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

PLEASE PRINT OR TYPE

I.  Primary Contact Information

<table>
<thead>
<tr>
<th>Owner</th>
<th>Operator</th>
<th>Contractor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
<td>Phone</td>
<td></td>
</tr>
<tr>
<td>Responsible Contact Person</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Street</td>
<td></td>
<td></td>
</tr>
<tr>
<td>City</td>
<td>State</td>
<td>County</td>
</tr>
</tbody>
</table>

II. Secondary Contact Information (If different from above)

<table>
<thead>
<tr>
<th>Owner</th>
<th>Operator</th>
<th>Contractor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
<td>Phone</td>
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<td>Responsible Contact Person</td>
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</tr>
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<td>State</td>
<td>County</td>
</tr>
</tbody>
</table>

III Facility/Site Location

<table>
<thead>
<tr>
<th>Name</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td>Responsible Contact Person</td>
<td></td>
</tr>
<tr>
<td>Street</td>
<td></td>
</tr>
<tr>
<td>City</td>
<td>State</td>
</tr>
</tbody>
</table>

Is this facility located in Indian Country? ☐ Yes ☐ No

Section __________ Quarter __________ Township __________ Range __________
Latitude __________ Longitude __________

IV. Standard Industrial Classification (SIC) Code of facility: ________________
V. Please list all the activities which require the applicant to obtain a discharge permit. (Attach additional sheets if necessary.)

VI. Discharge 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

NOTE: Please place points of withdrawal and discharge on a topographic map, or other map if a topographic map is unavailable. This map should extend to one (1) square mile beyond the property boundaries of the facility and each of its discharge facilities, and those wells, springs, and other surface water bodies, drinking water wells, and surface water intake structures listed in public records, or 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 limited in the permit (i.e. TSS, pH, Chlorine, BTEX, Benzene, and TPH)?  
   □ Yes  □ No
   If yes, list any pollutants that may be present: _________________________________

NOTE: Attach any analytical data which indicate levels of pollutants present in water to be discharged.

VII. Pollution Prevention Plan
A. Has the facility written a pollution prevention plan in lieu of sampling for TSS and pH?
   □ Yes  □ No
B. Brief description of best management practices being used in lieu of sampling:
VIII. Hydrostatic 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.
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________

Attach additional sheets if necessary.

X. Certification – authorized representative should initial the check box.

☐ I certify under penalty of law that this document and all attachments were prepared under my direction (initial) 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 revocation of the permit and the possibility of fine and imprisonment for knowing violations.

NOTE: Application must be signed by the authorized chief elective or executive officer of the applicant, or by the applicant, if an individual.

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.

Name _______________________________ Title _______________________________
Date ________________________________
Signature ___________________________
STATE OF SOUTH DAKOTA
BEFORE THE SECRETARY OF
THE DEPARTMENT OF ENVIRONMENT AND NATURAL RESOURCES

IN THE MATTER OF THE APPLICATION OF ___________________________ )  CERTIFICATION OF APPLICANT

_____________________________________________ )
(FACILITY NAME)

STATE OF __________________________________ )
COUNTY OF ________________________________ ) SS

I, ________________________________, the applicant in the above matter after being duly sworn upon oath hereby certify the following information in regard to this application:

South Dakota Codified Laws Section 1-40-27 provides:

"The secretary may reject an application for any permit filed pursuant to Titles 34A or 45, including any application by any concentrated swine feeding operation for authorization to operate under a general permit, upon making a specific finding that:

(1) The applicant is unsuited or unqualified to perform the obligations of a permit holder based upon a finding that the applicant, any officer, director, partner or resident general manager of the facility for which application has been made:

(a) Has intentionally misrepresented a material fact in applying for a permit;

(b) Has been convicted of a felony or other crime involving moral turpitude;

(c) Has habitually and intentionally violated environmental laws of any state or the United States which have caused significant and material environmental damage;

(d) Has had any permit revoked under the environmental laws of any state or the United States; or

(e) 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 permit holder; or
(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.

NOTE: 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.