

ATTENTION: This form is for Permit Updates and Planned Facility Changes Only. New Notices of Intent (NOI) must be submitted electronically unless granted a waiver. [Water Treatment Plant General Permit Webpage](#)¹.



Water Treatment Plant General Permit Update Form

Permit #: WAG

Please indicate which section(s) you are updating:

<input type="checkbox"/> I. Site Information
<input type="checkbox"/> II. Operator/Permittee
<input type="checkbox"/> III. Legal Responsible Party
<input type="checkbox"/> IV. On-site Contact Person
<input type="checkbox"/> V. Site Information
<input type="checkbox"/> VI. Discharge Location/Outfall Information
<input type="checkbox"/> VII. State Environmental Policy Act (SEPA)
<input type="checkbox"/> VIII. Public Notice
<input type="checkbox"/> IX. Site Sketch
<input type="checkbox"/> X. Certification of Permittees

¹ <https://ecology.wa.gov/Regulations-Permits/Permits-certifications/Water-treatment-plants>

I. Site Information

Please print or type all sections of this application. All fields are required unless otherwise marked.

Facility Name and Location:	OR Location Description:
Street Address:	
City:	
County:	
Zip Code:	
Record the latitude and longitude of the <i>main entrance</i> to the site or the approximate center of site	
Latitude: °N	Longitude: °W

II. Operator/Permittee

(Party with operational control over plans and specifications or day-to-day operational control of activities that ensure compliance with permit conditions.)

Name:	Company:		
Business Phone:	Ext.	Unified Business Identifier (UBI): (UBI is a nine-digit number used to identify a business entity. Write "none" if you do not have a UBI number.)	
Cell Phone (Optional):	Fax (Optional):		
E-mail:			
Mailing Address:			
	City:	State:	Zip:

III. Legal Responsible Party

(The party listed on the County Assessor's records as owner and taxpayer of the parcel[s] for which permit coverage is requested.)

Name:	Company (if applicable):		
Business Phone:	Ext.	Unified Business Identifier (UBI): (UBI is a nine-digit number used to identify a business entity. Write "none" if you do not have a UBI number.)	
Cell Phone (Optional):	Fax (Optional):		
E-mail:			
Mailing Address:			
	City:	State:	Zip:

IV. On-site Contact Person(s)

(Typically, the Facility Manager or Operator/Permittee)

Name:		Company (if applicable):		
Business Phone:	Ext.	Unified Business Identifier (UBI):		
Cell Phone (Optional)	Fax (Optional):	(UBI is a nine-digit number used to identify a business entity. Write "none" if you do not have a UBI number.)		
E-mail:				
Mailing Address:		City:	State:	Zip:

On-site Contact Person

Name:		Company (if applicable):		
Business Phone:	Ext.	Unified Business Identifier (UBI):		
Cell Phone (Optional)	Fax (Optional):	(UBI is a nine-digit number used to identify a business entity. Write "none" if you do not have a UBI number.)		
E-mail:				
Mailing Address:		City:	State:	Zip:

On-site Contact Person

Name:		Company (if applicable):		
Business Phone:	Ext.	Unified Business Identifier (UBI):		
Cell Phone (Optional)	Fax (Optional):	(UBI is a nine-digit number used to identify a business entity. Write "none" if you do not have a UBI number.)		
E-mail:				
Mailing Address:		City:	State:	Zip:

V. Site Information

Source of Raw Water

- Surface Water or Groundwater Under the Direct Influence of Surface Water
- Groundwater (Not Under the Direct Influence of Surface Water)

Waterbody or Aquifer Name (if applicable):

This Facility Produces:

- Industrial Water
- Potable Water

Facility Finish Water Production (gallons per day)

Maximum Production Capacity:

Average Monthly Production:

Peak Production (historically greatest):

Methods of Raw Water Treatment

List any raw water treatment methods used at this facility.

Facility Process that Contribute to Wastewater Discharges

List any facility process that contributes to the wastewater at this facility.

Chemical Additives / Substances Potentially in Wastewater Discharges

List any chemical additives or substances used at this facility.

VI. Discharge Location/Outfall Information

Check all that are true.

- Water will discharge to ground with 100% infiltration, with no potential to reach surface waters under any conditions.
- Some water may discharge to surface water, and some will infiltrate into the ground directly or indirectly (e.g., via either direct discharge to the ground or seepage from a settling pond or ditch).
- Water will discharge directly or indirectly (through pipe or ditch) into one or more surface waterbodies (wetlands, creeks, lakes, and all other surface waters and water courses).

Conveyance System

If you discharge to a conveyance system (e.g. discharge pipe, ditch), identify the system by name or if unnamed, by other identifier (e.g., discharge pipe under 6th Street):

Discharge/Sample Point Info

*This section describes how to fill out the table below

Discharge Identifier

List the name, number, or letter used on the map to identify the point(s) where wastewater is discharged off-site. The identifier may be a maximum of four characters long and must be unique for each discharge point. (Example S001 for Surface Water, G001 for Groundwater and PW01 for POTW)

Latitude/Longitude

Provide latitude and longitude expressed in decimal degrees. For assistance with latitude/longitude, use the following website: <http://itouchmap.com/latlong.html>.

Description

In the Description column, provide a brief description of the discharge point (e.g., Catch Basin #1).

Indicate which discharge points you collect wastewater samples from by checking the "SP" (sample point) box.

New or Removed?

For each discharge point listed, indicate the status. If you are *changing* a discharge/sample point to a new location, list the old point in one row of the table (indicate "R"), and list the new point in another row on the table (indicate "N"). Assign the new point a different Discharge Identifier than what you used previously for the removed point.

Associated Outfalls

The outfall is the location where the discharge ultimately enters a receiving waterbody (e.g., creek, river, bay, etc.), typically after being conveyed through a pipe or open channel. Most facilities have one discharge point they sample and will have only one outfall. This column is for facilities with multiple discharge points.

Discharge Identifier	Latitude (Decimal Degrees)	Longitude (Decimal Degrees)	Description	SP	New or Removed (N or R)	Effective Date of Update	Associated Outfall Identifier	Associated Outfall Latitude / Longitude
	N	W		<input type="checkbox"/>				
	N	W		<input type="checkbox"/>				
	N	W		<input type="checkbox"/>				

Receiving Water Information (Location where wastewater enters receiving water)

In the space below, list the locations where you wish to add, remove or change a location where wastewater discharged from your facility enters receiving water(s).

For each receiving water location listed, indicate the status. If you are adding a receiving water location, indicate "N" for New. If you are removing a receiving water location, indicate "R" for Remove.

If you are *changing* a receiving water location, list the old location in one row of the table (indicate "R"), and add the new location in another row on the table (indicate "N").

Receiving Water Body	Latitude Decimal Degrees	Longitude Decimal Degrees	New or Removed? (N or R)
	N	W	
	N	W	

VII. State Environmental Policy Act (SEPA)

For all facility changes for which an increase in volume of wastes or change in character of effluent is requested over that previously authorized, this form must include certification by the applicant that the applicable SEPA requirements under chapter 197-11 WAC have been met. See WAC 176-226-200 (3)(f).

Who is the SEPA lead agency on your site?

Has the SEPA lead agency issued a final decision on your checklist? (if there is a comment period, the SEPA decision is final at the close of the comment period) No Yes Exempt*
 (*attach written documentation if Exempt).

If No: The NOI is incomplete. Ecology will hold the application until a final SEPA decision is made or the NOI public comment period ends, whichever is later. **You must notify Ecology once the SEPA lead agency has issued a final decision following any comment period.**

If Yes: Type of SEPA threshold determination issued: Determination of Non-Significance (DNS)
 Mitigated DNS (MDNS) Final Environmental Impact Statement (EIS)
 Determination of Significance (DS) Other:

- Date when SEPA comment period ended or will end:

Notify Ecology if the SEPA determination is appealed. *More SEPA information is available at [Ecology's SEPA webpage](https://ecology.wa.gov/regulations-permits/SEPA-environmental-review)².*

² <https://ecology.wa.gov/regulations-permits/SEPA-environmental-review>

VIII. Public Notice

Please See General Condition G-4.7 of the permit for when public notice is required.

You must publish a public notice at least once a week for two consecutive weeks with at least seven days between publications, in a 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. Mail or fax (360-407-6426) the NOI to Ecology on or before the first public notice date. If you fax the public notice to Ecology, you must also mail a hard copy. Failure to do so may delay the issuance of your permit.

Provide the exact dates (mm/dd/yy) that the first and second public notices will appear in the newspaper(s):

Name of the newspaper publishing the notices:

First notice:

Second notice: (Begins 30-day public comment period.)

For example: First notice: Friday 01/01/16 Second notice: Friday 01/08/16

PUBLIC NOTICE TEMPLATE

Complete this template using project-specific information and submit to a local newspaper with general circulation within the county where the project is located. The language in **bold** is required by WAC 173-226-130(5) and must be included in its entirety. (Please attach on a separate sheet of paper)

(Name of operator/permittee), (address of operator/permittee), **is seeking coverage under the Washington State Department of Ecology's Water Treatment Plant General Permit.**

The proposed facility, Facility Name, is located at (street address, intersection, crossroads, or other descriptive site location) **in** (name of nearest city), **in** (County) . **This discharge is the result of** (list the activities that result the discharge, e.g. water treatment filter backwash).

Any person desiring to present their views to the Department of Ecology regarding this application may do so in writing within thirty days of the last date of publication of this notice. Comments shall be submitted to the Department of Ecology. Any person interested in the department's action on this application may notify the department of their interest within thirty days of the last date of publication of this notice.

Comments can be submitted to:

Department of Ecology

Attn: Water Quality Program, Water Treatment Plant General Permit

(Ecology regional office mailing address)

IX. Site Sketch

When prompted just prior to submitting this request for coverage, attach sketches, aerial photographs, and/or maps of the facility with the following marked:

1. Approximate scale for identifying the dimensions of the site, facility, and improvements.
2. A labeled line drawing of water and wastewater flows throughout the facility's processes.
3. All chemical storage areas, both covered and uncovered.
4. Roads, driveways, and parking lots.
5. All settling and infiltration ponds, including their dimensions and volumes.
6. All sludge, dewatering, temporary storage, and disposal areas, including their dimensions and volumes.
7. All wastewater sampling points, discharge locations, and their corresponding receiving waters.
8. Other nearby surface waterbodies, e.g. lakes, rivers, ponds, streams, inland waters, wetlands, and all other fresh or brackish waters and water courses, plus drainages to those surface waters.

X. 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."

Printed Name	Company	Phone	Email
Signature*		Date	

* Federal regulations require one of the following signs this application:

- A. In the case of corporations, by a responsible corporate officer.
- B. In the case of a partnership, by a general partner of a partnership.
- C. In the case of sole proprietorship, by the proprietor.
- D. In the case of a municipality, state, federal, or other public facility: by either a principal executive officer or ranking elected official

Please sign and return this document to the following address:

Department of Ecology

Attn: Water Quality Program, Water Treatment Plant General Permit

(Ecology regional office mailing address)

If you need this document in a version for the visually impaired 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.

Please return this signed original document to the appropriate regional address below or to the regional contact listed on the [Water Treatment Plant General Permit webpage](#)³. Retain a copy for your records.

Location	Address
Clallam, Clark, Cowlitz, Grays Harbor, Jefferson, Lewis, Mason, Pacific, Pierce, Skamania, Thurston, and Wahkiakum counties	Attn: WQ Water Treatment Plant General Permit Coordinator Washington State Department of Ecology Southwest Regional Office P.O. Box 47775 Olympia, WA 98504-7775
Island, King, Kitsap, San Juan, Skagit, Snohomish, and Whatcom counties	Attn: WQ Water Treatment Plant General Permit Coordinator Washington State Department of Ecology Northwest Regional Office 15700 Dayton Ave. N Shoreline, WA 98133
Adams, Asotin, Columbia, Ferry, Franklin, Garfield, Grant, Lincoln, Pend Oreille, Spokane, Stevens, Walla Walla, and Whitman counties	Attn: WQ Water Treatment Plant General Permit Coordinator Washington State Department of Ecology Eastern Regional Office 4601 North Monroe Street, Suite 202 Spokane, WA 99205-1295
Benton, Chelan, Douglas, Kittitas, Klickitat, Okanogan, and Yakima counties	Attn: WQ Water Treatment Plant General Permit Coordinator Washington State Department of Ecology Central Regional Office 1250 West Alder Street Union Gap, WA 98903-0009

³ <https://ecology.wa.gov/Regulations-Permits/Permits-certifications/Water-treatment-plants>