



March 25, 2024

Attention: Ms. Jeanne Tran
Washington State Department of Ecology
Northwest Regional Office
Department of Ecology
Shoreline, WA 98133

RECEIVED

MAR 29 2024

DEPARTMENT OF ECOLOGY

SLR Project No.: 101.000001.00001

RE: NPDES Permit No. WA0003239 – Request for Renewal

Dear Ms. Tran,

On behalf of Alon Asphalt Company, please find enclosed the following forms and supporting documents required for renewal of Alon Asphalt Company (formerly Paramount Petroleum) Richmond Beach Asphalt Terminal NPDES Permit #WA0003239 (Expires September 30, 2024):

- EPA Form 1 – General Information
- EPA Form 2C – Existing Manufacturing, Commercial, Mining, and Silvicultural Operations
- EPA Form 2C – Supplemental Cooling Water Intake Structures

We appreciate your consideration in this matter. If you have any questions or require additional information, please feel free to call me at (206) 218-5981.

Regards,

SLR International Corporation

A handwritten signature in black ink, appearing to read "Christopher Lee".

Christopher Lee, L.G.
Senior Geologist
clee@slrconsulting.com

Attachments EPA Form 1 – General Information
 EPA Form 2C – Existing Manufacturing, Commercial, Mining, and Silvicultural Operations
 EPA Form 2C – Supplemental Cooling Water Intake Structures

EPA Identification Number WAD000064568		NPDES Permit Number WA0003239		Facility Name Alon Asphalt Company		OMB No. 2040-0004 Expires 07/31/2026	
Form 1 NPDES		U.S. Environmental Protection Agency Application for NPDES Permit to Discharge Wastewater GENERAL INFORMATION					
MAR 29 2024							
DEPARTMENT OF ECOLOGY							
SECTION 1. ACTIVITIES REQUIRING AN NPDES PERMIT (40 CFR 122.21(F) AND (F)(1))							
Activities Requiring an NPDES Permit	1.1 Applicants <i>Not Required</i> to Submit Form 1						
	1.1.1	Is the facility a new or existing publicly owned treatment works or has your permitting authority directed you to submit Form 2A? If yes, STOP. Do NOT complete Form 1. Complete Form 2A. If the facility is also a treatment works treating domestic sewage , you must also complete Form 2S.	<input checked="" type="checkbox"/> No	1.1.2	Is the facility a sludge-only facility (i.e., a facility that does not discharge wastewater to surface waters)? If yes, STOP. Do NOT complete Form 1. Complete Form 2S.	<input checked="" type="checkbox"/> No	
	1.2 Applicants <i>Required</i> to Submit Form 1						
	1.2.1	Is the facility a concentrated animal feeding operation or a concentrated aquatic animal production facility ? <input type="checkbox"/> Yes → Complete Form 1 and Form 2B. <input checked="" type="checkbox"/> No		1.2.2	Is the facility an existing manufacturing, commercial, mining, or silvicultural facility that is currently discharging process wastewater ? <input checked="" type="checkbox"/> Yes → Complete Form 1 and Form 2C. <input type="checkbox"/> No		
	1.2.3	Is the facility a new manufacturing, commercial, mining, or silvicultural facility that has not yet commenced to discharge ? <input type="checkbox"/> Yes → Complete Form 1 and Form 2D. <input checked="" type="checkbox"/> No		1.2.4	Is the facility a new or existing manufacturing, commercial, mining, or silvicultural facility that discharges only nonprocess wastewater ? <input type="checkbox"/> Yes → Complete Form 1 and Form 2E. <input checked="" type="checkbox"/> No		
	1.2.5	Is the facility a new or existing facility whose discharge is composed entirely of stormwater associated with industrial activity or whose discharge is composed of both stormwater and non-stormwater ? <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		1.2.6	Is the facility a new or existing treatment works treating domestic sewage that discharges wastewater to surface waters? <input type="checkbox"/> Yes → Complete Form 1, Form 2S, and any other applicable forms, as directed by your permitting authority. <input checked="" type="checkbox"/> No		
SECTION 2. NAME, MAILING ADDRESS, AND LOCATION (40 CFR 122.21(F)(2))							
Name, Mailing Address, and Location	2.1 Facility Name						
	Alon Asphalt Company Richmond Beach Terminal						
	2.2 EPA Identification Number						
	WAD000064568						
	2.3 Facility Contact						
	Name (first and last)		Title		Phone number		
	Mark Thomas		Terminal Manager		(206) 546-0514		
	Email address						
	Mark.Thomas@delekus.com						

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Name, Mailing Address, and Location Continued	<u>2.4</u>	Facility Mailing Address		
		Street or P.O. box 20555 Richmond Beach Drive NW		
		City or town Seattle	State WA	ZIP code 98177
	<u>2.5</u>	Facility Location		
		Street, route number, or other specific identifier 20555 Richmond Beach Drive NW		
		County name Snohomish	County code (if known)	
		City or town Unincorporated	State WA	ZIP code 98177

SECTION 3. SIC AND NAICS CODES (40 CFR 122.21(F)(3))				
SIC and NAICS Codes	<u>3.1</u>	SIC Code(s)	Description (optional)	
		5171	Petroleum Bulk Stations and Terminals	
	<u>3.2</u>	NAICS Code(s)	Description (optional)	
		424710	Petroleum Bulk Stations and Terminals	

SECTION 4. OPERATOR INFORMATION (40 CFR 122.21(F)(4))		
Operator Information	<u>4.1</u>	Name of Operator
		Alon Asphalt Company
	<u>4.2</u>	Is the name you listed in Item 4.1 also the owner? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	<u>4.3</u>	Operator Status
		<input type="checkbox"/> Public—federal <input type="checkbox"/> Public—state <input type="checkbox"/> Other public (specify) _____ <input checked="" type="checkbox"/> Private <input type="checkbox"/> Other (specify) _____
<u>4.4</u>	Phone Number of Operator	
	(206) 546-0514	

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Operator Information Continued	<u>4.5</u>	Operator Address Street or P.O. Box 20555 Richmond Beach Drive NW City or town Seattle <table style="width: 100%; border: none;"> <tr> <td style="border: none; width: 33%;">State WA</td> <td style="border: none; width: 33%;">ZIP code 98177</td> </tr> </table> Email address of operator N/A	State WA	ZIP code 98177
State WA	ZIP code 98177			

SECTION 5. INDIAN LAND (40 CFR 122.21(F)(5))		
Indian Land	<u>5.1</u>	Is the facility located on Indian Land? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SECTION 6. EXISTING ENVIRONMENTAL PERMITS (40 CFR 122.21(F)(6))											
Existing Environmental Permits	<u>6.1</u>	Existing Environmental Permits (check all that apply and print or type the corresponding permit number for each) <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; vertical-align: top;"> <input checked="" type="checkbox"/> NPDES (discharges to surface water) WA0003239 </td> <td style="width: 33%; vertical-align: top;"> <input checked="" type="checkbox"/> RCRA (hazardous wastes) WAD000064568 </td> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> UIC (underground injection of fluids) </td> </tr> <tr> <td style="vertical-align: top;"> <input type="checkbox"/> PSD (air emissions) </td> <td style="vertical-align: top;"> <input checked="" type="checkbox"/> Nonattainment program (CAA) <small>No. 10104, noc #6014 PSCAA Minor Source Reg.</small> </td> <td style="vertical-align: top;"> <input type="checkbox"/> NESHAPs (CAA) </td> </tr> <tr> <td style="vertical-align: top;"> <input type="checkbox"/> Ocean dumping (MPRSA) </td> <td style="vertical-align: top;"> <input type="checkbox"/> Dredge or fill (CWA Section 404) </td> <td style="vertical-align: top;"> <input checked="" type="checkbox"/> Other (specify) WA0031704 NPDES Outfall 2 </td> </tr> </table>	<input checked="" type="checkbox"/> NPDES (discharges to surface water) WA0003239	<input checked="" type="checkbox"/> RCRA (hazardous wastes) WAD000064568	<input type="checkbox"/> UIC (underground injection of fluids)	<input type="checkbox"/> PSD (air emissions)	<input checked="" type="checkbox"/> Nonattainment program (CAA) <small>No. 10104, noc #6014 PSCAA Minor Source Reg.</small>	<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) WA0031704 NPDES Outfall 2
<input checked="" type="checkbox"/> NPDES (discharges to surface water) WA0003239	<input checked="" type="checkbox"/> RCRA (hazardous wastes) WAD000064568	<input type="checkbox"/> UIC (underground injection of fluids)									
<input type="checkbox"/> PSD (air emissions)	<input checked="" type="checkbox"/> Nonattainment program (CAA) <small>No. 10104, noc #6014 PSCAA Minor Source Reg.</small>	<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) WA0031704 NPDES Outfall 2									

SECTION 7. MAP (40 CFR 122.21(F)(7))		
Map	<u>7.1</u>	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"/> CAFO—Not Applicable (See requirements in Form 2B.)

SECTION 8. NATURE OF BUSINESS (40 CFR 122.21(F)(8))		
Nature of Business	<u>8.1</u>	Describe the nature of your business. Asphalt operations include receiving asphalt oil to store, blend, and process into various grades of paving, roofing, and emulsions products. Marine fuels operations include receiving, storage, and blending of marine fuel oil products brought in by tanker ships.

SECTION 9. COOLING WATER INTAKE STRUCTURES (40 CFR 122.21(F)(9))		
Cooling Water Intake Structures	<u>9.1</u>	Does your facility use cooling water? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 10.1.
	<u>9.2</u>	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.)

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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.) <div style="display: flex; flex-wrap: wrap; padding: 5px;"> <div style="width: 50%;"> <input type="checkbox"/> Fundamentally different factors (CWA Section 301(n)) </div> <div style="width: 50%;"> <input type="checkbox"/> Water quality related effluent limitations (CWA Section 302(b)(2)) </div> <div style="width: 50%;"> <input type="checkbox"/> Non-conventional pollutants (CWA Section 301(c) and (g)) </div> <div style="width: 50%;"> <input type="checkbox"/> Thermal discharges (CWA Section 316(a)) </div> <div style="width: 50%;"> <input checked="" type="checkbox"/> Not applicable </div> </div>
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SECTION 11. CHECKLIST AND CERTIFICATION STATEMENT (40 CFR 122.22(A) AND (D))

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.	
		Column 1	Column 2
		<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 checked="" type="checkbox"/> Section 5: Indian Land	<input type="checkbox"/> w/ attachments
		<input checked="" 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 <input 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 checked="" 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	Provide the following certification. (See instructions to determine the appropriate person to sign the application.) Certification Statement <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) Mark Thomas	Official title Terminal Manager
		Signature <i>Mark Thomas</i>	Date signed 03/22/2024

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Form 2C NPDES		U.S. Environmental Protection Agency Application for NPDES Permit to Discharge Wastewater EXISTING MANUFACTURING, COMMERCIAL, MINING, AND SILVICULTURE OPERATIONS
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SECTION 1. OUTFALL LOCATION (40 CFR 122.21(G)(1))

Outfall Location	<u>1.1</u>	Provide information on each of the facility's outfalls in the table below.			
		Outfall Number	Receiving Water Name	Latitude	Longitude
		001	Puget Sound	47.783710	-122.395410
		003	Puget Sound	47.778116	-122.395416

SECTION 2. LINE DRAWING (40 CFR 122.21(G)(2))

Line Drawing	<u>2.1</u>	Have you attached a line drawing to this application that shows the water flow through your facility with a water balance? (See instructions for drawing requirements. See Exhibit 2C-1 at end of instructions for example.) <input checked="" type="checkbox"/> Yes
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SECTION 3. AVERAGE FLOWS AND TREATMENT (40 CFR 122.21(G)(3))

Average Flows and Treatment	<u>3.1</u>	For each outfall identified under Item 1.1, provide average flow and treatment information. Add additional sheets if necessary.		
		Outfall Number 001		
		Operations Contributing to Flow		
		Operation	Average Flow	
		Stormwater	0.0596 mgd	
		Miscellaneous	0.0072 mgd	
		Air Stills	0.0015 mgd	
		Boilers, Tank Draws	0.0010 mgd	
		Treatment Units		
		Description (include size, flow rate through each treatment unit, retention time, etc.)	Code from Exhibit 2C-2	Final Disposal of Solid or Liquid Wastes Other Than by Discharge
		API Oil/Water Separator	1-H, 1-U	5-Q
		Sand Trap	1-M	5-Q
		CPI Oil/Water Separator	1-H, 1-U	5-Q
		Induced Air Flotation (IAF)	1-G, 1-K, 2-D	5-Q

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Average Flows and Treatment Continued	3.1 cont.	**Outfall Number** 003			
		Operations Contributing to Flow			
		Operation		Average Flow	
		Stormwater Runoff		N/A mgd	
				mgd	
				mgd	
				mgd	
		Treatment Units			
		Description (include size, flow rate through each treatment unit, retention time, etc.)		Code from Exhibit 2C-2	Final Disposal of Solid or Liquid Wastes Other Than by Discharge
		N/A		N/A	N/A
		Outfall Number			
		Operations Contributing to Flow			
		Operation		Average Flow	
				mgd	
				mgd	
				mgd	
				mgd	
		Treatment Units			
		Description (include size, flow rate through each treatment unit, retention time, etc.)		Code from Exhibit 2C-2	Final Disposal of Solid or Liquid Wastes Other Than by Discharge
System Users	3.2	Are you applying for an NPDES permit to operate a privately owned treatment works? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Section 4.			
	3.3	Have you attached a list that identifies each user of the treatment works? <input type="checkbox"/> Yes			

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SECTION 4. INTERMITTENT FLOWS (40 CFR 122.21(G)(4))

Intermittent Flows	4.1	Except for storm runoff, leaks, or spills, are any discharges described in Sections 1 and 3 intermittent or seasonal? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Section 5.						
	4.2	Provide information on intermittent or seasonal flows for each applicable outfall. Attach additional pages, if necessary.						
		Outfall Number	Operation (list)	Frequency		Flow Rate		Duration
				Average Days/Week	Average Months/Year	Long-Term Average	Maximum Daily	
	001	Boiler 1	7 days/week	12 months/year	0.0005 mgd	0.0010 mgd	365 days	
		Boiler 2	7 days/week	6 months/year	0.0005 mgd	0.0010 mgd	365 days	
		Air Stills	7 days/week	12 months/year	0.0015 mgd	0.0030 mgd	245 days	
	001	Tank Draws	<1 days/week	12 months/year	0.0000! mgd	0.0150 mgd	18 days	
		Miscellaneous	7 days/week	6 months/year	0.0072 mgd	0.0144 mgd	365 days	
			days/week	months/year	mgd	mgd	days	
		days/week	months/year	mgd	mgd	days		
		days/week	months/year	mgd	mgd	days		
		days/week	months/year	mgd	mgd	days		

SECTION 5. PRODUCTION (40 CFR 122.21(G)(5))

Applicable ELGs	5.1	Do any effluent limitation guidelines (ELGs) promulgated by EPA under Section 304 of the CWA apply to your facility? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Section 6.			
	5.2	Provide the following information on applicable ELGs.			
		ELG Category	ELG Subcategory	Regulatory Citation	
		Paving and Roofing Materials	Subpart A - Asphalt Emulsion Subcategory	40 CFR Part 443	
Production-Based Limitations	5.3	Are any of the applicable ELGs expressed in terms of production (or other measure of operation)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Section 6.			
	5.4	Provide an actual measure of daily production expressed in terms and units of applicable ELGs.			
		Outfall Number	Operation, Product, or Material	Quantity per Day	Unit of Measure
		001	Boiler Blowdown, Condensate	0.940	mgd

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	<u>5.5</u>	Are you requesting alternative limits based on an anticipated increase in the actual production during the next permit term? (Consult with your NPDES permitting authority to determine what information needs to be submitted and when.)		
		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

SECTION 6. IMPROVEMENTS (40 CFR 122.21(G)(6))

Upgrades and Improvements	<u>6.1</u>	Are you presently required by any federal, state, or local authority to meet an implementation schedule for constructing, upgrading, or operating wastewater treatment equipment or practices or any other environmental programs that could affect the discharges described in this application?			
		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 6.3.			
	<u>6.2</u>	Briefly identify each applicable project in the table below.			
		Brief Identification and Description of Project	Affected Outfalls (list outfall number)	Source(s) of Discharge	Final Compliance Dates
				Required	Projected
	<u>6.3</u>	Have you attached sheets describing any additional water pollution control programs (or other environmental projects that may affect your discharges) that you now have underway or planned? (optional item)			
		<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not applicable			

SECTION 7. EFFLUENT AND INTAKE CHARACTERISTICS (40 CFR 122.21(G)(7))

Effluent and Intake Characteristics	See the instructions to determine the pollutants and parameters you are required to monitor and, in turn, the tables you must complete. Not all applicants need to complete each table.			
	Table A. Conventional and Non-Conventional Pollutants			
	<u>7.1</u>	Are you requesting a waiver from your NPDES permitting authority for any Table A pollutants for any of your outfalls?		
		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 7.3.		
	<u>7.2</u>	If yes, indicate the applicable outfalls below or check the appropriate box to indicate that you are requesting a waiver for all outfalls. Attach waiver request and other required information to the application.		
		Outfall number _____ Outfall number _____ Outfall number _____ <input type="checkbox"/> I am requesting a waiver for some pollutants at all outfalls. <input type="checkbox"/> I am requesting a waiver for all pollutants at all outfalls → SKIP to Item 7.4.		
	<u>7.3</u>	Have you completed monitoring for all Table A pollutants at each of your outfalls for which a waiver has not been requested and attached the results to this application package?		
		<input checked="" type="checkbox"/> Yes		
Table B. Toxic Metals, Cyanide, Total Phenols, and Organic Toxic Pollutants				
<u>7.4</u>	Do any of the facility's processes that contribute wastewater fall into one or more of the primary industry categories listed in Exhibit 2C-3? (See end of instructions for exhibit.)			
	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Item 7.8.			
<u>7.5</u>	Have you checked "Testing Required" for all toxic metals, cyanide, and total phenols in Section 1 of Table B?			
	<input checked="" type="checkbox"/> Yes			

Effluent and Intake Characteristics Continued

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SECTION 8. USED OR MANUFACTURED TOXICS (40 CFR 122.21(G)(9))

Used or Manufactured Toxics	8.1	Is any pollutant listed in Table B a substance or a component of a substance used or manufactured at your facility as an intermediate or final product or byproduct? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Section 9.		
	8.2	List the pollutants below. Attach additional sheets, if necessary.		
	1. Phenols	4.	7.	
	2.	5.	8.	
	3.	6.	9.	

SECTION 9. BIOLOGICAL TOXICITY TESTS (40 CFR 122.21(G)(11))

Biological Toxicity Tests	9.1	Do you have any knowledge or reason to believe that any biological test for acute or chronic toxicity has been made within the last three years on (1) any of your discharges or (2) a receiving water in relation to your discharge? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Section 10.		
	9.2	Identify the tests and their purposes below.		
		Test(s)	Purpose of Test(s)	Submitted to NPDES Permitting Authority?
		Whole Effluent Toxicity (WET)	Determine toxicity of discharge from Outfall 1	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No	

SECTION 10. CONTRACT ANALYSES (40 CFR 122.21(G)(12))

Contract Analyses	10.1	Were any of the analyses reported in Section 7 performed by a contract laboratory or consulting firm? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Section 11.		
	10.2	Provide information for each contract laboratory or consulting firm below.		
			Laboratory Number 1	Laboratory Number 2
		Name of laboratory/firm	Anatek Labs, Inc.	
		Laboratory address	504 E Sprague Ave. Ste. D Spokane, WA 99202	
		Phone number	(509) 838-3999	
		Pollutant(s) analyzed	All	

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SECTION 11. ADDITIONAL INFORMATION (40 CFR 122.21(G)(13))			
Additional Information	<u>11.1</u>	Has the NPDES permitting authority requested additional information? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Section 12.	
	<u>11.2</u>	List the information requested and attach it to this application.	
	1.	4.	
	2.	5.	
		3.	6.
SECTION 12. CHECKLIST AND CERTIFICATION STATEMENT (40 CFR 122.22(A) AND (D))			
Checklist and Certification Statement	<u>12.1</u>	In Column 1 below, mark the sections of Form 2C 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 complete all sections or provide attachments.	
		Column 1	Column 2
		<input checked="" type="checkbox"/> Section 1: Outfall Location	<input checked="" type="checkbox"/> w/ attachments
		<input checked="" type="checkbox"/> Section 2: Line Drawing	<input checked="" type="checkbox"/> w/ line drawing <input type="checkbox"/> w/ additional attachments
		<input checked="" type="checkbox"/> Section 3: Average Flows and Treatment	<input type="checkbox"/> w/ attachments <input type="checkbox"/> w/ list of each user of privately owned treatment works
		<input checked="" type="checkbox"/> Section 4: Intermittent Flows	<input type="checkbox"/> w/ attachments
		<input checked="" type="checkbox"/> Section 5: Production	<input type="checkbox"/> w/ attachments
		<input checked="" type="checkbox"/> Section 6: Improvements	<input type="checkbox"/> w/ attachments <input type="checkbox"/> w/ optional additional sheets describing any additional pollution control plans
		<input checked="" type="checkbox"/> Section 7: Effluent and Intake Characteristics	<input type="checkbox"/> w/ request for a waiver and supporting information <input type="checkbox"/> w/ small business exemption request <input checked="" type="checkbox"/> w/ Table A <input checked="" type="checkbox"/> w/ Table C <input checked="" type="checkbox"/> w/ Table E <input type="checkbox"/> w/ explanation for identical outfalls <input type="checkbox"/> w/ other attachments <input checked="" type="checkbox"/> w/ Table B <input checked="" type="checkbox"/> w/ Table D <input checked="" type="checkbox"/> w/ analytical results as an attachment
		<input checked="" type="checkbox"/> Section 8: Used or Manufactured Toxics	<input type="checkbox"/> w/ attachments
		<input checked="" type="checkbox"/> Section 9: Biological Toxicity Tests	<input checked="" type="checkbox"/> w/ attachments
		<input checked="" type="checkbox"/> Section 10: Contract Analyses	<input checked="" type="checkbox"/> w/ attachments
		<input checked="" type="checkbox"/> Section 11: Additional Information	<input type="checkbox"/> w/ attachments
		<input checked="" type="checkbox"/> Section 12: Checklist and Certification Statement	<input type="checkbox"/> w/ attachments



REFERENCED FROM : MAPCARD.COM USGS 7.5 MINUTE QUADRANGLE
EDMONDS WEST, WA 2002

0 2,500 5,000 7,500'

THIS DRAWING IS FOR CONCEPTUAL PURPOSES ONLY. ACTUAL
LOCATIONS MAY VARY AND NOT ALL STRUCTURES ARE SHOWN.



ALON ASPHALT - RICHMOND BEACH ASPHALT AND MARINE FUELS TERMINAL

Drawing

PROPERTY LOCATION MAP

Date June 7, 2019

Scale AS SHOWN

Fig. No.

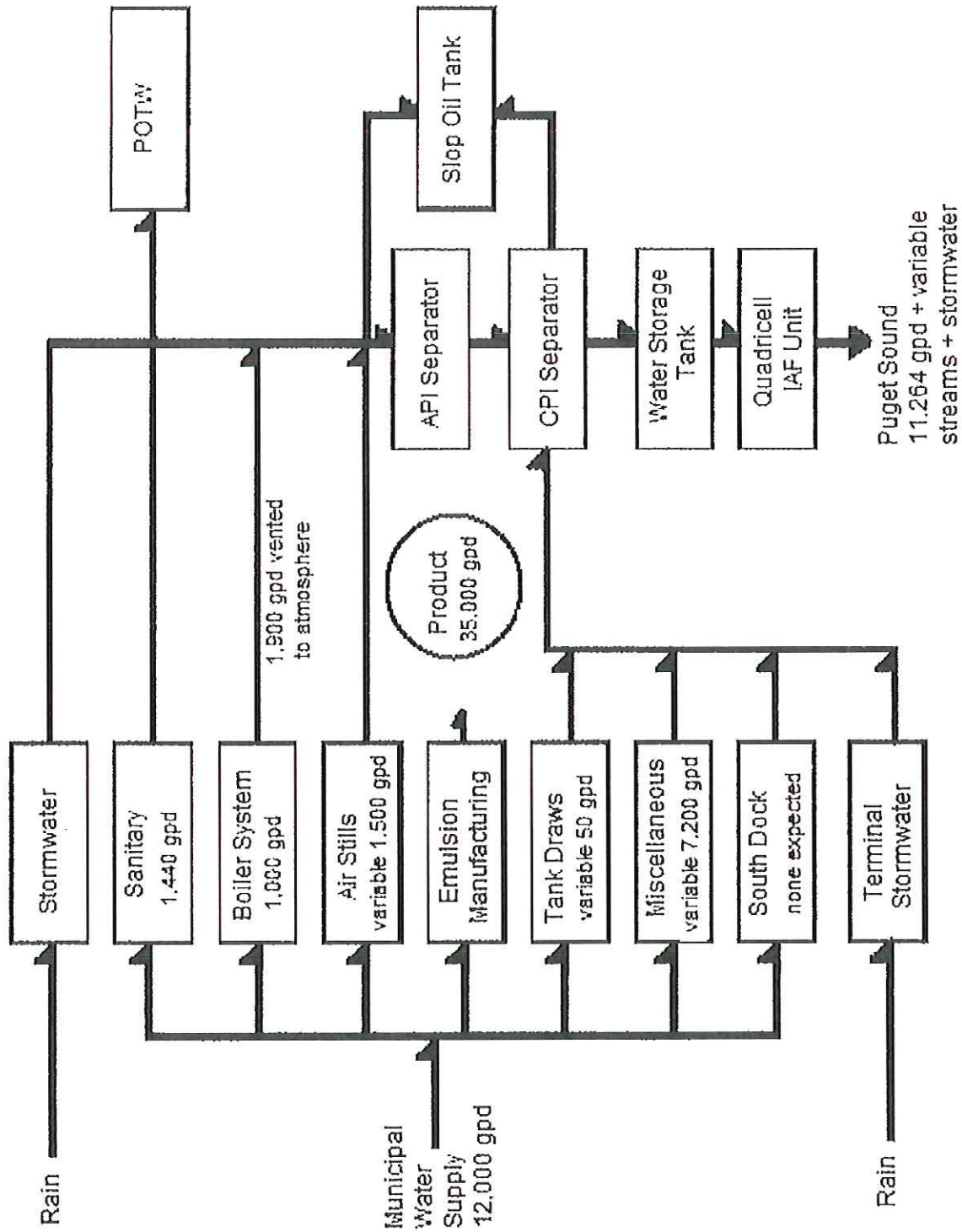
File Name 01-01

Project No. 101.00943.00013

1

Paramount Petroleum Richmond Beach Asphalt Terminal

Water Balance Flow Diagram





EPA Form 2-C Supplemental Cooling Water Intake Structures

CWA §316(b) requires that the location, design, construction, and capacity of cooling water intake structures reflect the best technology available for minimizing adverse environmental impact. EPA has promulgated rules for new facilities at 40 CFR 125 Subpart I and for existing facilities at 40 CFR 125 Subpart J. This form requests information from applicants using EPA Form 2-C to determine applicability of CWA 316(b) requirements and inform applicants of additional application requirements that may apply to the facility.

Facility Name: Alon Asphalt Company
Richmond Beach Terminal

NPDES Permit Number: WA0003239

SECTION A. APPLICABILITY

☐ Yes ☒ No

Is there a cooling water intake associated with this facility? Cooling water intake means a structure withdrawing cooling water, for contact or noncontact cooling, from a surface water source. Withdrawal from groundwater or a public water system is not applicable. If No, STOP.

1. What is the design intake flow (in gallons per day)? _____
2. What percentage of the flow is used exclusively for cooling? _____
3. What is the maximum intake velocity? _____
4. Describe the cooling water system (e.g., once-through, closed-cycle). _____
5. Name the surface water body from which cooling water is withdrawn. _____
6. Provide latitude/longitude of the cooling water intake(s) (NAD83/WGS84). _____ / _____
To ensure accurate locations provide at least 5 significant digits.
7. Describe the configuration of the intake(s) (e.g., dimensions, screen type). _____
If as-built plans and specifications are available, please provide.
8. When was the intake(s) installed, including any major modifications? _____
9. When was the intake(s) last inspected? If regular inspections are scheduled, provide frequency. _____
10. Have there been any studies to determine the impact of the intake(s) on aquatic organisms (e.g., impingement/entrainment studies). ☐ Yes ☐ No
If yes, please provide

SECTION B. APPLICATION REQUIREMENTS

CWA §316(b) requirements apply to all industrial NPDES permitted facilities with cooling water intake structures. EPA has promulgated best technology available (BTA) effluent guidelines for facilities meeting certain thresholds:

- Design intake flow greater than two million gallons per day.
- Greater than 25 percent of the water withdrawn is used for cooling purposes.

Submittal requirements for facilities subject to BTA effluent guidelines:

- New facilities must submit information specified in 40 CFR 122.21(r) and 40 CFR 125.86.
- Existing facilities must submit information specified in 40 CFR 122.21(r) and 40 CFR 125.95.

Facilities subject to BTA guidelines are encouraged to contact Ecology early in the application process. Ecology may consider this application administratively incomplete until the required information is received.

Submittal requirements for existing facilities and new facilities below BTA thresholds:

- Ecology will evaluate the information submitted with this form and may request additional information to assess the need for requirements under 40 CFR 125.90(b) or 40 CFR 125.80(c).

SECTION C. INSTRUCTIONS

All applicants required to submit EPA Form 2C, available here: www.ecy.wa.gov/programs/wq/permits/forms.html must also submit this supplemental form to determine the applicability of CWA §316(b) and any additional application requirements. Enter all applicable information and submit this form as an attachment to Form 2C.

APPLICABILITY

CWA §316(b) requirements apply only to point sources (facilities that have or are required to have an NPDES permit) withdrawing cooling water from waters of the U.S. (surface waters). Withdrawal from groundwater, a public water system, or the use of treated effluent that would otherwise be discharged to waters of the state does not constitute use of a cooling water intake structure. Select Yes or No to the first question. If you answer No, you do not need to complete the remainder of the form.

1. Design intake flow (DIF) means the value assigned during the facility's design representing the maximum instantaneous rate of flow of water the cooling water intake system is capable of withdrawing from a source waterbody. Existing facilities may adjust this value to reflect any permanent changes to the maximum capabilities of the intake system including but not limited to permanent removal of pumps, flow limit devices, and physical limitations of piping. DIF doesn't include emergency capacity or redundant pumps. Report this value in gallons per day (gpd).
2. Report the percentage of water withdrawn that is used exclusively for cooling purposes, measured on an average monthly (new facilities) or average annual over the past three years (existing facilities) basis. Cooling water that is used in a manufacturing process either before or after it is used for cooling is not considered cooling water for the purposes of calculating this percentage.
3. Provide the maximum actual or design intake velocity as water passes through the structural components of the intake screen, measured perpendicular to the screen mesh. Report this value in feet per second (fps). Indicate which value is reported, design or actual.
4. Describe the cooling water system, including if the water is used once (once-through) or recirculated (closed-cycle). If recirculated, provide the minimum number of cycles the water is recirculated and average blowdown flow in gpd.
5. Provide the name of the surface water body your intake structure withdraws water from (e.g., ABC river)
6. Provide an accurate location for each intake structure associated with the facility.
7. Describe the cooling water system including a description of the intake screen dimensions, perforation sizes (if known), and screen type (e.g., traveling screens, wedgewire, barrier nets, trash racks). Provide any design drawings and specifications available.
8. Give the date the intake was first installed and the date(s) of any major modifications to the structure(s).
9. Provide the date of last intake inspection and the frequency of any regularly scheduled inspections.
10. Please provide any available studies of the impact to aquatic life from your cooling water intake structure. These may include studies of entrainment and impingement of fish and shellfish.

APPLICATION REQUIREMENTS

Facilities with design intake flows greater than two million gallons per day, of which greater than 25 percent of the water withdrawn is used exclusively for cooling purposes, must comply with applicable application requirements in federal rule. Please refer directly to the applicable rules, cited in Section B. to determine requirements specific to your facility. Existing facilities should also contact their permit manager for technical assistance. New facility applicants should contact their regional office permit coordinator (www.ecy.wa.gov/programs/wq/permits/permit_coord.html) for assistance.

All applicants are encouraged to provide thorough answers to the questions on this form, along with any additional information that may be useful in determining applicability and application requirements. Ecology may request additional information from facilities with cooling water intake structures operating below the design intake and percentage flow thresholds. Ecology will use the information provided to make a case-by-case determination of the need for additional requirements per 40 CFR 125.80(c) and 40 CFR 125.90(b).

For special accommodations or documents in alternate format, call the Water Quality Program at 360-407-6600. Persons with hearing loss, call 711 for Washington Relay Service. Persons with a speech disability, call 877-833-6341.

EPA Identification Number WAD000064568	NPDES Permit Number WA0003239	Facility Name Alon Asphalt Company	OMB No. 2040-0004 Expires 07/31/2026
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SECTION 12. CHECKLIST AND CERTIFICATION STATEMENT (40 CFR 122.22(a) and (d)) (Continued)			
Checklist and Certification Statement	12.2	Provide the following certification. (See instructions to determine the appropriate person to sign the application.)	
		Certification Statement	
		<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
	Mark Thomas	Terminal Manager	
	Signature	Date signed	
	<i>Mark Thomas</i>	03/22/2024	

