

ATTACHMENT E – NOTICE OF INTENT
ORDER WQ 2014-0174-DWQ
GENERAL PERMIT NO. CAG990002

**STATEWIDE GENERAL NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
(NPDES) PERMIT FOR DISCHARGES FROM UTILITY VAULTS AND UNDERGROUND
STRUCTURES TO WATERS OF THE UNITED STATES**

I. NOTICE OF INTENT STATUS *(See Instructions)*

MARK ONLY ONE ITEM	1. <input type="checkbox"/> New Discharger	2. <input type="checkbox"/> Existing Discharger
	3. <input type="checkbox"/> Change of Information: WDID # _____	
	4. <input type="checkbox"/> Change of ownership or responsibility: WDID# _____	

II. OWNER/OPERATOR (If additional owners/operators are involved, provide the information in a supplemental page.)

A. Name		Owner/Operator Type (Check One)		
		1. <input type="checkbox"/> City	2. <input type="checkbox"/> County	3. <input type="checkbox"/> State
		4. <input type="checkbox"/> Gov. Combo	5. <input type="checkbox"/> Private	
B. Mailing Address				
C. City		D. County	E. State	F. Zip Code
G. Contact Person		H. Title	I. Phone	
J. Email Address				

Additional Owners _____

III. BILLING ADDRESS (Enter information only if different from II. above)

Send to: <input type="checkbox"/> Owner/Operator <input type="checkbox"/> Other	A. Name	B. Title		
	C. Mailing Address			
D. City	E. County	F. State	G. Zip Code	

IV. RECEIVING WATER INFORMATION

<p>A. Attach a project map(s) that shows (1) the service area within the a specific Regional Water Board boundary and maps of(2) the corresponding major surface water(s) bodies and watersheds to which utility vault or underground structure water may be discharged. Map features must also include ASBS boundaries, MS4 discharge points to the ASBS, and major roadways.</p>
<p>B. Regional Water Quality Control Board(s) where discharge sites are located List the Water Board Regions where discharge of wastewater is proposed, i.e. Region(s) 1, 2, 3, 4, 5, 6, 7, 8, or 9:</p>

V. LAND DISPOSAL/RECLAMATION

The State Water Resources Control Board's water rights authority encourages the disposal of wastewater on land or re-use of wastewater where practical. You must evaluate and rule out this alternative prior to any discharge to surface water under this Order.

Is land disposal/reclamation feasible for all sites? **Yes** **No**

Is land disposal/reclamation applicable to a portion of the total number of sites? **Yes** **No**

If **Yes** to one or both questions, you should contact the Regional Water Board. This Order does not apply if there is no discharge to surface waters. If **No** to either or both questions, explain:

VI. VERIFICATION

Have you contacted the appropriate Regional Water Board or verified in accordance with the appropriate Basin Plan that the proposed discharge will not violate prohibitions or orders of that Regional Water Board? **Yes** **No**

VII. TYPE OF UTILITY VAULT OR UNDERGROUND STRUCTURE (Check All That Apply)

Electric **Natural Gas** **Telecommunications** **Other:** _____

VIII. POLLUTION PREVENTION PLAN CONTACT INFORMATION

Each Discharger is required to provide a copy of their PLAN with their completed NOI. The PLAN requirements are provided in Section VII.C.3 of the Order. In the space below, provide the contact information for the person responsible for the development of the PLAN.

A. Company Name		B. Contact Person	
C. Street Address Where PLAN is Located		D. Title of Contact Person	
E. City	F. County	G. State CA	H. Zip Code
I. Phone		J. Email Address	

IX. DESCRIPTION OF DISCHARGE(S)

Describe the discharge(s) proposed. List any potential pollutants in the discharge. Attach additional sheets if needed.

X. REMINDERS

A. Have you included service territory/watershed map(s) with this submittal? Yes No
Separate maps must be submitted for each Regional Water Board where a proposed discharge will occur.

B. Have you included payment of the filing fee (for first-time enrollees only) with this submittal? Yes No N/A

C. Have you included your PLAN? Yes No

XI. CERTIFICATION

“I certify under penalty of law that this document and all attachments were prepared under my direction and supervision in accordance with a system designed to ensure 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 or imprisonment.”

A. Printed Name: _____

B. Signature: _____ C. Date: _____

D. Title: _____

PLEASE SUBMIT THE NOI, FIRST ANNUAL FEE, PLAN, AND MAP
TO THE FOLLOWING ADDRESS:

**UTILITY VAULTS NOI
NPDES UNIT
DIVISION OF WATER QUALITY
STATE WATER RESOURCES CONTROL BOARD
P.O. BOX 100
SACRAMENTO, CA 95812-0100**

STATE USE ONLY

WDID:	Regional Board Office	Date NOI Received:	Date NOI Processed:
Case Handler’s Initial:	Fee Amount Received: \$	Check #:	

**INSTRUCTIONS FOR COMPLETING A NOTICE OF INTENT
ORDER WQ 2014-0174-DWQ
GENERAL PERMIT NO. CAG990002**

**STATEWIDE GENERAL NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
(NPDES) PERMIT FOR DISCHARGES FROM UTILITY VAULTS AND UNDERGROUND
STRUCTURES TO WATERS OF THE UNITED STATES**

These instructions are intended to help you, the Discharger, complete the NOI form for General Permit No. CAG990002. **Please print clearly or type when completing the NOI form and service territory/watershed map(s). Illegible applications will not be processed.** For any field, if more space is needed, submit a supplementary page or letter with the NOI.

Send the completed and signed form, filing fee, PLAN, supporting documentation, and map(s) to the State Water Resources Control Board (State Water Board). Submit one permit application to cover all discharges within the boundaries of a Regional Water Quality Control Board (Regional Water Board). If the proposed discharges occur in more than one Water Board Region, submit a permit application for each Regional Water Board where a discharge will occur. Only one annual fee is required.

If the requirements in this Order conflict with the requirements of the Homeland Security Act and any other federal law that pertains to security in the United States, the Homeland Security Act and any other federal law that pertains to security in the United States shall take precedence. However, the Discharger must provide justification, including appropriate statutory citations, to the Regional Water Board regarding redacted information within any submittal. Coverage under this General Permit may be unavailable if nonredacted information is insufficient to demonstrate eligibility and compliance.

Section I – Notice of Intent Status

Indicate whether this request is for first time coverage, re-enrollment, or a change of information for a utility already covered under this Order. For a change of information or ownership, please supply the eleven-digit Waste Discharge Identification (WDID) number for the utility.

Section II – Owner/Operator

- A. Name** – Enter the name of the owner/operator. Check the appropriate box for which type of agency best describes the owner/operator. "Gov. Combo." is an abbreviation for "Government Combination" for a joint powers agency created by two or more government agencies. Private businesses should check the "Private" box.
- B. Mailing Address** – Enter the street number and name where correspondence should be sent (P.O. Box is acceptable).
- C. City** – Enter the city that applies to the mailing address given.
- D. County** – Enter the county that applies to the mailing address given.
- E. State** – Enter the state that applies to the mailing address given.

- F. Zip Code** – Enter the zip code that applies to the mailing address given.
- G. Contact Person** – Enter the name (first and last) of the contact person.
- H. Title** – Enter the contact person’s title.
- I. Telephone** – Enter the daytime telephone number of the contact person.
- J. Email Address** – Enter the email address of the contact person.
- Additional Owners** - Please check this box if there is more than one owner/operator and provide the requested information.

Section III – Billing Address

Send To: - Check the appropriate box and enter the information **only** if it is different from section II. above.

Name – Enter the name (first and last) of the person who will be responsible for the billing.

A. Title – Enter the title of the person responsible for the billing.

B. Mailing Address – Enter the street number and name where the billing should be sent (P.O. Box is acceptable).

C. City – Enter the city that applies to the billing address.

D. County – Enter the county that applies to the billing address.

E. State – Enter the state that applies to the billing address.

F. Zip Code – Enter the zip code that applies to the billing address.

Section IV – Receiving Water Information

- A.** Attach a project map(s) that shows (1) the service area within the specific Regional Water Board boundary and maps of (2) the corresponding major surface water(s) bodies and watersheds to which utility vault or underground structure water may be discharged. Map features must also include ASBS boundaries, MS4 discharge points to the ASBS, and major roadways. Submit separate map(s) for each Regional Water Board where a discharge is proposed. If applying for coverage in the Central Valley Region, send two additional copies of the required map and if applying for coverage under Lahontan Region, send one additional copy of the required map.
- B.** List all Regional Water Board numbers where utility vault discharges are proposed. Regional Water Board boundaries are defined in section 13200 of the California Water Code. The boundaries can also be found on our website at http://www.waterboards.ca.gov/waterboards_map.shtml.

C. The numbers with corresponding Regional Water Board names are shown below:

Regional Water Board Number	Regional Water Board Name
1	North Coast
2	San Francisco Bay
3	Central Coast
4	Los Angeles
5	Central Valley (Includes Sacramento, Fresno, and Redding Offices)
6	Lahontan (Includes South Lake Tahoe and Victorville Offices)
7	Colorado River Basin
8	Santa Ana
9	San Diego

Section V – Land Disposal/Reclamation

Check “YES” if land disposal and/or reclamation is/are feasible. If you check “YES,” contact the appropriate Regional Water Board. Your discharge may not be covered under the NPDES Program. If you checked “NO,” explain in the space provided the reason why these alternatives are not feasible.

Section VI – Verification

Indicate by checking “YES” or “NO” whether verification has been done to determine if the discharge(s) are in compliance with prohibitions or orders of the Regional Water Board.

Section VII – Type

Check the appropriate box(s) to indicate the type of utility for which you are seeking coverage.

Section VIII – Pollution Prevention Plan (PLAN) Contact Information

Each Discharger is required to provide a copy of their PLAN with their completed NOI. The PLAN requirements are provided in section VII.C.3 of the Order. The following contact information must be provided for the person responsible for the development of the PLAN.

- A. Company Name** – Enter the legal name of the company applying for coverage.
- B. Contact Person** – List the company contact person responsible for preparation and implementation of the PLAN.
- C. Street Address Where the PLAN is Located** - Indicate the street number and name where you will keep the PLAN for reference and review by personnel.
- D. Title of Contact Person** – Enter the official company title of the contact person.
- E. City** – Enter the city where the PLAN will be kept.
- F. County** – Enter the county where the PLAN will be kept.

- G. State** – Enter the state where the PLAN will be kept.
- H. Zip Code** – Enter the city zip code where the PLAN will be kept.
- I. Telephone** – Enter the daytime telephone number of the contact person.
- J. Email Address** – Enter the email address of the contact person.

Section IX- Description of Discharge

Describe the types of operations that occur and potential pollutants that may be found in the discharge.

Section X – Reminders

- A.** If you have included service territory/watershed map(s) with your NOI submittal, check the “YES” box. If not included, check “NO.” **NOTE: Map(s) of the proposed service territory to be covered must be received before you can obtain coverage under this Order.** Submit separate service territory/watershed map(s) for each Regional Water Board where a discharge is proposed. If applying for coverage in the Central Valley Region, send two additional copies of the required map and if applying for coverage under Lahontan Region, send one additional copy of the required map.

The map showing the service area within a specific Regional Water Board boundary and, showing the corresponding major surface water bodies and watersheds to which vault water may be discharged. Map features must also include service territory boundaries, Regional Water Board boundary, ASBS boundaries, MS4 discharge points to the ASBS, and major roadways.

- B.** Check “YES” if you have included the annual fee with your submittal. Check “NO” if you have not included payment. **NOTE: Payment of this fee must be received before you can obtain coverage under this Order.** Existing dischargers will be invoiced on their existing schedule and do not need to submit a fee with the initial renewal application. You will be invoiced annually and payment is required to continue coverage.
- C.** Check “YES” if you have included the PLAN. Otherwise, check “NO.” **NOTE: You must submit the PLAN to the State Water Board and appropriate Regional Water Board(s) to obtain coverage under this Order.**

Section XI – Certification

All NOIs shall be signed and certified as follows:

For a corporation: By a responsible corporate officer. For the purpose of this section, a responsible corporate officer means: (i) A president, secretary, treasurer, or vice-president of the corporation in charge of a principal business function, or any other person who performs similar policy- or decision-making functions for the corporation, or (ii) the manager of one or more manufacturing, production, or operating facilities, provided the manager is authorized to make management decisions which govern the operation of the regulated

facility including having the explicit or implicit duty of making major capital investment recommendations, and initiating and directing other comprehensive measures to assure long term environmental compliance with environmental laws and regulations; the manager can ensure that the necessary systems are established or actions taken to gather complete and accurate information for permit application requirements; and where authority to sign documents has been assigned or delegated to the manager in accordance with corporate procedures.

For a partnership or sole proprietorship: By a general partner or the proprietor, respectively.

For a municipality, State, federal, or other public agency: By either a principal executive officer or ranking elected official. For purposes of this provision, a principal executive officer of a federal agency includes: (i) the chief executive officer of the agency, or (ii) a senior executive officer having responsibility for the overall operations of a principal geographic unit of the agency (e.g., Regional Administrators of U.S. EPA).

- A. Printed Name** – Print your name legibly. The person responsible (in accordance with the signatory requirements described above and in section V.B of the Standard Provisions (Attachment B)) must fill out this section.
- B. Signature** – Provide a signature of name printed above.
- C. Date** – Indicate the date signed.
- D. Title** – Include the professional title of the person signing the NOI.