



General Instructions for the Preparation of a Fresh Fruit Packing General Permit Environmental Compliance Plan (ECP)

- The purpose of the ECP is to identify existing and potential environmental issues and develop a plan to effectively deal with them.
- The ECP should be completed, and the “Certification of Completion” (see below) should be submitted to Ecology within one year of issuance of coverage under the general permit. Just a copy of the Certification of Completion needs to be submitted, not the entire plan.
- During the renewal process for the general permit (every five years), the ECP should be updated (if needed) and every facility needs to submit a “Certification of Completion” even if there was little to no updates necessary.
- All Treatment/Disposal Methods (TDM’s) and Best Management Practices (BMP’s) for the proper treatment of wastewater and stormwater must be in place prior to the commencement of discharge.
- The organization of the ECP is flexible. The ECP should be developed as an organized and accessible tool containing the information and “standard operating procedures” needed to deal with environmental issues. It should be able to be easily updated as needed (i.e., a 3-ring binder).
- The attached form is a tool to help you develop the ECP for your facility. It was developed in cooperation with industry representatives and in most cases meets the minimum requirements for an ECP as defined by the Fresh Fruit Packing General Permit. However, additional sections should be attached if they are needed to completely cover the situation at your facility. If more room is needed to completely answer a section attach additional pages.
- There may be some overlap between your ECP and your Facility Logbook or other documentation. You do not have to keep duplicate records. You may reference other documents or reports as long as they are easily accessible to anyone using the ECP.
- The ECP must be either typed or written legibly in ink.
- All sections must be completed. Clearly mark “N/A” for sections not applicable to your facility.
- A separate ECP must be completed for each facility.
- Submit the ECP “Certification of Completion” with your completed Renewal Application to the following address. A completed and signed copy of page 1 of the ECP will serve as the “Certification of Completion”. **Do not submit the entire ECP.** It should be kept on site and available for use by facility and Ecology personnel upon request.

Central Region Counties: Benton, Chelan, Douglas, Kittitas, Klickitat, Okanogan, Yakima.

ATTN: MARCIA PORTER
WASHINGTON STATE DEPARTMENT OF ECOLOGY
CENTRAL REGION OFFICE
1250 W. ALDER STREET
UNION GAP, WA 98903-0009
509-406-6624
marcia.porter@ecy.wa.gov

Eastern Region Counties: Adams, Asotin, Columbia, Ferry, Franklin, Garfield, Grant, Lincoln, Pend Orielle, Spokane, Stevens, Walla Walla, Whitman.

ATTN: DAVID ENNIS
WASHINGTON STATE DEPARTMENT OF ECOLOGY
EASTERN REGION OFFICE
4801 N. MONROE
SPOKANE, WA 99205-1295
509-220-9194
david.ennis@ecy.wa.gov

To request ADA accommodation or materials in a format for the visually impaired, call Ecology at 360-407-6600. Persons with impaired hearing may call Washington Relay Service at 711. Persons with speech disability may call TTY at 877-833-6341.

Fresh Fruit Packing General Permit Environmental Compliance Plan (ECP)

Company Name _____

Facility Name _____

Permit Number _____

Facility Contact/Phone _____

ECP REQUIREMENTS

- **ONLY** submit this signed and completed **first page** to your Ecology Regional Office. A completed and signed copy of this page will serve as the Certification of Completion of your ECP.
- Retain the completed ECP at your facility for use by company personnel. Make ECP available to Ecology upon request.
- Have available on-site, sufficient, adequately trained, and capable personnel at all times during which Treatment/Disposal Methods (TDM's) are being utilized.
- Periodically review and modify your ECP. At a minimum, a modified ECP should be developed with the renewal of the general permit (every five years). The modified ECP will become effective immediately.
- The ECP consists of 4 Parts:
 - Part 1 -- Treatment/Disposal Method (TDM)
 - Part 2 -- Solid Waste Management Method (SWMM)
 - Part 3 -- Spill Prevention Method (SPM)
 - Part 4 -- Storm Water Pollution Prevention Plan (SWPPP)
- Is your facility for storage only with no packing or drenching on site?
YES _____ NO _____

Facilities which only store fruit with no packing or drenching on site, may exclude Part 2 (SWMM) from its ECP.

This certification of completion, as required by 40 CFR 122.22 (d), must be signed in ink by the responsible official, owner, principal executive officer, or duly authorized representative.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision. 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 a fine and/or imprisonment.

Name (print): _____ Title _____

Signature: _____ Date Signed _____

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FRESH FRUIT PACKING GENERAL PERMIT ENVIRONMENTAL COMPLIANCE PLAN

PART I – TREATMENT/DISPOSAL METHODS

BASELINE OPERATING CONDITIONS

Indicate which Treatment/Disposal (TDMs) you are using to meet the effluent limitations contained in Special Conditions S3 and S5 of the general permit:

TREATMENT/DISPOSAL METHOD (TDM)	CHECK IF THIS METHOD USED
LINED EVAPORATIVE LAGOON	
DUST ABATEMENT	
PUBLICLY OWNED TREATMENT WORKS (POTW)	
LAND APPLICATION	
PERCOLATION SYSTEM	
SURFACE WATER	

NON-BASELINE OPERATING CONDITIONS

The following questions pertain to non-baseline conditions, which are any circumstances other than your normal operating conditions (i.e., significantly higher than normal production levels, etc.)

- Do your operation/production levels vary enough to adversely affect the ability of the TDMs to adequately treat your wastewater anytime during a calendar year? YES _____ NO _____
- Do you have any regularly scheduled maintenance or repair activities which would adversely affect the ability of the TDMs to adequately treat your wastewater? YES _____ NO _____

If you answered 'YES' to either or both of the above questions, describe the operating procedures, conditions, Best Management Practices (BMPs), etc., used to achieve adequate treatment during non-baseline operations as described above. Attach additional sheets if needed.

MONITORING AND REPORTING

For each of the TDMs checked in Part I, Section A above, complete the following information. See the reference Special Conditions 5 of the General Permit for guidance.

Employee/Position responsible for monitoring and reporting: _____

TDM	Description of Sample Point(s) (where wastewater is sampled)	Sample Gathering and Handling Methods (see Special Conditions S7, S8, S9, and S10 of the General Permit)	Required Testing (see Special Conditions S5 of the General Permit)	Reporting Frequency and Other Requirements (see Special Conditions S7.A and S7.B of the General Permit)
Lined Evaporative Lagoon				
Dust Abatement				
POTW				
Land Application				
Percolation System				
Surface Water				

A. MAINTENANCE RELATED SUBSTANCES

ONLY THOSE FACILITIES WITH STORAGE ONLY (NO PACKING OR DRENCHING ON SITE) NEED TO COMPLETE PART D. ALL OTHER FACILITIES COMPLETE THE TABLE IN PART 3 (SPILL PREVENTION PLAN) INSTEAD.

Have you submitted to Ecology a Tier II Emergency and Hazardous Chemical Inventory Report within the last year?

YES _____ NO _____

If "YES" you may reference or attach the Tier II Report as a substitute for the following table.

If "NO" complete the following table. List any maintenance related substances (such as cleaners, degreasers, solvents, lubricating oils and greases, etc.) that have the potential to be discharged (either intentionally or by accident). List only those substances which are in 50-gallon or greater containers.

MATERIAL TYPE	COMMON NAME OR ACTIVE INGREDIENTS*	AMOUNT STORED	DESCRIPTION OF CONTAINMENT, BMPs, ETC., IN PLACE TO PREVENT UNAUTHORIZED (ACCIDENTAL) DISCHARGE

*YOU MAY ATTACH COMPLETE CHEMICAL MANUFACTURE SAFETY DATA SHEETS (SDS) INSTEAD OF LISTING ACTIVE INGREDIENTS

PART 2 – SOLID WASTE MANAGEMENT PLAN (SWMP)

FACILITIES WITH STORAGE ONLY AND NO ON-SITE DRENCHING MAY SKIP PART 2.

The purpose of the SWMM is to ensure that all solid wastes are being handled and disposed of in a proper manner. Materials or containers which are recycled do not need to be listed.

List in the table below the sources, estimated generation rate, and disposal methods of all solid wastes, including residuals or sludges, either produced or collected at your facility:

DESCRIPTION OF SOURCE	ESTIMATED GENERATION RATE (tons/year)	DISPOSAL METHOD (include waste hauler information and destination)
WASTE FRUIT, TWIGS, LEAVES, ETC.		
DPA SLUDGE		
OTHER SLUDGE		
SPENT LIME		
GARBAGE		
OTHER (SPECIFY)		
OTHER (SPECIFY)		

Is this facility in compliance with the solid waste requirements listed in Special Conditions S10.B of the general permit? YES _____ NO _____

If "NO" attach a description of any actions and/or BMP's (along with an implementation schedule) for coming into compliance with these requirements.

PART 3 – SPILL PREVENTION PLAN (SPP)

1. Describe the reporting system used to immediately notify facility management, the POTW operator (if applicable), and all appropriate state, federal, and local authorities of any spills or unauthorized discharges. Include the name of the person at the facility responsible for making the report, and the agency name, contact name, and phone number of all who need to be contacted. {Add additional sheets when necessary.}

Facility Responsible Official/Phone Number: _____

2. Describe your current overall facility plan for the prevention, containment, and treatment of spills and/or unauthorized discharges. This should include such things as a Spill Response Action Flow Chart, BMP's, operator training, equipment (i.e. spill kits), and facilities (i.e. containment structures, chemical storage facilities, etc.). Contact your local emergency plan with their requirements. You may also want to contact the Labor & Industries Educational Division for additional guidance in completing your plans. {Add additional pages if necessary and for action flow charts, training plans, etc.}

Local Fire Department/District: _____

3. Have you submitted a Tier II Emergency and Hazardous Chemical Inventory Report to Ecology within the last year? YES _____ NO _____

If "YES," you may reference or attach the Tier II Report as a substitute for the following table.

If "NO," complete the following table. List all raw materials, products, maintenance materials, chemicals, or dangerous materials, used, processed, or stored at the facility. List only those materials stored in 50-gallon or larger containers.

MATERIAL TYPE	COMMON NAME OR ACTIVE INGREDIENTS*	AMOUNT STORED	DESCRIPTION OF CONTAINMENT, BMPs, ETC., IN PLACE TO PREVENT UNAUTHORIZED (ACCIDENTAL) DISCHARGE

*YOU MAY ATTACH COMPLETE SDS INSTEAD OF LISTING ACTIVE INGREDIENTS

PART 4 STORMWATER POLLUTION PREVENTION PLAN (SWPPP)

[A limited number of guidance documents for preparing a Storm Water Pollution Prevention Plan are available. Contact the Ecology Publication Office, PO Box 47600, Olympia, WA 98504-7600, 360/407-7472. Request Publication No. WQ-R-93-015 "Stormwater Pollution Prevention Planning for Industrial Facilities - Guidance for Developing Pollution Prevention Plans and Best Management Practices"]

The purpose of the Stormwater Pollution Prevention Plan is to assure the proper treatment and disposal of all stormwater and structural runoff.

In order to achieve this, the permittee must:

1. Use no disposal method or practice which is contrary to any local, state, or federal regulation or standard.
2. Use only the following stormwater treatment/disposal methods (TDM's) or practices:
 - a. Grass lined swale infiltration system, drywell, or surface drain field,
 - b. Percolation pond or drainage ditch,
 - c. Surface water,
 - d. Any other professionally engineered system, approved by Ecology prior to construction, which will treat stormwater to meet applicable state and federal water quality regulations, or
 - e. Any combination of the above with approval by Ecology.
3. Comply fully with the following applicable stormwater specific BMP's and prohibitions, including, but not limited to:
 - a. Good housekeeping, which shall include inspections and cleanup of material handling areas to reduce the potential for stormwater pollution.
 - b. Preventative maintenance, which shall include inspections and maintenance of stormwater conveyance systems and facility equipment/systems whose failure could result in stormwater pollution.
 - c. A general inspection schedule, conducted by qualified facility personnel, to inspect designated stormwater handling equipment and facility areas.
 - d. Record keeping practices which shall identify a tracking procedure to ensure that an appropriate response has been taken in response to any identified problem in an inspection.
 - e. A prohibition of unpermitted discharges of process wastewater or non-contact cooling water (NCCW) to storm sewer or surface waters of the state.
 - f. A prohibition of the diversion of stormwater discharges to sanitary or combined sewers without the written approval of the municipality (or district) that owns or operated the municipal sewerage system.
 - g. A prohibition of the diversion of stormwater discharges to ground waters, if such diversion will result in a violation, or potential for violation, of state groundwater standards.
 - h. A prohibition of the diversion of stormwater discharges to surface waters, if such diversion will result in either a violation, or potential for violation, of state surface water quality standards. PLEASE NOTE: Diversions of stormwater to surface water may require coverage under the Industrial Stormwater General Permit. Please contact your permit manager at the appropriate regional office (see ECP Instructions page) for more information.

- i. A prohibition of the diversion of stormwater discharges to surface waters, if such diversion will result in either a violation, or potential for violation, of state surface water quality standards. PLEASE NOTE: Diversions of stormwater to surface water may require coverage under the Industrial Stormwater General Permit. Please contact your permit manager at the appropriate regional office (see ECP Instructions page) for more information.

4. Assessment of Existing and Potential Pollutant Sources:

Non-stormwater discharges to a stormwater system are not allowed unless they are covered by the Fresh Fruit Packing General Permit (see Special Conditions S6 of the permit).

Examples of non-stormwater discharges include process water, NCCW, vehicle wash water, sanitary waste, and air conditioner condensate. If such unpermitted discharges of non-stormwater are occurring, you must notify Ecology immediately. An investigation should be done to determine if you have non-stormwater discharges to the stormwater system. You may use one or more of the following investigative techniques:

- a. Visual observation of flows, odors, and other abnormal conditions,
- b. Dye and smoke tests,
- c. Analysis and validation of piping schematics, and/or
- d. Laboratory analysis of stormwater discharge for BOD, Total Suspended Solids, pH, Fats, Oil and Grease, and /or presence of E. coli Bacteria. Ecology must approve testing program and testing methods must be an approved method and detection limit as listed in Appendix A, Recommended Analytical Methods of the Fresh Fruit Packing General Permit.

Complete the following table to describe the results of your investigation to determine the presence or absence of non-stormwater discharges to the stormwater system.

NON-STORMWATER DISCHARGES TO STORMWATER SYSTEM INVESTIGATION RESULTS

DATE OF TEST	DISCHARGE LOCATION	INVESTIGATIVE METHOD USED	PERSON CONDUCTING TEST	RESULTS OF TEST	ACTION TAKEN (OR PLANNED) TO ELIMINATE NON STORMWATER DISCHARGE

5. Attach a site sketch (sketch does not need to be exactly to scale, but should be as close to scale as practical. Distances and locations can be estimated as long as relative locations are accurate), at a minimum, include the following:
- Outline of site boundaries, buildings, and paved areas;
 - Physically constructed features used to drain, channel, or discharge stormwater (i.e. open pipes, open channels, ditches, etc.);
 - Stormwater management controls including, but not limited to, the following,
 - Oil/Water separators;
 - Biofiltration (swales, man-made or natural ground contour, etc.);
 - Infiltration basins (natural or man-made);
 - Sedimentation basins;
 - Source controls; and
 - BMP's if needed to improve or maintain the efficiency of existing or proposed areas.
 - Outline of the stormwater drainage areas for each stormwater discharge point (including discharges to groundwater);
 - Areas of industrial activity and areas with a high probability of actual or potential pollutant contact (i.e., fueling stations, loading and unloading areas, high traffic areas, chemical storage areas, vehicle service and maintenance areas, waste storage and disposal areas, storage areas, etc.);
 - Surface water locations; and
 - Areas of existing and potential soil erosion.
6. Describe an implementation schedule, including completion dates for all of the TDM's, BMP's, and other activities described in this stormwater pollution prevention plan. It should be noted that modification of existing stormwater systems, TDM's, or BMP's are necessary only if an inspection reveals that the current systems, TDM's, or BMP's are inadequate, due to an actual discharge of, or potential to discharge, a significant amount of any pollutant.



Record results of monthly inspections on this form. Make additional copies as needed.

STORMWATER INSPECTION RECORD FOR _____ (calendar year)

FACILITY NAME _____ PERMIT #WAG _____

	DATE OF INSPECTION	NAME OF INSPECTOR(S)	RESULTS OF INSPECTION (contamination, deterioration, abnormalities, condition of facilities, housekeeping activities, etc.)	CORRECTIVE ACTIONS TAKEN (include date completed)
J A N				
F E B				
M A R				
A P R				
M A Y				
J U N				

STORMWATER INSPECTION RECORD FOR _____ (calendar year)

FACILITY NAME _____ PERMIT #WAG _____

	DATE OF INSPECTION	NAME OF INSPECTOR(S)	RESULTS OF INSPECTION (contamination, deterioration, abnormalities, condition of facilities, housekeeping activities, etc.)	CORRECTIVE ACTIONS TAKEN (include date completed)
J U L				
A U G				
S E P T				
O C T				
N O V				
D E C				