

<b>Application Id:</b> 24251	<b>Certification Received:</b> (Ecology use)	JUL 01 2019 WATER QUALITY PROGRAM
<b>Facility Name:</b> Farwest Fabricators	<b>Permit Number:</b> (Ecology use)	WAR001307
<b>Facility Address:</b> 7537 POSTMA RD MOXEE, WA 98936-9706	<b>Facility County:</b>	Yakima
<b>Permittee Name:</b> Scott Smith	<b>Permittee Title:</b>	CEO
<b>Permittee Email:</b> scott.smith@farwestfabricators.com	<b>Permittee Phone:</b>	5094531663
<b>Permittee Address:</b> PO Box 1247 Moxee, WA 98936-1247	<b>Organization Name:</b>	Farwest Fabricators

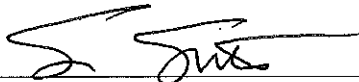
**Certification of Permittee**

"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 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."

Scott Smith / Farwest FabricatorsCEO

Printed Name / Organization

Title

6/26/19

Signature of Permittee \*

Date

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

- A. For a corporation: By a responsible corporate officer.
- B. For a partnership or sole proprietorship: By a general partner or the proprietor, respectively.
- C. For a municipality, state, federal, or other public facility: By either a principal executive officer or ranking elected official.

Please print, sign and mail this form to the following address:

Washington Department of Ecology - Stormwater  
P.O. Box 47696  
Olympia, WA 98504-7696

JUL 01 2019



# Request for Coverage

## Industrial Stormwater General Permit

WATER QUALITY PROGRAM

NOI Version: 1

Application Type: ☐ New ☒ Renewal

Permit Number: WAR001307

Application Id: 24251

**I. Contact Information**

Permittee		
Honorific: Mr.	First Name: Scott	Last Name: Smith
Organization Name: Farwest Fabricators	Title: CEO	
Mailing Address: PO Box 1247		
City: Moxee	State: WA	Zip Code: 98936-1247
Email: scott.smith@farwestfabricators.com		
Primary Phone: 509-453-1663	Secondary Phone:	
UBI Number:		

Site Contact		
Honorific:	First Name: Deborah	Last Name: Dougherty
Organization Name: Farwest Fabricators	Title:	
Mailing Address: PO Box 1247		
City: Moxee	State: WA	Zip Code: 98936-1247
Email: debbie@farwestfabricators.com		
Primary Phone: 509-453-1663	Secondary Phone: 509-453-1663	
UBI Number:		

**II. Facility Information**

Facility Name: Farwest Fabricators

Street Address: 7537 POSTMA RD

City: MOXEE

County: Yakima

Zip Code: 98936-9706

Latitude: 46.562626

Longitude:

Size of Site:

0.8 acres Date facility began or will begin operation:

List all North American Industry Classification System (NAICS) and Standard Industrial Classification (SIC) codes to cover all industrial activities performed at your facility.

NAICS/SIC	Code	Description	Is Primary
SIC	3433	HEATING EQUIPMENT, EXCEPT ELECTRIC	No
SIC	3444	SHEET METALWORK	Yes
SIC	3479	METAL COATING AND ALLIED SERVICES	No
NAICS	332322	Sheet Metal Work Manufacturing	Yes

☐ Is this facility a Hazardous Waste Treatment, Storage, and Disposal (TSD) facility regulated under Chapter 17-303 WAC?

For Airport Facilities:

☐ At your airport, do you as a single permittee, or a combination of permitted 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?

- ☐ Does your airport have 1,000 or more annual jet departures ("non-propeller aircraft")?
- ☐ Does the facility discharge wastewater associated with airfield pavement deicing with stormwater?
- ☐ Do you use urea-containing deicers?
- ☐ Does your airport meet the definition of a new source ("new airports")?
- ☐ Does (will) the airport have 10,000 or more annual departures?
- ☐ Is the airport located in a cold climate zone?

Please enter the URL that your Stormwater Pollution Prevention Plan (SWPPP) is located at: (optional)

Please attach a site map following the requirements of S3.B.1 of the 2020 ISGP.

### III. Other Permits/Registration

None

### IV. Discharge/Receiving Water

#### 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)

#### Location of Discharge into Receiving Water (Outfall)

Outfall Number	Outfall Description	Surface Waterbody Name	Outfall Type	Latitude	Longitude
C	DRAIN C	DRAIN C	Surface Water Body	46.56388854 98047	- 120.3969421 38672

#### Location of Discharge Location (Sampling/Monitoring Point)

Monitoring Point Code	Monitoring Point Name	Monitoring Point Type	Outfall Number	Active	Latitude / Longitude
C	MAIN DRAIN	Stormwater	C	Yes	46.56388854 98047 - 120.3969421 38672

### V. State Environmental Policy Act (SEPA)

This Notice of Intent (NOI) is incomplete and cannot be approved until the applicable SEPA requirements under Chapter 197-11 WAC are met.

SEPA and Public Notice sections apply only to facilities that began operations after January 1, 2020. If the facility began operations before this date, these sections do not need to be filled out.

### VI. Public Notice

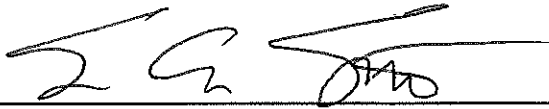
Public Notice applies to facilities that began operations on or after January 1, 2020.

You must publish a public notice at least **once** a week for **two** consecutive weeks with **seven days** between publications, in at least a **single** newspaper of general circulation in the county in which the facility is located. Ecology cannot grant permit coverage sooner than the end of the 30-day public comment period, which begins on the date of the **second** public notice.

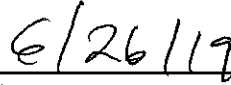
Newspaper Name	First Public Notice Date	Second Public Notice Date

## VII. Certification of Permittees

*"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 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."*

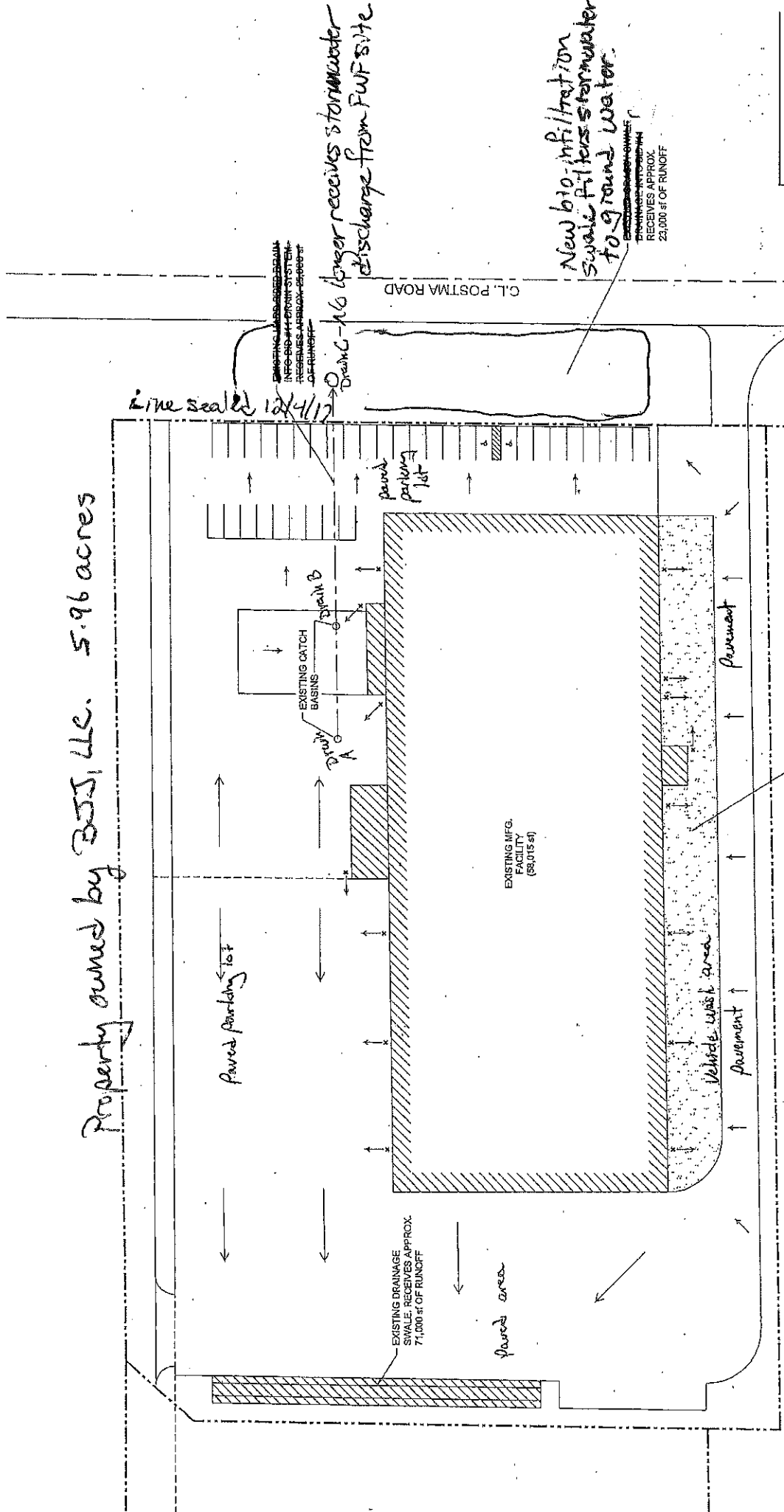


Permittee Signature



Date

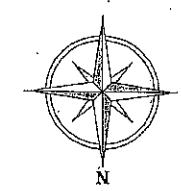
Property owned by BJS, LLC. 5.96 acres



DEPARTMENT OF ECOLOGY

JUL 01 2019

WATER QUALITY PROGRAM



① SITE PLAN 1" = 60'-0"

SYSTE  
CONST

10000 10th Ave. SE  
Bellevue, WA 98003  
Phone 206.461.1000 Fax 206.461.1001  
WWW.SYSTECONST.COM

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DATE: 6/27/16  
DRAWN BY: 16FW-A-10  
SCALE: AS NOTED  
REVISION: 0

SITE PLAN

FARWEST FABRICA  
COMPRESSOR R/C  
MCKEE, WASHINGT