# DEPARTMENT OF ENVIRONMENT AND NATURAL RESOURCES



# NOTICE OF INTENT & CERTIFICATE OF APPLICANT FORM TO RECEIVE COVERAGE UNDER THE GENERAL PERMIT FOR TEMPORARY DISCHARGES AND A TEMPORARY WATER USE PERMIT

This form is provided by the Secretary of the South Dakota Department of Environment and Natural Resources in accordance with §74:52:02:09 of the Administrative Rules of South Dakota. No South Dakota Surface Water Discharge Permit will be issued except under completion and submittal of this form to the following addresses:

original to: South Dakota Department of Environment and Natural Resources

Surface Water Quality Program

Joe Foss Building 523 East Capitol Avenue

Pierre, South Dakota 57501-3181

Telephone: (605) 773-3351 FAX: (605) 773-4068

		tact Information					
	☐ Owner	Operator		Contractor			
	Name				Phone		
	Responsible C	ontact Person					
	Street						
	City		State _	County		Zip Code	
	Secondary Co	Secondary Contact Information (If different from above)					
	☐ Owner	Operator		Contractor			
	Name				Phone		
	Responsible C	ontact Person					
	Street						
	City		State	County		Zip Code _	
	Facility/Site I	ocation					
	Name				Phone		
	Responsible C	ontact Person					
	Street						
	City		State	County		Zip Code	
	Is this facility	located in Indian C	ountry? [	□Yes □ N	O		
	Section	Quarter		Township		Range	
	Latitude	Long	gitude		<del></del>		
	Standard Ind	ustrial Classificati	ion (SIC)	Code of facility:			

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FOR SDDENR USE ONLY		
Permit Number:	Date Received:	
Date Permitted:	PCS:	

-					
	arge Information				
A.	Estimate the following:				
	Date water withdrawal will commence:				
	Date for commencement of discharge:				
	Termination date of withdrawal:				
	Termination date of discharge:				
	Total volume of withdrawal:				
	Total volume of discharge:				
	Average flow rate of withdrawal:				
	Average flow rate of discharge:				
B.	Source of water which is to be discharged:				
C.	Name of Receiving Waters:				
D.	Brief description of water treatment processes employed, if any:				
E.	Describe the discharge and the type of wastewater from each outfall. Include all overflows, bypasses, or discharges from holding ponds, trenches, excavations, vessels, pipelines, etc.:  Outfall 001				
	Outfall 002				
	Outfall 003				
Attach	additional sheets if necessary.				
NOTE: Please place points of withdrawal and discharge on a topographic map, or other map topographic map is unavailable. This map should extend to one (1) square mile beyond the proboundaries of the facility and each of its discharge facilities, and those wells, springs, and other sur water bodies, drinking water wells, and surface water intake structures listed in public record otherwise known to the applicant in the map area.					
F.	Is there any reason to believe that the discharge may contain any pollutant other than those limits in the permit (i.e. TSS, pH, Chlorine, BTEX, Benzene, and TPH)?    Yes No If yes, list any pollutants that may be present:				
NOTE	E: Attach any analytical data which indicate levels of pollutants present in water to be discharged.				
Pollution Prevention Plan					
A.	Has the facility written a pollution prevention plan in lieu of sampling for TSS and pH?  ☐ Yes ☐ No				

VIII.	Hydr	ostatic Testing					
	A.	Type of vessel being tested:					
	B.	Material from which vessel is constructed:					
	C.	Check appropriate box: Vessel has been previously used Vessel is virgin material					
	D.	Description of fluid material normally contained/transported through the vessel:					
IX.	List other information which you feel should be brought to the attention of the SDDENR regarding coverage under this general permit.						
<b>V</b> 7	Attach additional sheets if necessary.						
Χ.	Certii	fication – authorized representative should initial the check box.					
	T						
proper manag to the penalti	on (initely gathers of the system) best of the systems of the syst	tify under penalty of law that this document and all attachments were prepared under my ital) or supervision in accordance with a system designed to assure that qualified personnel er and evaluate the information submitted. Based on my inquiry of the person or persons who estem, or those directly responsible for gathering the information, the information submitted is, my knowledge and belief, true, accurate, and complete. I am aware that there are significant submitting false information, including revocation of the permit and the possibility of fine and for knowing violations.					
		cation must be signed by the authorized chief elective or executive officer of the applicant, or by the individual.					
		affirm under the penalties of perjury that this claim (petition, application, information) has d by me, and to the best of my knowledge and belief, is in all things true and correct.					
		Title					
Date							
Signan	ire						

Surface Water Quality Program Joe Foss Building 523 East Capitol Pierre, SD 57501-3181

(e)

permit holder; or

Telephone: (605) 773-3351

# STATE OF SOUTH DAKOTA

# BEFORE THE SECRETARY OF

# THE DEPARTMENT OF ENVIRONMENT AND NATURAL RESOURCES

IN THE MA	ATTER OF THE	) CERTIFICATION OF
APPLICAT	ION OF	_ )
		) APPLICANT
	(FACILITY NAME)	)
STATE OF		_ )
		) SS
COUNTY C	)F	_ )
Т	tha	applicant in the above matter after
being duly application:	sworn upon oath hereby certify the follo	owing information in regard to this
South Dako	ta Codified Laws Section 1-40-27 provide	s:
45, includi	etary may reject an application for any pe ng any application by any concentra on to operate under a general permit, upon	ted swine feeding operation for
permit hold	The applicant is unsuited or unqualifie fer based upon a finding that the applica neral manager of the facility for which app	nt, any officer, director, partner or
(a)	Has intentionally misrepresented a ma	terial fact in applying for a permit;
<i>(b)</i>	Has been convicted of a felony or other	r crime involving moral turpitude;
(c)	Has habitually and intentionally violated or the United States which have environmental damage;	•
<i>(d)</i>	Has had any permit revoked under the the United States: or	environmental laws of any state or

Has otherwise demonstrated through clear and convincing evidence of

previous actions that the applicant lacks the necessary good character and competency to reliably carry out the obligations imposed by law upon the

(2) The application substantially duplicates an application by the same applicant denied within the past five years which denial has not been reversed by a court of competent jurisdiction. Nothing in this subdivision may be construed to prohibit an applicant from submitting a new application for a permit previously denied, if the new application represents a good faith attempt by the applicant to correct the deficiencies that served as the basis for the denial in the original application.

All applications filed pursuant to Titles 34A and 45 shall include a certification, sworn to under oath and signed by the applicant, that he is not disqualified by reason of this section from obtaining a permit. In the absence of evidence to the contrary, that certification shall constitute a prima facie showing of the suitability and qualification of the applicant. If at any point in the application review, recommendation or hearing process, the secretary finds the applicant has intentionally made any material misrepresentation of fact in regard to this certification, consideration of the application may be suspended and the application may be rejected as provided for under this section.

Applications rejected pursuant to this section constitute final agency action upon that application and may be appealed to circuit court as provided for under chapter 1-26."

Pursuant to SDCL 1-40-27, I certify that I have read the forgoing provision of state law, and that I am not disqualified by reason of that provision from obtaining the permit for which application has been made.

I declare and affirm under the penalties of perjury that this claim (petition, application, information) has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

**<u>NOTE</u>**: Notice of Intent/Certificate of Applicant form must be signed by the authorized chief elective or executive officer of the applicant, or by the applicant, if an individual.

Dated this day of	, 20
Applicant Signature	
Applicant Name (print)	

PLEASE ATTACH SHEET DISCLOSING ALL FACTS PERTAINING TO SDCL 1-40-27 (1) (a) THROUGH (e).
ALL VIOLATIONS MUST BE DISCLOSED, BUT WILL NOT AUTOMATICALLY RESULT IN THE REJECTION OF AN APPLICATION.