



DEPARTMENT OF ENVIRONMENT AND NATURAL RESOURCES

NOTICE OF INTENT (NOI)
to Obtain Coverage Under the SWD General Permit for
Storm Water Discharges Associated with Industrial Activities

Return to: SD Department of Environment and Natural Resources
Surface Water Quality Program
523 East Capitol Avenue
Pierre, South Dakota 57501-3181
Telephone: (605) 773-3351 or 1-800-SDSTORM

PLEASE PRINT OR TYPE

I. Applicant/Owner Information:

Name _____ Phone _____
Responsible Contact Person _____
Street _____
City _____ State _____ Zip Code _____

II. Facility/Site Information:

Name _____ Phone _____
Responsible Contact Person _____
Street _____
City _____ State _____ Zip Code _____

Type of Ownership: Private Federal
State Public (Other than Federal or State)

III. Type of Permit Requested: Check (X) the appropriate response:

Industrial Activity Sand/Gravel Mining Activity

IV. Pollution Prevention Plan

A. Has the Pollution Prevention Plan been developed as Required? Yes No
If No, when will it be developed? _____
Please note: The plan must be developed before any industrial or construction activity begins
B. Please include a brief description of best management practices (pollution control measures) being used at the facility/site:

V. Facility/Site Location:

A. Quarter _____ Section _____ Township _____ Range _____
County _____ [If available: Latitude _____ Longitude _____]
B. Site/Project Name: _____
C. What is the total area covered by the site (in acres) _____

FOR DENR USE ONLY
Postmark Date: Permit Number: Date Permitted:

VI. Receiving Waters:

Please list all possible receiving waters of the storm water discharge (if discharging to a Municipal Storm Sewer, indicate which municipality and the ultimate receiving water):

VII. Nature of Discharge

A. **Standard Industrial Classification (SIC) codes of this facility** (Include at least one, and up to four, SIC or 6-digit North American Industry Classification (NAIC) codes which best describe the facility. For example, the SIC Code for a sand/gravel pit is **1442**. For construction activities, no codes are assigned; therefore, indicate **CO**):

B. Please include a brief description of the activities conducted at this facility or construction site: _____

VIII. Operational History (Industrial Only)

Date Constructed: _____
Operational Start-up: _____

Construction Project History (Construction or sand/gravel mining)

Project Start Date (MM/DD/YY): _____
Estimated Area of Total Disturbance (in acres): _____
Estimated Completion Date (MM/DD/YY): _____

IX. Existing Environmental Permits

Please check (X) all other Environmental Permits which are held by this facility/activity. Include permit numbers in the space provided:

- SWD or NPDES (Discharges to Surface Water) _____
- UIC (Underground Injection of Fluids) _____
- RCRA (Hazardous Wastes) _____
- PSD (Air Emissions from Proposed Sources) _____
- Other (please specify) _____

X. Certification (Authorized representative should *initial* the box)

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 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. In addition, I certify that I am aware of the terms and conditions of the General Storm Water permit and I agree to comply with those requirements.

NOTE: In addition to this form, you also need to complete [this Certification of Applicant form](#) and submit it with your application.

DEPARTMENT OF ENVIRONMENT AND NATURAL RESOURCES

NOTICE OF INTENT (NOI) for REAUTHORIZATION
of Coverage Under the SWD General Permit for Storm Water
Discharges Associated With Industrial Activities

The following facility currently has coverage under the General Permit for Storm Water Discharges Associated with Industrial Activities. ***This form must be submitted if you wish to continue coverage under the General Permit.*** Submission of this form shall in no way relieve the permittee of permit obligations required prior to submission of this form. Please submit this form to the following address:

original to: SD Department of Environment and Natural Resources
Surface Water Quality Program
PMB 2020
523 East Capitol Avenue
Pierre, South Dakota 57501-3181
Telephone: (605) 773-3351

PLEASE PRINT OR TYPE (Update Information below as needed)

I. Permittee Information

Permittee Name: _____
Company Name: _____
Mailing Address: _____
City: _____ County: _____ State: _____ Zip Code: _____

II. Project Information

Project Name: _____
Project Description: _____
Project Start Date: _____
Estimated Completion Date: _____

III. Permit Number:

IV. Signature of Applicant

By signing this form, you are requesting to continue permit coverage under the reissued General Permit. You are certifying you will comply with the new General Permit and update your Storm Water Pollution Prevention Plan if necessary to meet the reissued General Permit conditions.

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 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. In addition, I certify that I am aware of the terms and conditions of the General Storm Water permit and I agree to comply with those requirements.

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

Name (print) _____ Title _____

Signature _____ Date _____