


EPA Identification Number WAD980984785		NPDES Permit Number		Facility Name PUD No. 1 of Chelan County		Form Approved 03/05/19 OMB No. 2040-0004	
Form 1 NPDES		<b>U.S. Environmental Protection Agency</b> <b>Application for NPDES Permit to Discharge Wastewater</b> <b>GENERAL INFORMATION</b>					
<b>SECTION 1. ACTIVITIES REQUIRING AN NPDES PERMIT (40 CFR 122.21(f) and (f)(1))</b>							
Activities Requiring an NPDES Permit	<b>1.1 Applicants Not Required to Submit Form 1</b>						
	1.1.1	Is the facility a new or existing <b>publicly owned treatment works</b> ? If yes, STOP. Do NOT complete Form 1. Complete Form 2A. <input checked="" type="checkbox"/> No	1.1.2	Is the facility a new or existing <b>treatment works treating domestic sewage</b> ? If yes, STOP. Do NOT complete Form 1. Complete Form 2S. <input checked="" type="checkbox"/> No			
	<b>1.2 Applicants Required to Submit Form 1</b>						
	1.2.1	Is the facility a <b>concentrated animal feeding operation</b> or a <b>concentrated aquatic animal production facility</b> ? <input type="checkbox"/> Yes → Complete Form 1 and Form 2B. <input checked="" type="checkbox"/> No	1.2.2	Is the facility an <b>existing</b> manufacturing, commercial, mining, or silvicultural <b>facility</b> that is <b>currently discharging process wastewater</b> ? <input checked="" type="checkbox"/> Yes → Complete Form 1 and Form 2C. <input type="checkbox"/> No			
	1.2.3	Is the facility a <b>new</b> manufacturing, commercial, mining, or silvicultural <b>facility</b> that has <b>not yet commenced to discharge</b> ? <input type="checkbox"/> Yes → Complete Form 1 and Form 2D. <input checked="" type="checkbox"/> No	1.2.4	Is the facility a <b>new or existing</b> manufacturing, commercial, mining, or silvicultural <b>facility</b> that <b>discharges only nonprocess wastewater</b> ? <input type="checkbox"/> Yes → Complete Form 1 and Form 2E. <input checked="" type="checkbox"/> No			
	1.2.5	Is the facility a <b>new or existing facility</b> whose discharge is composed entirely of <b>stormwater associated with industrial activity</b> or whose discharge is composed of <b>both stormwater and non-stormwater</b> ? <input type="checkbox"/> Yes → Complete Form 1 and Form 2F unless exempted by 40 CFR 122.26(b)(14)(x) or (b)(15). <input checked="" type="checkbox"/> No					
<b>SECTION 2. NAME, MAILING ADDRESS, AND LOCATION (40 CFR 122.21(f)(2))</b>							
Name, Mailing Address, and Location	<b>2.1 Facility Name</b>						
	PUD No. 1 of Chelan County, Rocky Reach Dam						
	<b>2.2 EPA Identification Number</b>						
	WAD980984785						
	<b>2.3 Facility Contact</b>						
	Name (first and last) Jennifer Burns		Title Environmental Program Manager		Phone number (509) 661-4474		
Email address jennifer.burns@chelanpud.org							
<b>2.4 Facility Mailing Address</b>							
Street or P.O. box PO Box 1231							
City or town Wenatchee		State WA		ZIP code 98807-1231			

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Name, Mailing Address, and Location Continued	2.5	<b>Facility Location</b>					
		Street, route number, or other specific identifier Hwy 97, 6 miles north of Wenatchee					
		County name Chelan		County code (if known)			
		City or town Wenatchee		State WA		ZIP code 98801	
<b>SECTION 3. SIC AND NAICS CODES (40 CFR 122.21(f)(3))</b>							
SIC and NAICS Codes	3.1	<b>SIC Code(s)</b>		<b>Description (optional)</b>			
		4911		Utility			
	3.2	<b>NAICS Code(s)</b>		<b>Description (optional)</b>			
		221111					
<b>SECTION 4. OPERATOR INFORMATION (40 CFR 122.21(f)(4))</b>							
Operator Information	4.1	<b>Name of Operator</b>					
		PUD No. 1 of Chelan County					
	4.2	Is the name you listed in Item 4.1 also the owner? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
	4.3	<b>Operator Status</b> <input type="checkbox"/> Public—federal <input type="checkbox"/> Public—state <input checked="" type="checkbox"/> Other public (specify) <u>Utility</u> <input type="checkbox"/> Private <input type="checkbox"/> Other (specify) _____					
Operator Information Continued	4.4	<b>Phone Number of Operator</b>					
		(509) 663-8121					
	4.5	<b>Operator Address</b>					
		Street or P.O. Box PO Box 1231 City or town: Wenatchee   State: WA   ZIP code: 98807-1231 Email address of operator: jennifer.burns@chelanpud.org					
<b>SECTION 5. INDIAN LAND (40 CFR 122.21(f)(5))</b>							
Indian Land	5.1	Is the facility located on Indian Land? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					

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SECTION 6. EXISTING ENVIRONMENTAL PERMITS (40 CFR 122.21(f)(6))

Existing Environmental Permits	6.1	<b>Existing Environmental Permits</b> (check all that apply and print or type the corresponding permit number for each)		
		<input type="checkbox"/> NPDES (discharges to surface water)	<input type="checkbox"/> RCRA (hazardous wastes)	<input type="checkbox"/> UIC (underground injection of fluids)
		<input type="checkbox"/> PSD (air emissions)	<input type="checkbox"/> Nonattainment program (CAA)	<input type="checkbox"/> NESHAPs (CAA)
		<input type="checkbox"/> Ocean dumping (MPRSA)	<input type="checkbox"/> Dredge or fill (CWA Section 404)	<input checked="" type="checkbox"/> Other (specify) FERC License #2145

SECTION 7. MAP (40 CFR 122.21(f)(7))

Map	7.1	Have you attached a topographic map containing all required information to this application? (See instructions for specific requirements.)  <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> CAFO—Not Applicable (See requirements in Form 2B.)
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SECTION 8. NATURE OF BUSINESS (40 CFR 122.21(f)(8))

Nature of Business	8.1	Describe the nature of your business. Rocky Reach Hydroelectric Power Plant has a generating capacity of 1,400 megawatts through 11 generator units. Each unit consists of an alternating current generator and an adjustable or fixed blade turbine. Each unit includes governing mechanisms, controls, and switch apparatus. Power is transmitted through conventional transformers and transmission lines. The hydroelectric facility houses all the electrical power generating equipment and water diversion structures.
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SECTION 9. COOLING WATER INTAKE STRUCTURES (40 CFR 122.21(f)(9))

Cooling Water Intake Structures	9.1	Does your facility use cooling water?  <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Item 10.1.
	9.2	Identify the source of cooling water. (Note that facilities that use a cooling water intake structure as described at 40 CFR 125, Subparts I and J may have additional application requirements at 40 CFR 122.21(r). Consult with your NPDES permitting authority to determine what specific information needs to be submitted and when.)  Columbia River

SECTION 10. VARIANCE REQUESTS (40 CFR 122.21(f)(10))

Variance Requests	10.1	Do you intend to request or renew one or more of the variances authorized at 40 CFR 122.21(m)? (Check all that apply. Consult with your NPDES permitting authority to determine what information needs to be submitted and when.)		
		<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Fundamentally different factors (CWA Section 301(n))   <input type="checkbox"/> Non-conventional pollutants (CWA Section 301(c) and (g))   <input type="checkbox"/> Not applicable         </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Water quality related effluent limitations (CWA Section 302(b)(2))   <input type="checkbox"/> Thermal discharges (CWA Section 316(a))         </td> </tr> </table>	<input type="checkbox"/> Fundamentally different factors (CWA Section 301(n))  <input type="checkbox"/> Non-conventional pollutants (CWA Section 301(c) and (g))  <input type="checkbox"/> Not applicable	<input type="checkbox"/> Water quality related effluent limitations (CWA Section 302(b)(2))  <input type="checkbox"/> Thermal discharges (CWA Section 316(a))
<input type="checkbox"/> Fundamentally different factors (CWA Section 301(n))  <input type="checkbox"/> Non-conventional pollutants (CWA Section 301(c) and (g))  <input type="checkbox"/> Not applicable	<input type="checkbox"/> Water quality related effluent limitations (CWA Section 302(b)(2))  <input type="checkbox"/> Thermal discharges (CWA Section 316(a))			

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<b>SECTION 11. CHECKLIST AND CERTIFICATION STATEMENT (40 CFR 122.22(a) and (d))</b>				
Checklist and Certification Statement	11.1	In Column 1 below, mark the sections of Form 1 that you have completed and are submitting with your application. For each section, specify in Column 2 any attachments that you are enclosing to alert the permitting authority. Note that not all applicants are required to provide attachments.		
		<b>Column 1</b>	<b>Column 2</b>	
	<input checked="" type="checkbox"/>	Section 1: Activities Requiring an NPDES Permit	<input type="checkbox"/>	w/ attachments
	<input checked="" type="checkbox"/>	Section 2: Name, Mailing Address, and Location	<input type="checkbox"/>	w/ attachments
	<input checked="" type="checkbox"/>	Section 3: SIC Codes	<input type="checkbox"/>	w/ attachments
	<input checked="" type="checkbox"/>	Section 4: Operator Information	<input type="checkbox"/>	w/ attachments
	<input type="checkbox"/>	Section 5: Indian Land	<input type="checkbox"/>	w/ attachments
	<input type="checkbox"/>	Section 6: Existing Environmental Permits	<input type="checkbox"/>	w/ attachments
	<input checked="" type="checkbox"/>	Section 7: Map	<input checked="" type="checkbox"/>	w/ topographic map <b>Fig 1 &amp; 2</b> <input checked="" type="checkbox"/> w/ additional attachments
	<input checked="" type="checkbox"/>	Section 8: Nature of Business	<input type="checkbox"/>	w/ attachments
	<input checked="" type="checkbox"/>	Section 9: Cooling Water Intake Structures	<input type="checkbox"/>	w/ attachments
	<input type="checkbox"/>	Section 10: Variance Requests	<input type="checkbox"/>	w/ attachments
	<input checked="" type="checkbox"/>	Section 11: Checklist and Certification Statement	<input type="checkbox"/>	w/ attachments
	11.2	<b>Certification Statement</b> <i>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.</i>		
		Name (print or type first and last name)	Official title	
	Stephen Wright	General Manager		
	Signature	Date signed		
	<i>Steph Wright</i>	9-18-19		