# Appendix B

# Proposed Conditional Waivers of Waste Discharge Requirements for Low Threat Discharges in the San Diego Region

Tentative Order No. R9-2014-0041 Appendices A, B, C and D

**Notice of Intent Forms** 

#### CALIFORNIA REGIONAL WATER QUALITY CONTROL BOARD, SAN DIEGO REGION TENTATIVE ORDER NO. R9-2014-0041 (APPENDIX A)



### NOTICE OF INTENT

TO COMPLY WITH THE CONDITIONAL WAIVERS OF WASTE DISCHARGE REQUIRMENTS

I. PROPERTY/FACIL	ITY INFORMATION			
Property/Facility Nam	e:			
Property/Facility Cont	act:			
Property/Facility Addr	ess:			
City:	County:	State:	Zip:	
Telephone:	Fax:	Email:		
Assessor Parcel Num	ber(s): Hyd	drologic Area/Subarea:		
	ITY OWNER INFORMATION			
Property/Facility Own	er Name:			
Property/Facility Own	er Mailing Address:			
City:	County:	State:	Zip:	
Telephone:	Fax:	Email:		
III. PROPERTY/FACIL	ITY OPERATOR INFORMATIC	ON		
Property/Facility Oper	ator Name:			
Mailing Address:				
City:	County:	State:	Zip:	
Telephone:	Fax:	Email:		
	IVER FOR NOTICE OF INTEN	Т		
	oposed for the discharge:			
	charges from on-site graywater			
	charges of recycled water to lar	nd		
	w" threat" discharges to land	d avanaration nanda win	orioo	
	charges of winery waste to lined charges of wastes at compostin	· ·	ienes	
	charges from silvicultural operation	•		
	charges from animal operations			
	charges from aquatic animal pro			
	charges of slurries to land			
	scharges/disposal of solid wast	es to land		
	erially discharged wastes over la			
	scharges of emergency/disaste			
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Supporting Document No.

EOSR Item 10

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NOTICE OF INTENT FOR CONDITONAL WAIVERS

V. DESCRIPTION OF DISCHARGE	
Describe the discharge (i.e., source(s) of discharge	
frequency, etc.). Use additional pages as needed.	Provide a map of the property/facility it
necessary.	
VI. DESCRIPTION OF MANAGEMENT MEASURES	BEST MANAGEMENT PRACTICES
Describe what management measures (MMs) and	d best management practices (BMPs) w
be implemented to minimize or eliminate the discl	harge of pollutants to waters of the State
Use additional pages as needed. Provide a map	of the property/facility showing locations
MMs/BMPs if necessary.	
VII. ADDITIONAL INFORMATION	
Please provide additional information, as needed	or required about the discharge and/or
how the discharger intends to comply with the wa	
	iver conditions of the waiver. Use
additional pages as needed.	
"I certify under penalty of law that I have persona	
information submitted in this document and all at	· · · ·
those individuals immediately responsible for obt	0
information is true, accurate, and complete. I am	
for submitting false information, including the pos	ssibility of fine and imprisonment."
Signature (Owner or Authorized Representative)	Date
Signature (Owner or Authorized Representative)	Dale
Print Name	Title
Telephone Number	Email

# CALIFORNIA REGIONAL WATER QUALITY CONTROL BOARD, SAN DIEGO REGION TENTATIVE ORDER NO. R9-2014-0041 (APPENDIX B)

# WAIVER 5: COMPOST FACILITY CERTIFICATION



# I. COMPOST GENERATOR INFORMATION

Generator Name:			
Generator Contact an	d Title:		
Generator Mailing Add	dress:		
City:	County:	State:	Zip:
Telephone:	Fax:	Email:	
II. WASTE/FEEDSTO			
used in the product	<ul> <li>Consisting of pre-consumer pl ion of farm, agricultural, horticul cts, including orchard and viney</li> </ul>	tural, silvicultural, floricu	Iltural, vermicultural,
cuttings, trimmings	isisting of, or containing, materi of grass, weeds, shrubbery, bu untreated wood waste.	•	
	ng of manures derived from cat ny bedding materials, spilled fe		
Paper Waste – Con	sisting of nonhazardous paper	and paper by-products.	
of food for animal o derived solely from food wastes may be	aste – Consisting of food waste r human consumption, but no lo plants and is separated from th e processed or cooked but mus o salts, preservatives, fats or oil	onger intended for such o e municipal solid waste t be otherwise remain in	consumption, that is stream. Vegetative its essentially
	e Waste – Consisting of only so nbination of agricultural wastes ste.		
III. ADDITIVE INFORM	IATION		
plant substance, or		nendment. age Quantity:	
consumption – but municipal waste str		onsumption – that is sep y waste, etc.). <b>age Quantity:</b>	parated from the
other additives prop	rovide a complete description (i posed to be composted at the fa		e quantity) of all
IV. AMENDMENT INF	ORMATION		
	scription (including annual avera facility and added finished com		amendments

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#### COMPOST FACILITY CERTIFICATION

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No.
Document
Supporting [

# V. CONDITIONALLY EXEMPT OPERATIONS

Agricultural Composting Operations – Composting conducted in agricultural settings where: 1)wastes consisting of materials generated on-site by the production and processing of farm, agricultural, horticultural, silvicultural, floricultural, vermicultural, or viticultural products, including manures, orchard and vineyard prunings, and crop residues; and 2) the resulting compost is returned in a similar amount to that same agricultural site, or an agricultural site owned or leased by the owner, parent, or subsidiary.
□ Chipping and Grinding Facilities/Operations – Refer to those operations that do not produce compost, by mechanically reduce the size, or otherwise engages in the handling of "green waste", and for which each load of "green waste" is removed from the site within 48-hours from receipt, unless the Discharger has received written permission from the Local Enforcement Agency allowing the "green waste" to remain onsite for up to 7 days.
<ul> <li>Existing Permitted Facilities/Operations – Composting conducted at facilities (e.g., Wastewater Treatment Plants [WWTPs], landfills, Concentrated Animal Feeding Operations [CAFOs], etc.) with existing waste discharge requirements.</li> </ul>
Lot Clearing Operations – Referring to those activities conducted for fire protection or the construction, operations, or maintenance activities conducted by a public utilities agency.
Non-commercial Operations – Referring to "backyard" or private residential composting.
Within-Vessel and Fully Enclosed Composting Operations (e.g., anaerobic digestate)
VI. STORM WATER PERMIT
Is there an Individual Storm Water Permit for the facility? Yes No
Is the facility covered under a Regional Municipal Separate Storm Sewer System (MS4) Permit?
VII.OTHER PERMITS
Has another agency issued permits or other entitlements (e.g., solid waste facility permit,
notification permit, conditional use permit, building permit, grading permit) for the facility
Identify each permit/entitlement, issuing agency, and date of issuance.
VIII. CALIFORNIA ENVIRONMENTAL QUALITY ACT (CEQA)
Has a project specific CEQA determination been made by an agency? Yes No
Name of agency:
Determination: EIR Negative Declaration Date of determinations:
<i>"I hereby certify that the information provided in this Compost Facility Certification is a complete</i>
and accurate representation of the subject waste, and that the waste is not hazardous waste as
defined by California Code of Regulations Title 22 and by the U.S. Environmental Protection
Agency (Code of Federal Regulations Title 40), and that all Composting Facilities Waiver

Signature (Owner or Authorized Representative)

Date		

Print Name

conditions have been met."

Title

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# CALIFORNIA REGIONAL WATER QUALITY CONTROL BOARD, SAN DIEGO REGION TENTATIVE ORDER NO. R9-2014-0041 (APPENDIX C)

# WAIVER 10: INERT WASTE CERTIFICATION [SECTION A - ENROLLMENT]

I. INERT WASTE SOIL Generator Name:	GENERATOR INFORMATIC	DN	
Generator Contact and	Title		
Generator Mailing Addr			
City:	County:	State:	Zip:
Telephone:	Fax:	Email:	•
•	EXPORT SITE INFORMATIO	ON	
Export Site Property Ov	vner Name:		
Export Site Address:			
City:	County:	State:	Zip:
Local Oversight Progra	m Case No.:		
San Diego Water Board	File No.:		
	WASTE SOIL INFORMATION	(Use additional pages	as needed.)
Date(s) Inert Waste Soi			
Quantities of Inert Wast (in cubic yards for each			
	) if the inert waste soil was ten lease provide a copy of the Te		
water wells, excavation	(s), stockpile(s), samples colle (depths of excavation(s), exte	cted for characterizatio	n. Include
Describe what managem mplemented at the expo	EXPORT SITE BEST MANAG nent measures (MMs) and bes ort site to minimize or eliminate ges as needed. Provide a ma ary.	t management practice the discharge of pollut	ants to waters of the
	B-6		

Supporting Document No. 3

May 14, 2014 Item 10 Supporting Document No. 2

INERT WASTE CERTIFICATION

Name of Certified Analytical Laboratory: Certified Analytical Laboratory Contact:					
Certified Analytical Laboratory Address:					
City:	County:	S	tate:	Zip:	
Telephone:	Fax:		mail:	۲р.	
· ·					
Number of samples collected for characterization:					
	$(\boxtimes)$ to confirm that no sate of the concentrations of the concentrations of the concentration of the concentrati				
Title 22 Metals Cor of Concer		A Approved /tical Method	proved 90% UCL Concentration		
<i>analytical report.</i> * If molybdenum, silve	if there are additional co er, and/or zinc exceed th	e Tier 2 SSLs, then	the waiver do		
VI. ENROLLMENT F Mark the box (区) nex with data provided in Tier 1 (Comp	scharge (ROWD) must b OR REUSE OF TIER 1 at to the tier that the inert section VI. lete section X) of Tier 1 inert waste soil	or TIER 2 INERT W waste soil has been Tier 2 (C	ASTE SOIL n characterize	ter Board. <i>d, as supported</i> ons VII - X)	
VI. ENROLLMENT F Mark the box (座) nex with data provided in ☐ Tier 1 (Comp Management	OR REUSE OF TIER 1 at to the tier that the inert section VI. lete section X) of Tier 1 inert waste soil	or TIER 2 INERT W waste soil has been Tier 2 (C s D Managen	ASTE SOIL n characterize	ter Board. <i>d, as supported</i> ons VII - X)	
VI. ENROLLMENT F Mark the box (🗷) nex with data provided in Tier 1 (Comp Management	OR REUSE OF TIER 1 at to the tier that the inert section VI. lete section X) of Tier 1 inert waste soil	or TIER 2 INERT W waste soil has been Tier 2 (C s D Managen	ASTE SOIL n characterize	ter Board. <i>d, as supported</i> ons VII - X)	
VI. ENROLLMENT F Mark the box (座) nex with data provided in Tier 1 (Comp Management VII.TIER 2 INERT WA Import Site Property Import Site Address	<b>OR REUSE OF TIER 1</b> <i>it to the tier that the inert</i> <i>section VI.</i> lete section X) of Tier 1 inert waste soil <b>ASTE SOIL IMPORT SI</b> Owner Name:	or TIER 2 INERT W waste soil has been Tier 2 (C s D Managen	ASTE SOIL In characterize Complete section ment of Tier 2	ter Board. <i>d, as supported</i> ons VII - X) inert waste soil	
VI. ENROLLMENT F Mark the box (図) new with data provided in Tier 1 (Comp Management VII.TIER 2 INERT WA Import Site Property Import Site Address City:	TOR REUSE OF TIER 1 at to the tier that the inerti- section VI. lete section X) of Tier 1 inert waste soil ASTE SOIL IMPORT SI Owner Name: County:	or TIER 2 INERT W waste soil has been Tier 2 (C s D Managen	ASTE SOIL In characterize Complete section ment of Tier 2 State:	ter Board. <i>d, as supported</i> ons VII - X)	
VI. ENROLLMENT F Mark the box (🗵) nex with data provided in Tier 1 (Comp Management VII.TIER 2 INERT WA Import Site Property Import Site Address City: Telephone:	OR REUSE OF TIER 1 at to the tier that the inert section VI. of Tier 1 inert waste soil ASTE SOIL IMPORT SI Owner Name: County: Fax:	or TIER 2 INERT W waste soil has been Tier 2 (C Managen TE INFORMATION	ASTE SOIL In characterize Complete sectionent of Tier 2 State: Email:	ter Board. <i>d, as supported</i> ons VII - X) inert waste soil	
VI. ENROLLMENT F Mark the box (🗵) new with data provided in Tier 1 (Comp Management VII.TIER 2 INERT WA Import Site Property Import Site Address City: Telephone: Assessor Parcel Num Provide a map of the	OR REUSE OF TIER 1 at to the tier that the inert section VI. of Tier 1 inert waste soil ASTE SOIL IMPORT SI Owner Name: County: Fax:	Tier 2 (C waste soil has been Tier 2 (C Manager TE INFORMATION Hydrologic Are be location of the near	ASTE SOIL n characterize complete secti ment of Tier 2 State: Email: ea/Subarea:	ter Board. <i>d, as supported</i> ons VII - X) inert waste soil Zip:	
VI. ENROLLMENT F Mark the box (🗷) new with data provided in Tier 1 (Comp Management VII.TIER 2 INERT WA Import Site Property Import Site Address City: Telephone: Assessor Parcel Num Provide a map of the	OR REUSE OF TIER 1 at to the tier that the inert section VI. lete section X) of Tier 1 inert waste soil ASTE SOIL IMPORT SI Owner Name: County: Fax: mber(s): e import site showing the	Tier 2 (C waste soil has been Tier 2 (C Manager TE INFORMATION Hydrologic Are be location of the near	ASTE SOIL n characterize complete secti ment of Tier 2 State: Email: ea/Subarea:	ter Board. <i>d, as supported</i> ons VII - X) inert waste soil Zip:	
VI. ENROLLMENT F Mark the box (🗵) new with data provided in Tier 1 (Comp Management VII.TIER 2 INERT WA Import Site Property Import Site Address City: Telephone: Assessor Parcel Num Provide a map of the	OR REUSE OF TIER 1 at to the tier that the inert section VI. lete section X) of Tier 1 inert waste soil ASTE SOIL IMPORT SI Owner Name: County: Fax: mber(s): e import site showing the	Tier 2 (C waste soil has been Tier 2 (C Manager TE INFORMATION Hydrologic Are be location of the near	ASTE SOIL n characterize complete secti ment of Tier 2 State: Email: ea/Subarea:	ter Board. <i>d, as supported</i> ons VII - X) inert waste soil: Zip:	
VI. ENROLLMENT F Mark the box (🗵) new with data provided in Tier 1 (Comp Management VII.TIER 2 INERT WA Import Site Property Import Site Address City: Telephone: Assessor Parcel Num Provide a map of the	OR REUSE OF TIER 1 at to the tier that the inert section VI. lete section X) of Tier 1 inert waste soil ASTE SOIL IMPORT SI Owner Name: County: Fax: mber(s): e import site showing the	Tier 2 (C waste soil has been Tier 2 (C Manager TE INFORMATION Hydrologic Are be location of the near	ASTE SOIL n characterize complete secti ment of Tier 2 State: Email: ea/Subarea:	ter Board. d, as supp ons VII - X inert wast Zip:	

INERT WASTE CERTIFIC	ATION
VIII. DESCRIPTION OF IMPORT SITE BEST MANAGEMENT PRACTICES Describe what management measures (MMs) and best management practices (BMPs) were implemented at the import site to minimize or eliminate the discharge of pollutants to waters of State. Use additional pages as needed. Provide a map of the property/facility showing location of MMs/BMPs if necessary.	
IX. PROPERTY OWNER ACKNOWLEDGMENT	
Mark all the boxes ( $\boxtimes$ ) to acknowledge that the applicable Tier 2 inert waste soil waiver conditions have been or will be met:	
Import site is designated for commercial or industrial land use.	
Inert waste soil placed at least 5 feet above highest historically known or anticipated leve groundwater.	of
Soil that separates inert waste soil from groundwater has clay content greater than 5 percenter and/or in situ permeability of less than 10 <sup>-5</sup> cm/sec.	ent
Inert waste soil placed at least 100 feet from the nearest surface water body.	
Inert waste soil is protected against 100-year peak storm flows as defined by the county f control agency.	lood
Inert waste soil covered by either: 1) engineered materials (e.g. used as road base, fill beneath buildings, bridge abutments), or 2) not less than 2 feet of non-contaminated, clear fill. The cover has a permeability of no more than 10 <sup>-5</sup> cm/sec.	n
Placement of a cover on the inert waste soils completed within 30 days of discharging the final load of inert waste soils at the import site.	•
"I acknowledge the receipt or planned receipt of the waste soil described in sections V and V that the soil will be managed pursuant to the restrictions set forth in Solid Waste Waiver"	l and
Signature (Owner or Authorized Representative) Date	
Print Name Title	

Supporting Document No. 3

#### INERT WASTE CERTIFICATION

# X. GENERATOR AND CONSULTANT CERTIFICATION

"I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment."

Print Name (Generator)	Print Name (Consultant)
Signature (Generator)	Signature (Consultant)
Title (Generator)	Title and Professional Registration No. (Consultant)

Date

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Supporting Document No.

Date

### CALIFORNIA REGIONAL WATER QUALITY CONTROL BOARD, SAN DIEGO REGION TENTATIVE ORDER NO. R9-2014-0041 (APPENDIX C)

# WAIVER 10: INERT WASTE CERTIFICATION [SECTION B – NOTICE OF TERMINATION]



	I. FINAL WASTE D	DISPOSAL INFORMATION		CALIFORNIA
No. 3	Final Disposition of Waste:	Off-site/Landfill Disposal Off-site Reuse/Disposal	On-site Reus Other:	•
ient N	Property Owner/Disch	arger Name:		
m	Property Owner/Disch	arger Contact and Title:		
Å	Property Owner/Disch	arger Mailing Address:		
Supporting Document No	City:	County:	State:	Zip:
	Telephone:	Fax:	Email:	
Sup	Assessor Parcel Num	ber(s): Hydrolog	ic Area/Subarea:	
	Date(s) Waste Dispos	ed:		
	Quantity of Waste Dis	posed (in cubic yards for each dispos	sal date):	
	Disposal Location(s) (	for each disposal date):		
	II. FINAL DISPOSAL		ad and am familiar wit	h the information
		of law that I have personally examine nent and all attachments and that, ba		
		le for obtaining the information. I helie		

immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment."

Signature (Owner or Authorized Representative)

Date

Print Name

Title

# CALIFORNIA REGIONAL WATER QUALITY CONTROL BOARD, SAN DIEGO REGION TENTATIVE ORDER NO. R9-2014-0041 (APPENDIX D) Waiver: 10 TEMPORARY WASTE PILE CERTIFICATION [SECTION A – GENERATOR INFROMATION]

I. TEMF	PORARY WAS	<b>FE PILE G</b>	ENERATOR IN	FORMAT			CALIFORNIA
	or Name:						
Generat	or Contact and	Title:					
Generat	or Mailing Addr	ess:					
City:		(	County:		State:	Z	ip:
Telepho	ne:	I	ax:		Email:	Email:	
-	TE INFORMAT	-	).:				
	go Water Board						
			ine 🗌 Die	col [	Other Petrole		
Waste T				Sei [		eun nyu	OCAIDONS
(спеск а	all that apply)	Other	Impacted Dred	ged Spoil	s Other:		
Contam	inant Concentra	ations (Use	e additional page	es as nee	ded):		
Mean	Mean+80%CL	Mean	Mean+80%CL	Mean	Mean+80%CL	Mean	Mean+80%CL
Mean	Mean+80%CL	Mean	Mean+80%CL	Mean	Mean+80%CL	Mean	Mean+80%CL
Mean		Mean	Weart+00%CL	wean		wean	Mean+60%CL
Mean	Mean+80%CL	Mean	Mean+80%CL	Mean	Mean+80%CL	Mean	Mean+80%CL
Waste F	l Pile Quantity (yd	<sup>3</sup> ).					
		,	, al.				
Descript	tion of Containn	nent Metho	00:				
		re pii e g	ENERATOR IN	FORMAT			
	perty Owner Na						
Site Add	lress:						

Supporting Document No. 3

TEMPORARY WASTE PILE CERTIFICATION – SECTION A (continued)

# IV. PROPERTY OWNER ACKNOWLEDGMENT

"I hereby acknowledge receipt of the waste soil described in section II of this Temporary Waste Pile Certification, and that I have reviewed any associated reports. By signing this form I acknowledge that the Generator of this waste has certified that all Solid Waste Waiver conditions applicable to the temporary waste piles have been met."

Signature (Owner or Authorized Representative)

Date

Print Name

Title

# **V. GENERATOR CERTIFICATION**

"I hereby certify that the information provided regarding soil characterization is a complete and accurate representation of the subject soil, and that the soil is not hazardous waste as defined by California Code of Regulations Title 22 and by the U.S. Environmental Protection Agency (Code of Federal Regulations Title 40), and that all Solid Waste Waiver conditions applicable to the temporary waste piles have been met."

**Generator Signature** 

Date

**Print Name** 

Title

CALIFORNIA REGIONAL WATER QUALITY CONTROL BOARD, SAN DIEGO REGION TENTATIVE ORDER NO. R9-2014-0041					
	(APPENDIX D)	0041	RESOURCES COL		
	Waiver: 10				
TEMPORARY WASTE PILE CERTIFICATION [SECTION B – FINAL DISPOSAL INFORMATION]					
_	GENERATOR INFORMATION	-	· CALIFORNIA		
Final Disposition of Waste:	Off-site/Landfill Disposal	On-site Reu	use/Disposal		
	Off-site Reuse/Disposal	Other:			
Property Owner/Discharger Na	me:				
Property Owner/Discharger Contact and Title:					
Property Owner/Discharger Ma	iling Address:				
City:	County:	State:	Zip:		
Telephone:	Fax:	Email:			
Assessor Parcel Number(s): Hydrologic Area/Subarea:					
Date(s) Waste Disposed:					
Quantity of Waste Disposed: (in cubic yards for each disposal date)					
(,	,				
Disposal Location(s): (for each disposal date)					
VI. FINAL DISPOSAL CERTIFI					
	at I have personally examined an all attachments and that, based o				
	bining the information. I believe th				

immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment."

Signature (	Owner or	Authorized	Representative)
eignataile (	0	/ (0111011200	1.0001.0001.0001

Date

Print Name

Title

Supporting Document No. 3