

Attachment A
NPDES Application Form 1 – General Information



Application Form 1

General Information

NPDES Permitting Program

Note: All applicants to the National Pollutant Discharge Elimination System (NPDES) permits program, with the exception of publicly owned treatment works and other treatment works treating domestic sewage, must complete Form 1. Additionally, all applicants must complete one or more of the following forms: 2B, 2C, 2D, 2E, or 2F. To determine the specific forms you must complete, consult the “General Instructions” for this form.

Form 1 NPDES		U.S. Environmental Protection Agency Application for NPDES Permit to Discharge Wastewater GENERAL INFORMATION
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SECTION 1. ACTIVITIES REQUIRING AN NPDES PERMIT (40 CFR 122.21(F) AND (F)(1))
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Activities Requiring an NPDES Permit	1.1	Applicants Not Required 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 <input type="checkbox"/> No Form 1. Complete Form 2A. If the facility is also a treatment works treating domestic sewage , you must also complete Form 2S.	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 <input type="checkbox"/> No Form 1. Complete Form 2S.
	1.2	Applicants Required 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 <input type="checkbox"/> No Form 2B.	1.2.2	Is the facility an existing manufacturing, commercial, mining, or silvicultural facility that is currently discharging process wastewater ? <input type="checkbox"/> Yes → Complete Form <input type="checkbox"/> No 1 and Form 2C.
	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 <input type="checkbox"/> No Form 2D.	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 <input type="checkbox"/> No and Form 2E.
	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 <input type="checkbox"/> No Form 2F unless exempted by 40 CFR 122.26(b)(14)(x) or (b)(15).	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, <input type="checkbox"/> No Form 2S, and any other applicable forms, as directed by your permitting authority.

SECTION 2. NAME, MAILING ADDRESS, AND LOCATION (40 CFR 122.21(F)(2))

Name, Mailing Address, and Location	2.1	Facility Name			
	2.2	EPA Identification Number			
	2.3	Facility Contact			
		Name (first and last)	Title	Phone number	
	Email address				

EPA Identification Number		NPDES Permit Number		Facility Name		OMB No. 2040-0004 Expires 07/31/2026	
	2.4	Facility Mailing Address					
		Street or P.O. box					
		City or town		State		ZIP code	
Name, Mailing Address, and Location Continued	2.5	Facility Location					
		Street, route number, or other specific identifier					
		County name		County code (if known)			
		City or town		State		ZIP code	
SECTION 3. SIC AND NAICS CODES (40 CFR 122.21(F)(3))							
SIC and NAICS Codes	3.1	SIC Code(s)		Description (optional)			
	3.2	NAICS Code(s)		Description (optional)			
SECTION 4. OPERATOR INFORMATION (40 CFR 122.21(F)(4))							
Operator Information	4.1	Name of Operator					
	4.2	Is the name you listed in Item 4.1 also the owner? <input type="checkbox"/> Yes <input type="checkbox"/> No					
	4.3	Operator Status <input type="checkbox"/> Public—federal <input type="checkbox"/> Public—state <input type="checkbox"/> Other public (specify) _____ <input type="checkbox"/> Private <input type="checkbox"/> Other (specify) _____					
	4.4	Phone Number of Operator					

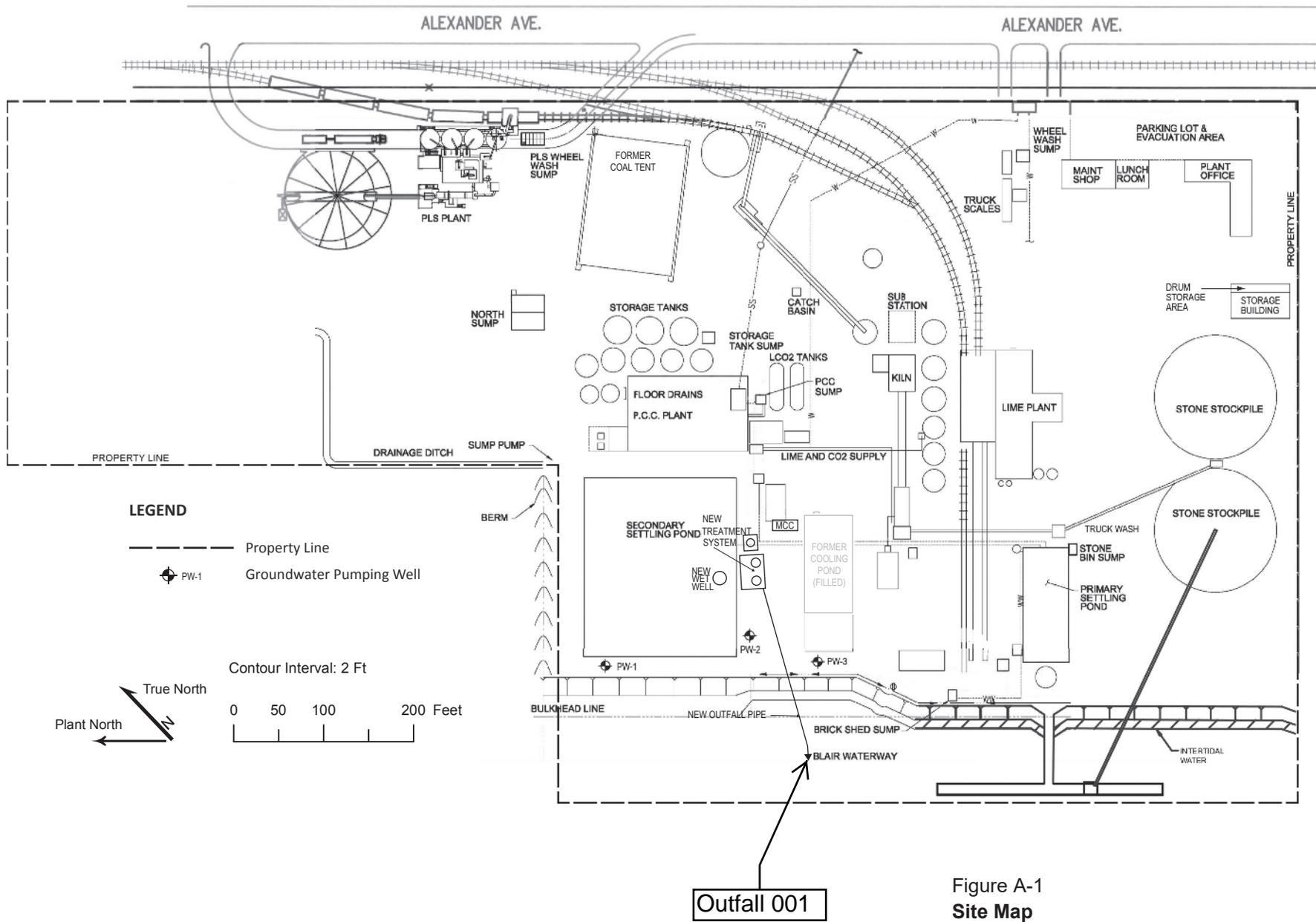
EPA Identification Number		NPDES Permit Number		Facility Name		OMB No. 2040-0004 Expires 07/31/2026	
Operator Information Continued	4.5	Operator Address					
	Street or P.O. Box						
	City or town		State		ZIP code		
Email address of operator							
SECTION 5. INDIAN LAND (40 CFR 122.21(F)(5))							
Indian Land	5.1	Is the facility located on Indian Land? <input type="checkbox"/> Yes <input type="checkbox"/> No					
SECTION 6. EXISTING ENVIRONMENTAL PERMITS (40 CFR 122.21(F)(6))							
Existing Environmental Permits	6.1	Existing Environmental Permits (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 type="checkbox"/> Other (specify)			
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 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	8.1	Describe the nature of your business.					
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 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.)					

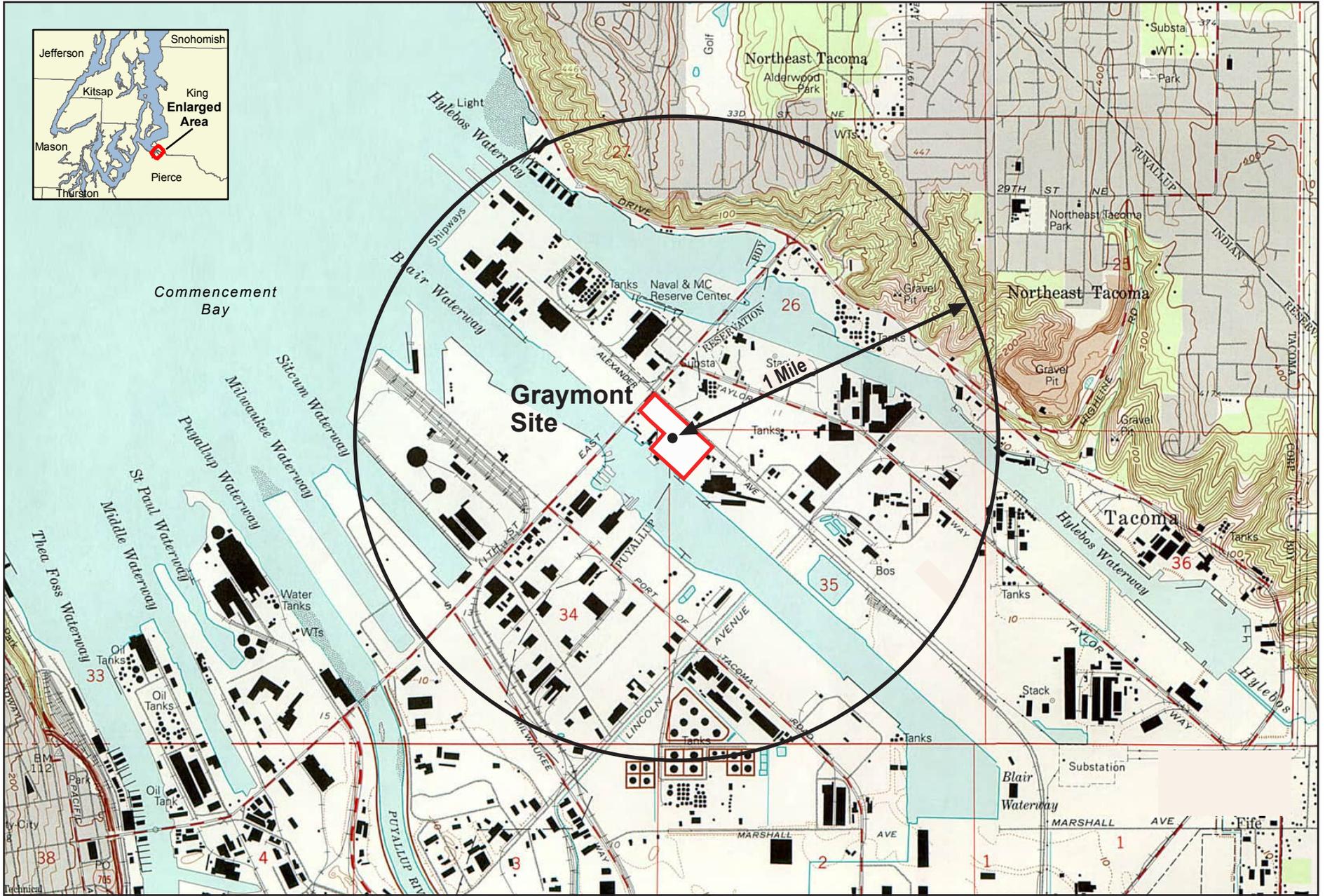
SECTION 10. VARIANCE REQUESTS (40 CFR 122.21(F)(10))

Variance Requests	<u>10.1</u>	<p>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.)</p> <table style="width: 100%;"> <tr> <td><input type="checkbox"/> Fundamentally different factors (CWA Section 301(n))</td> <td><input type="checkbox"/> Water quality related effluent limitations (CWA Section 302(b)(2))</td> </tr> <tr> <td><input type="checkbox"/> Non-conventional pollutants (CWA Section 301(c) and (g))</td> <td><input type="checkbox"/> Thermal discharges (CWA Section 316(a))</td> </tr> <tr> <td><input type="checkbox"/> Not applicable</td> <td></td> </tr> </table>	<input type="checkbox"/> Fundamentally different factors (CWA Section 301(n))	<input type="checkbox"/> Water quality related effluent limitations (CWA Section 302(b)(2))	<input type="checkbox"/> Non-conventional pollutants (CWA Section 301(c) and (g))	<input type="checkbox"/> Thermal discharges (CWA Section 316(a))	<input type="checkbox"/> Not applicable	
<input type="checkbox"/> Fundamentally different factors (CWA Section 301(n))	<input type="checkbox"/> Water quality related effluent limitations (CWA Section 302(b)(2))							
<input type="checkbox"/> Non-conventional pollutants (CWA Section 301(c) and (g))	<input type="checkbox"/> Thermal discharges (CWA Section 316(a))							
<input type="checkbox"/> Not applicable								

SECTION 11. CHECKLIST AND CERTIFICATION STATEMENT (40 CFR 122.22(A) AND (D))

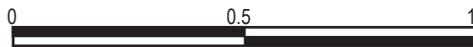
Checklist and Certification Statement	<u>11.1</u>	<p>In Column 1 below, mark the sections of Form 1 that you have completed and are submitting with your application. For each section, specify in Column 2 any attachments that you are enclosing to alert the permitting authority. Note that not all applicants are required to provide attachments.</p>					
		Column 1	Column 2				
		<input type="checkbox"/> Section 1: Activities Requiring an NPDES Permit	<input type="checkbox"/> w/ attachments				
		<input type="checkbox"/> Section 2: Name, Mailing Address, and Location	<input type="checkbox"/> w/ attachments				
		<input type="checkbox"/> Section 3: SIC Codes	<input type="checkbox"/> w/ attachments				
		<input 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 type="checkbox"/> Section 7: Map	<input type="checkbox"/> w/ topographic map <input type="checkbox"/> w/ additional attachments				
		<input type="checkbox"/> Section 8: Nature of Business	<input type="checkbox"/> w/ attachments				
		<input 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 type="checkbox"/> Section 11: Checklist and Certification Statement	<input type="checkbox"/> w/ attachments				
	<u>11.2</u>	<p>Provide the following certification. (See instructions to determine the appropriate person to sign the application.)</p> <p>Certification Statement</p> <p><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></p> <table style="width: 100%;"> <tr> <td style="width: 50%;">Name (print or type first and last name)</td> <td>Official title</td> </tr> <tr> <td>Signature</td> <td>Date signed</td> </tr> </table> <p style="margin-left: 20px;"><i>Keith Wiggs</i></p>		Name (print or type first and last name)	Official title	Signature	Date signed
Name (print or type first and last name)	Official title						
Signature	Date signed						





Source : USGS, Tacoma North 7.5 Quadrangle, Washington
1:24,000-Scale Series (Topographic) 1994

Latitude: 47° 16' 16" N
Longitude: 122° 23' 48" W



Scale in Miles

Figure A-2
Site Location Map
Graymont Western US Inc., Tacoma Washington