



Application for Coverage Under the General Permit to Discharge Stormwater Associated with Industrial Activity

New Permit Application
 Update Permit Information
 Permit No. WAR002320

Please print clearly in ink or type and read instructions before filling out this form. All sections are required unless otherwise noted.

I. Permittee Information

(All permit and billing correspondence will be mailed here)

Permittee's Name <u>Leonard Moore</u>		Company Name <u>Tommy's Steel & Salvage Inc.</u>	
Title <u>President</u>		Universal Business Identifier (UBI) Number <u>600-138-383</u>	
Phone No. <u>(509) 547-1221</u>	Fax No.	Street Address or P.O. Box <u>904 S. Oregon Ave.</u>	
E-mail		City <u>Pasco</u>	State <u>WA</u> Zip + 4 <u>99301-4324</u>

II. Facility Information

Name of Facility <u>Tommy's Steel & Salvage</u>		Date facility began operation or will begin operation <u>6/1/1971</u>	
Facility Contact Name <u>Leonard N. Moore</u>		Phone No. <u>(509) 547-1221</u>	
Facility Contact Email Address <u>D</u>		Fax No.	
Facility Street Address (or Location Description) <u>904 S. Oregon Ave</u>		Record site location at front door or site entrance Latitude <u>46° 13' 31" N</u> Longitude <u>119° 4' 35" W</u>	
City <u>Pasco</u>	State <u>WA</u>	Zip + 4 <u>99301-4324</u>	County <u>Franklin</u> Size of Site in Acres <u>7 acres</u>

A. List your Standard Industrial Classification (SIC) codes below with the primary SIC code in box 1. You must identify all industrial activities performed at your facility. (See Table 1 in the permit for a list of activities.) You must translate the North American Industry Classification System (NAICS) code for your facility into a SIC code online at <http://www.census.gov/epcd/www/naicstab.htm>.

a	5	0	9	3	b					c					d					e					f				
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B. Type or Nature of Industrial Activities: Recycling of Scrap metals
Dismantling of Autos - Recycling Auto Parts -

C. Is this facility a Hazardous Waste Treatment, Storage, and Disposal (TSD) facility regulated under Chapter 173-303 WAC? Yes No

D. For Airport Facilities:

Is the facility located at an airport where a single facility, or a combination of facilities, use more than 100,000 gallons of glycol-based deicing chemicals and/or 100 tons or more of urea on an average annual basis? Yes No If yes, identify the sampling points that collect runoff from deicing activities:

III. Other Permits/Registration Check all that apply.

NPDES Permit (Individual or General Construction Stormwater) Permit No. _____
 State Waste Discharge Permit (Ground Discharges) Permit No. _____

IV. Site Information

A. Indicate whether your site's stormwater could enter surface waters, directly and/or indirectly:

- Water will discharge directly or indirectly (through a storm drain system or roadside ditch) into one or more surface waterbodies (wetlands, creeks, lakes, and all other surface waters and water courses).
- Water will discharge to ground with 100% infiltration, with no potential to reach surface waters under any conditions. (If checked, skip to section V.)

B. Discharge Point(s) Latitude and Longitude*: Provide latitude and longitude expressed in degrees (°), minutes ('), and seconds (") for each of your facility's discharge point(s). List all discharge points. Use topographic maps and GPS settings that use the 1983 North American Datum (NAD 83). Use an extra sheet of paper if necessary.

For the discharge identifier, provide a unique name, number, or letter to identify the point(s) of discharge. The identifier can be a maximum of four characters long.

If you identify more than one discharge point, mark the discharge point(s) you will sample to comply with the permit sampling requirements by checking the "S/P" (sample point) box.

Discharge identifier. These cannot be symbols. (maximum of four characters, e.g., 001A)				Latitude degrees, minutes, seconds	Longitude degrees, minutes, seconds	S/P	Location description
S	0	G	T	46° 13' 26" N	119° 4' 36" W	<input checked="" type="checkbox"/>	South Gate
				° ' N	° ' W	<input type="checkbox"/>	
				° ' N	° ' W	<input type="checkbox"/>	
				° ' N	° ' W	<input type="checkbox"/>	
				° ' N	° ' W	<input type="checkbox"/>	

NOTE: You must use the unique identifier for the sampling point on each discharge monitoring report (DMR) form you will submit each quarter. Ecology will provide the DMR form when we issue coverage under the permit.

C. Receiving Water Latitude / Longitude: Provide latitude and longitude expressed in degrees (°), minutes ('), and seconds (") of you facility's discharge where it enters the receiving water(s). Use topographic maps and GPS settings that use the 1983 North American Datum (NAD 83). List all receiving waters for the site. These receiving waters must be listed in the public notice. Use an extra sheet of paper if necessary.

Receiving Water Body	Latitude degrees, minutes, seconds	Longitude degrees, minutes, seconds
Snake River	46° 21' 56" N 56	119° 08' 03" W 14
	° ' N	° ' W
	° ' N	° ' W
	° ' N	° ' W
	° ' N	° ' W

D. Name of Conveyance System: If you discharge to a municipal stormwater system or other stormwater conveyance system (e.g., Kent stormwater drainage system, roadside ditch), identify the system by name or if unnamed, by other identifier (e.g., 145th street ditch)

V. State Environmental Policy Act (SEPA)

Applies only to facilities that began operations after January 1, 2010.

Has a SEPA review been completed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Exempt Type of SEPA determination: <input type="checkbox"/> Determination of Non-Significance (DNS) <input type="checkbox"/> Final Environmental Impact Statement (EIS) <input type="checkbox"/> Mitigated DNS (MDNS) Agency issuing DNS, MDNS, Final EIS, or Exemption: _____ Date: _____

VI. Public Notice

New Facilities beginning operations after January 1, 2010 must publish a public notice at least <i>once</i> a week for <i>two</i> consecutive weeks with <i>seven days</i> in between publications, in a <i>single</i> newspaper of general circulation in the county in which the facility is located. Ecology cannot grant permit coverage earlier than the end of the 30-day public comment period, which begins on the date of the second public notice. Submit (or fax: 360-407-6426) the application to Ecology on or before the date of the first public notice. If you fax the application to Ecology, you must follow up with hard copy by mail.
Date of the first public notice: _____ Date of second public notice: _____ (Begins 30-day public comment period) Example: Date of the first public notice: 01/01/2010 Date of second public notice: 01/08 2010 Name of the newspaper that will publish the public notices: _____
Complete this template using site-specific information. The bold language is required by WAC 173-226-130 and must be included in its entirety. (Either use the fill-in template below or attach on a separate sheet of paper, if necessary.)
<u>Enter name of applicant.</u> <u>Enter address of applicant</u> Is seeking coverage under the Washington Department of Ecology's NPDES General Permit for Stormwater Discharges Associated with Industrial Activities. The industrial site, known as <u>Site name</u> is located at <u>Enter street address</u> in <u>Enter name of nearest city</u> . Operations are due to start up on/started on (select one) <u>Enter date</u> . Industrial activities include <u>Briefly describe the industrial activity</u> Stormwater from the site discharges to <u>List unnamed and named receiving waters</u> . Any person desiring to present their views to the Department of Ecology concerning this application may notify Ecology in writing within 30 days from the last date of publication of this notice. Comments may be submitted to: Washington Dept of Ecology Water Quality Program – Industrial Stormwater PO Box 47696 Olympia, WA 98504-7696

VII. Certification of Permittee*

"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."

Leonard N. Moore Tommys Steel Salvage President
 Printed Name Company Title
 Signature Date 12/30/14

***Federal regulations require this application is signed by one of the following:**

- In the case of corporations, by a principal executive officer of at least the level of vice president.
- In the case of a partnership, by a general partner of a partnership.
- In the case of sole proprietorship, by the proprietor.
- In the case of a municipality, state, federal, or other public facility: by either a principal executive officer or ranking elected official.

Return this signed original document to the below address. Make sure you retain a copy for your records.

Washington Department of Ecology
 Water Quality Program – Industrial Stormwater
 PO Box 47696
 Olympia, WA 98504-7696

If you have any questions, please call:

- **Shawn Hopkins** 360-407-6442 or shop461@ecy.wa.gov for Adams, Asotin, Columbia, Ferry, Franklin, Garfield, Grant, Lincoln, Pend Oreille, Skagit, Snohomish, Spokane, Stevens, Walla Walla, Whatcom, and Whitman counties.
- **Clay Keown** 360-407-6048 or ckeo461@ecy.wa.gov for Island, King (except Seattle), and San Juan counties.
- **Josh Kilmek** 360-407-7451 or jokl461@ecy.wa.gov for city of Seattle and Kitsap, Pierce, and Thurston counties
- **Joyce Smith** 360-407-6858 or josm461@ecy.wa.gov for Benton, Chelan, Clallam, Clark, Cowlitz, Douglas, Grays Harbor, Jefferson, Kittitas, Klickitat, Lewis, Mason Okanogan, Pacific, Skamania, Wahkiakum, and Yakima counties.

To request ADA accommodation or materials in a format for the visually impaired, call Ecology at 360-407-6401. Persons with impaired hearing may call Washington Relay Service at 711. Persons with speech disability may call TTY at 877-833-6341.