

<p style="text-align: center;">DEQ USE ONLY</p> <p>File #: _____</p> <p>Application #: _____</p> <p>DOC Conf.: _____</p> <p>Notes: _____</p>	<p>700 NE Multnomah Street, Suite 600 Portland, Oregon 97232</p> <p>Application National Pollutant Discharge Elimination System General Permit 1500A (see pages 7-8 for instructions)</p>	<p style="text-align: center;">DEQ USE ONLY</p> <p>Date Received: _____</p> <p>Total Amt. Received: _____</p> <p>Add. Amt. Due (if any): _____</p> <p>Check #: _____</p> <p>Deposit #: _____</p> <p>Receipt #: _____</p>
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This permit is not for a discharge to a waterbody in an Outstanding Resource Water. Information is available on DEQ's Outstanding Resource Waters of Oregon web page at <https://www.oregon.gov/deq/wq/Pages/WQ-Standards-ORWO.aspx>

A. Discharge Information

Provide the following information on the location and type of discharge to determine eligibility for permit coverage. Any person not eligible for permit coverage under this general permit may seek authorization to discharge under an individual permit.

1. Location of discharge to waterbody: Latitude _____ Longitude: _____
Indicate Latitude and Longitude in decimal degrees.

2. Yes No (Check One) Direct Discharge to a waterbody?

3. Yes No (Check One) Discharge to waterbody through a storm sewer?

3.a. If yes, check the box to confirm written approval of the storm sewer authority is attached

4. Provide stream name:	5. River mile:
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6. Basin Name:

7. Subbasin Name:

8. Yes No Is the discharge located in Clackamas River Subbasin, McKenzie River Subbasin above Hayden Bridge (river mile 15) or North Santiam River Subbasins?

8.a. Yes No If yes to question 8, permit coverage is limited to discharges from underground storage tank cleanup. Check yes to confirm that this discharge is for an underground storage tank cleanup and provide the LUST number below

8.b. LUST number:

9. 1500A general permit coverage is not provided for a discharge that contains any of the pollutants listed below. Submit sampling results of treated effluent in the columns below. Sampling shall be conducted according to sufficiently sensitive test procedures (i.e., methods) approved under 40 CFR 136 for the analysis of pollutants or pollutant parameters listed below. Provide the results of the analysis for pollutants listed below. Indicate whether present or absent based on the analytical results. Any person not eligible for permit coverage under this general permit may seek authorization to discharge under an individual permit.

Application for 1500A NPDES General Permit

Oregon Department of Environmental Quality

Legal Name of Applicant: _____

Pollutant (Chemical Abstract Number)	Number of Samples	Maximum Result Value µg/L	Reporting Limit µg/L	Detection Limit µg/L	Absent	
					Yes	No
Cadmium, Total (7440-43-9)						
Chromium, Total (7440-47-3)						
Carbon tetrachloride (56-23-5)						
1,1-dichloroethylene (75-35-4)						
Methylene chloride (75-09-2)						
Tetrachloroethylene (127-18-4)						
1,1,1-trichloroethane (71-55-6)						
Trichloroethylene (79-01-6)						
Vinyl chloride (75-01-4)						
PCB-1242 (53469-21-9)						
PCB-1254 (11097-69-1)						
PCB-1221 (11104-28-2)						
PCB-1232 (11141-16-5)						
PCB-1248 (12672-29-6)						
PCB-1260 (11096-82-5)						
PCB-1016 (12674-11-2)						

10. Please submit sampling results of treated effluent. Sampling shall be conducted according to sufficiently sensitive test procedures (i.e., methods) approved under 40 CFR 136 for the analysis of pollutants or pollutant parameters listed below, unless otherwise indicated. Provide the results of the analysis for pollutants listed below.

Use DEQ's interactive mapping tool or assessment database at

<https://www.oregon.gov/deq/wq/Pages/epaApprovedIR.aspx> to identify if the discharge location named in Section A4 and 5 above is listed as water quality limited on DEQ's 303(d) list in Categories 4 through 5 for any pollutant listed below.

Application for 1500A NPDES General Permit

Oregon Department of Environmental Quality

Legal Name of Applicant: _____

Pollutant (Chemical Abstract Number)	Number of Samples	Maximum Result Value µg/L	Reporting Limit µg/L	Detection Limit µg/L	303(d) List Categories 4 through 5	
					Yes	No
Total petroleum hydrocarbons (gasoline) – TPH-Gx						
Total petroleum hydrocarbons (diesel and heavier) – TPH-Dx						
Total of Benzene, Ethylbenzene, Toluene and Xylenes (BETX)						
Benzene (71-43-2)						
Ethylbenzene (100-41-4)						
Toluene (108-88-3)						
Xylenes (1330-20-7)						
pH (SU)						
Acenaphthene (83-32-9)						
Anthracene (120-12-7)						
Benzo(a)anthracene (56-55-3)						
Benzo(a)pyrene (50-32-8)						
Benzo(b)fluoranthene (205-99-2)						
Benzo(k)fluoranthene (207-08-9)						
Chrysene (218-01-9)						
Dibenzo(a,h)anthracene (53-70-3)						
Fluoranthene (206-44-0)						
Fluorene (86-73-7)						
Indeno (1,2,3-cd) pyrene (193-39-5)						
Naphthalene (91-20-3)						
Pyrene (129-00-0)						
Methyl t-butyl ether (MTBE) (1634044)						
EDC (1,2-dichloroethane) (107062)						

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Pollutant (Chemical Abstract Number)	Number of Samples	Maximum Result Value µg/L	Reporting Limit µg/L	Detection Limit µg/L	303(d) List Categories 4 through 5	
					Yes	No
Lead (7439921)						
Temperature						

B. Reference Information

1. Legal Name: _____

2. Common Name (if different than legal name): _____

3. Legal Status of Operator: Federal State Public Private Other, specify: _____

4. Facility SIC code: _____ or NAICS code: _____

5. Registration information, if applicable: DEQ File No: _____
Assigned Permit Number: _____

6. New Applicant Or updating information (Provide Assigned Permit Number _____)

7. LUST or ESCI number: _____

C. Contact Information

1. Responsible Official: _____ Telephone #: _____

Mailing Address: _____ City, State, Zip Code: _____

Email Address: _____

2. Facility Contact: _____ Telephone #: _____

Facility Mailing Address: _____ City, State, Zip Code: _____

Email Address: _____

3. Invoice to: _____ Telephone #: _____

Billing Address: _____ City, State, Zip Code: _____

Email Address: _____

Application for 1500A NPDES General Permit

Oregon Department of Environmental Quality

Legal Name of Applicant: _____

D. Land Use Compatibility Information

Document Attached. Attached a complete Land Use Compatibility Statement (LUCS) signed by the local land use authority. The application will not be processed without evidence that the proposal is approved by the local land use authority and meets statewide planning goals.

E. Facility Location Information

1. Physical Street Address (site location):

2. City	3. County
4. State	5. Zip Code

6. Document attached. Attach a map of the location. The map must identify this site or well-defined units for this site where petroleum hydrocarbon contamination is being addressed. (e.g. trenching or other constructed conveyances to channel contaminates). Include discharge location and indicate storm sewer system entry and discharge points on the map.

F. Operating Information

1. Discharge Flow Rate in Gallons Per Day (gpd) and Cubic Feet Per Second (cfs):
10 a. Maximum Discharge Flow Rate (gpd) and (cfs)
10.b. Minimum Discharge Flow Rate (gpd) and (cfs)

2. Stream Flow Rate (cfs) :
2.a. Minimum Discharge Flow Rate (cfs)
2.b. Provide source of streamflow data:

3. Use the maximum discharge flow rate and minimum stream flow rate to calculate dilution. $(CFS \text{ of discharge flow} + CFS \text{ of Stream Flow} \times 0.5) / (CFS \text{ of Effluent Flow})$. Provide the results of the dilution ratio calculation:

4. Use the minimum discharge flow rate and minimum stream flow rate to calculate dilution. $(CFS \text{ of discharge flow} + CFS \text{ of Stream Flow} \times 0.5) / (CFS \text{ of Effluent Flow})$. Provide the results of the dilution ratio calculation:

5. Source of petroleum hydrocarbon contamination (check one)

leaking petroleum underground storage tank cleanup (note: Section A.8. for LUST only):

Used oil (“waste oil”) tank cleanups

ground and/or surface water from treatment systems,

ground water resulting from pumping and/or monitoring aquifer(s) associated with groundwater treatment,

dewatering as a result of excavation

Other treated petroleum related discharges:

6. Describe major treatment types (check all that apply)

Aeration	Oil skimmer	Mechanical filtration
Air stripping	Oil water separator	Activated carbon filtration
Sparging	Granulated Activated Carbon filtration	

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Oregon Department of Environmental Quality

Legal Name of Applicant: _____

Other describe

7. Document attached. Please provide a schematic of water flow through the treatment units:

G. Fee

- Fee payable to the Department of Environmental Quality is enclosed. Please see Table 70G <https://www.oregon.gov/deq/Rulemaking%20Docs/340-045-0075WQFeeTables.pdf> for 1500A application fees.
- No fee is due with the application if the applicant provided a DEQ file number and Assigned permit No. in Section A above.

H. Signature of Legally Authorized Representative

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 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. In addition, I agree to pay the annual compliance determination fee invoiced annually by DEQ and all other fees required by Oregon Administrative Rules, Chapter 340, Division 045.

Name of Legally Authorized Representative (Type or Print)

Title

Signature of Legally Authorized Representative

Date

APPLICATION FOR 1500A NPDES GENERAL PERMIT
Oregon Department of Environmental Quality

Legal Name of Applicant: _____

Please answer all questions and submit the required application fees.
An incomplete application or application with incorrect fees will not be processed.
If the information requested is not applicable, please indicate as such.

A. Discharge Information

1. Enter the latitude and longitude of the location of discharge to the waterbody in decimal degrees to the fourth decimal place.
2. - 7. Provide information requested on the location of discharge. Attach authorization for a discharge through a storm sewer.
8. Indicate if the discharge is located in Clackamas River Subbasin, McKenzie River Subbasin above Hayden Bridge (river mile 15) or North Santiam River Subbasins and provide information on the underground storage tank cleanup.
9. Prior to authorization, the applicant must submit analytical results for pollutants listed to show that these pollutants are not present in the treated effluent. General permit coverage is not provided for a discharge that contains the pollutants listed.
10. Prior to authorization, the applicant must submit analytical results for pollutants listed and identify if, at the location of the discharge, the waterbody is impaired for that pollutant on DEQ's 303(d) list in Categories 4 through 5.

B. Reference Information

1. Enter the legal name of the applicant. This will be the legal Oregon business name (i.e., Acme Products, Inc.) or the legal representative of the company if it operates under an assumed business name (i.e., John Smith, dba Acme Products), or district name. The permit will be issued to this entity
2. Enter the common name of the facility or operation if different from the legal name of the applicant.
3. Provide the legal status of the applicant. Indicate "public" for a facility solely owned by local government. Other can be used to designate
4. Enter the Standard Industrial Classification (SIC) four-digit code or North American Industry Classification System five or six-digit code (NAICS) for the facility. These codes are used to describe the primary activity at the facility and may be found on fire marshal reports, insurance papers, or tax forms. The NAICS codes replaced the SIC system in 1997, however, it is usually easy to convert between the two systems so either code is acceptable. SIC or NAICS information is also available from the U.S. Census Bureau at 1-888-756-2427 or at <http://www.naics.com/search.htm>.
5. Provide a DEQ assigned Permit Number if registered to this permit.
6. Check if this is a new application for the 1500A permit or if updating information provided in the 1500A application.
7. Provide LUST or ESCI number if applicable.

C. Contact Information

1. Enter the name, telephone number, mailing address and email address of the Responsible Official. The Responsible Official is the person that receives official correspondence from DEQ, such as renewal notices or notices of noncompliance, and may be contacted if there are questions about this application.
2. Enter the name, telephone number, mailing address and email address of the Facility Contact if different from the Responsible Official. The Facility Contact is the person located at the facility that has specific knowledge of the facility or operation under permit (e.g., operations manager), and may be contacted if there are specific questions about this application.
3. Enter invoicing information for billing purposes if different from the Responsible Official (e.g., "Invoice To: Business Office - Accounts Payable").

D. Land Use Compatibility Information

A completed Land Use Compatibility Statement (LUCS) signed by the local land use authority must be submitted with this application. The application will not be processed without evidence that the proposal is approved by the local land use authority and meets statewide planning goals.

APPLICATION FOR 1500A NPDES GENERAL PERMIT
Oregon Department of Environmental Quality

Legal Name of Applicant: _____

Please answer all questions and submit the required application fees.
An incomplete application or application with incorrect fees will not be processed.
 If the information requested is not applicable, please indicate as such.

E. Facility Location Information

1. - 5. Enter the physical location of the facility (street address, city, county, state, zip code)
6. Provide a map that shows the location of the project where petroleum hydrocarbon contamination is being addressed. Include waterbodies. Indicate discharge location and storm sewer system entry and discharge points on the map, if applicable.

F. Operating Information

1. - 4. Provide discharge flow and stream flow information and calculate dilution ratio.
5. Provide information on the source of petroleum hydrocarbon contamination
6. Provide information on the type of treatment.
7. Attach a schematic of the operation.

G. Fee

Please see Table 70G <https://www.oregon.gov/deq/Rulemaking%20Docs/340-045-0075WQFeeTables.pdf> for application fees. Or call the appropriate regional office below for fee information and to determine where to send this application. Send this form and fee to the regional office. New permit application must include both the new permit application fee and first year's annual fee. DEQ will not require a new registration fee when transferring registration to this general permit from the 1500A general permit. Make your check payable to the Department of Environmental Quality.

H. Signature of Legally Authorized Representative

The signature of a legally authorized representative must be provided in order to process this application. See the table below for more information.

Definition of Legally Authorized Representative:

Please also provide the information requested in brackets []

- ◆ **Corporation** — president, secretary, treasurer, vice-president, or any person who performs principal business functions; or a manager of one or more facilities that is authorized in accordance to corporate procedure to sign such documents
- ◆ **Partnership** — General partner *[list of general partners, their addresses and telephone numbers]*
- ◆ **Sole Proprietorship** — Owner(s) *[each owner must sign the application]*
- ◆ **City, County, State, Federal, or other Public Facility** — Principal executive officer or ranking elected official
- ◆ **Limited Liability Company** — Member *[articles of organization]*
- ◆ **Trusts** — Acting trustee *[list of trustees, their addresses and telephone numbers]*

Note: Local Service Districts follow signature authority under local government.

SUBMIT THIS APPLICATION TO THE APPROPRIATE REGIONAL OFFICE:

DEQ Northwest Region 700 NE Multnomah Street, Suite 600 Portland, OR 97232 (503) 229-5696 or 1-800-452-4011		DEQ Western Region 4026 Fairview Industrial Drive, SE Salem, OR 97302 (503) 378-8240 or 1-800-349-7677		DEQ Eastern Region 800 SE Emigrant, Suite 330 Pendleton, OR 97801 (541) 276-4063 or 1-800-304-3513	
Clackamas	Benton	Lane	Baker	Hood River	Sherman
Clatsop	Coos	Lincoln	Crook	Jefferson	Umatilla
Columbia	Curry	Linn	Deschutes	Klamath	Union
Multnomah	Douglas	Marion	Gilliam	Lake	Wallowa
Tillamook	Jackson	Polk	Grant	Malheur	Wasco
Washington	Josephine	Yamhill	Harney	Morrow	Wheeler