Are fish spawned on-site? ❑ No ☑ Yes See Facility Solid Waste Management plan

   Describe wastes generated as a result of on-site spawning: (For example, blood, anesthetics, disinfectants, carcasses.)

See Facility Solid Waste Management plan

Describe how spawning wastes are handled:

See Facility Solid Waste Management plan

Percentage of fish released from site directly to a lake, stream, or other . . ..%
Specifically.

☐ Lake		%	Describe:
☑ River/Stream	70	%	Describe: released on site into river
☐ Other		%	Describe:

Percentage of fish hauled off-site to a lake, stream, or other? . ...% Specifically

☑ Lake	1	%	Describe: released into local lakes
☑ River/Stream	16	%	Describe: hauled to other facilities for release into river.
☑ Other	13	%	Describe: hauled to salt water net pens

3. Method of feeding: Check all that apply and estimate the percent of food fed using that method. See Facility Pollution Prevention plan

❑ Hand _____ % ❑ Automatic (timed) _____ % ❑ Automatic (demand) _____ %

Section F: Chemical Use Information

Note all antibiotics, drugs, disease control chemicals and disinfectants used or anticipated to be used at the facility on the following table. If a chemical is used but not listed on the table, note it in the space provided or on an attachment.

Used Y/N	Internal Disease Control
N	Albuterol
Y	Amoxicillin
N	Azythromycin
N	Benzocaine
N	Calcein
N	Cephalexin
N	Chlortetracycline
N	Clindamycin
Y	Erythromycin
N	Flavobacterium Columnare B vaccine
Y	Florfenicol
N	Fumagillin
N	GnRH=gonadotropin releasing hormone
N	Isoeugenol (Aqui-S)
N	Lincomycin
Y	Magnesium sulfate (Epsom Salts)
N	Nyastin
Y	Oxytetracycline
N	Penicillin
N	Renogen – BKD vaccine
N	Sulfadimethoxine plus oretoprim (Romet 30)
N	Sulfamethoxazole (Albon)
N	Trimethoprim-sulfadiazine
N	Tylosin
N	Vibrio vaccine

Used Y/N	External Disease Control
N	Acetic Acid
Y	Buffered Iodophor
Y	Chloramine-T
N	Citric Acid
N	Copper Sulfate
N	Diquat
Y	Formalin
N	Hydrogen Peroxide
Y	Potassium Permanganate
Y	Sodium Chloride (Salt)
Used Y/N	**Disinfectants/Other**
N	2, 4-D
Y	Aquashade
N	Carbon Dioxide (gas)
N	Chlorhexidine (Nolvasan)
N	Chlorine
N	Glyphosate
N	Imazapyr
Y	Iodophor
Y	Lime Type-S
N	Liquid Live Micro Organisms
N	Ozone (gas)
N	Quaternary Ammonium
Y	Sodium Thiosulfate
Y	Tricane methane sulfonate (MS-222)
N	Tricopyr

What is the frequency and volumes of disinfectants and anesthetics discharged?

Per season Sept-Dec 9 Gallons Iodophor P.V.P

Describe chemical storage: See Facility Pollution Prevention plan

[End of application.]