



**Minnesota Pollution
Control Agency**

520 Lafayette Road North
St. Paul, MN 55155-4194

Industrial Stormwater Multi-Sector NPDES/SDS Permit Application

NPDES/SDS Water Permit Program

Doc Type: Permit Application

Purpose: In addition to point source discharges, the National Pollutant Discharge Elimination System (NPDES)/State Disposal System (SDS) Permit Program regulates industrial stormwater (ISW) discharges to surface waters and land. This application applies to municipal and privately owned facilities which have Narrative Activities or a Primary Standard Industrial Classification (SIC) code listed in the *Industrial Stormwater Multi-Sector Permit Application Instructions* and is requesting to incorporate their ISW permit requirements into their individual NPDES/SDS Permit. Please refer to the *Industrial Stormwater Multi-Sector Permit Application Instructions* on the Minnesota Pollution Control Agency (MPCA) website at <http://www.pca.state.mn.us/enzq915> detailed instructions.

Instructions: Complete the application by typing or printing in black ink. Attach additional sheets as necessary. Review the attachment and ensure all requested items are submitted with this attachment. Please make a copy for your records. Refer to the *Transmittal Form* for mailing instructions. For more information, please contact the Minnesota Pollution Control Agency (MPCA) at: In Metro Area: 651-296-6300 or Outside Metro Area: 800-657-3864.

Permittee name: _____ NPDES/SDS permit number: MN

1. Do you currently have coverage under the Industrial Stormwater Multi-Sector General Permit or have certified for No Exposure?

☐ Yes ☐ No **If yes**, please provide your permit ID: MNR **If no**, skip to 2.

Would you like to terminate your coverage under the Industrial Stormwater Multi-Sector General Permit and incorporate your permit requirements into your individual NPDES/SDS permit? ☐ Yes ☐ No

If no, stop here. You are responsible for maintaining compliance with the requirements of the Industrial Stormwater Multi-Sector General Permit.

2. Select all applicable Narrative Activities from the list below. If none are applicable, skip to 3.

Subsector	Subsector description	Check if applicable
A4	Timber products: discharges from wet decking storage areas	<input type="checkbox"/>
C1	Runoff from phosphate fertilizer manufacturing facilities that comes into contact with any raw materials, finished product, by-products, or waste products	<input type="checkbox"/>
D1	Runoff from asphalt paving and roofing material areas	<input type="checkbox"/>
D2	Discharges from production of asphalt emulsions areas	<input type="checkbox"/>
E2	Runoff from concrete and gypsum product manufacturing areas	<input type="checkbox"/>
E3	Cement manufacturing facility, material storage runoff	<input type="checkbox"/>
J1	Runoff from sand and gravel mining areas	<input type="checkbox"/>
J2	Runoff from dimension, crushed stone, and nonmetallic mineral mining areas	<input type="checkbox"/>
J4	Mine dewatering discharges at construction: sand and gravel, or industrial sand mining facilities	<input type="checkbox"/>
K1	Hazardous waste treatment/storage/disposal facility for discharges not subject to effluent limitations in 40 CFR pt. 445, subp. A	<input type="checkbox"/>
K2	Hazardous waste treatment/storage/disposal facility for discharges subject to effluent limitations in 40 CFR pt. 445, subp. A	<input type="checkbox"/>
L1	Municipal solid waste landfill areas closed in accordance with 40 CFR 258.60	<input type="checkbox"/>
L2	Open or closed non-hazardous waste landfill and land application site not discharging to surface water	<input type="checkbox"/>
L3	Landfill that discharges to surface waters stormwater that has directly contacted solid waste	<input type="checkbox"/>
O1	Coal fired and oil fired steam electric generating facility	<input type="checkbox"/>
O2	Nuclear, natural gas fired, and any other fuel source used for steam electric generation	<input type="checkbox"/>
O3	Runoff from coal storage piles at steam electric generating facility	<input type="checkbox"/>
T1	Treatment works with design flow of one million gallons per day or more or are required to have an approved pretreatment program under 40 CFR pt. 403	<input type="checkbox"/>

3. What is your facility's primary SIC code?

(See the instructions for the definition of "primary" SIC Code.)

**If your primary SIC code or Narrative Activity is not listed within the instructions, Stop here.
An application is not required; keep this document for your records.**

4. List up to five additional authorized SIC codes from the instructions, if applicable:

5. If you listed SIC codes 2869, 4512, 4513, 4522, or 4581 in 3 or 4, list the corresponding subsector:

(Examples: 2869-C7 or 4581-S2)

6. What is the acreage of your *Industrial Activities*?

Round to one decimal place (ex: 10.4):

7. Briefly describe the *industrial activities* performed at this facility:

8. **No Exposure.** Are any of the following materials or activities exposed to precipitation, now or in the foreseeable future? These questions are for your entire facility. (See instructions for examples.)

A. Using, storing or cleaning industrial machinery or equipment, and areas where residuals from using, storing or cleaning industrial machinery or equipment remain and are exposed to stormwater	<input type="checkbox"/> Yes <input type="checkbox"/> No
B. Materials or residuals on the ground or in stormwater inlets from spills or leaks	<input type="checkbox"/> Yes <input type="checkbox"/> No
C. Materials or products from past industrial activity	<input type="checkbox"/> Yes <input type="checkbox"/> No
D. Material handling equipment (except adequately maintained vehicles)	<input type="checkbox"/> Yes <input type="checkbox"/> No
E. Materials or products during loading or unloading or transporting activities	<input type="checkbox"/> Yes <input type="checkbox"/> No
F. Materials or products stored outdoors (except final products intended for outside use, such as new cars, where exposure to stormwater does not result in the discharge of pollutants)	<input type="checkbox"/> Yes <input type="checkbox"/> No
G. Materials contained in open, deteriorated or leaking storage drums, barrels, tanks and similar containers	<input type="checkbox"/> Yes <input type="checkbox"/> No
H. Materials or products handled or stored on roads or railways owned or maintained by the discharger	<input type="checkbox"/> Yes <input type="checkbox"/> No
I. Waste materials (except waste in covered, non-leaking containers like a covered dumpster)	<input type="checkbox"/> Yes <input type="checkbox"/> No
J. Application or disposal of process wastewater, unless otherwise permitted (If currently unpermitted, obtain NPDES/SDS permit coverage or authorization from your local Wastewater Treatment Facility)	<input type="checkbox"/> Yes <input type="checkbox"/> No
K. Particulate matter or visible deposits of residuals from roof stacks and/or vents not otherwise regulated (i.e., under an air quality control permit) and evident in the stormwater outflow	<input type="checkbox"/> Yes <input type="checkbox"/> No

If you checked “yes” to any question(s) A-K, you are not eligible for the No Exposure exclusion. Go to 10.

If you checked “no” to all of the questions in A-K, you qualify for the No Exposure exclusion. Go to 9, sign, and submit form as part of the entire permit application packet to the MPCA.

9. **No Exposure Owner and Operator Certification**

I certify under penalty of law that I have read and understand the eligibility requirements for claiming a condition of “no exposure” and obtaining an exclusion from NPDES/SDS stormwater permitting; and that there are no discharges of storm water contaminated by exposure to industrial activities or materials from the industrial facility identified in this document.

I understand that I am obligated to submit a no exposure certification form once every five years to the NPDES/SDS permitting authority and, if requested, to the operator of the local Municipal Separate Storm Sewer Systems (MS4) into which this facility discharges.

I understand that I must allow the NPDES/SDS permitting authority, or MS4 operator where the discharge is into the local MS4, to perform inspections to confirm the condition of no exposure and to make such inspection reports publicly available upon request.

I understand that I must obtain coverage under an NPDES Permit prior to any point source discharge of storm water from the facility. 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 gathered and evaluated the information submitted.

Based upon my inquiry of the person or persons who manage the system, or those persons directly involved in gathering the information, the information submitted is to the best of my knowledge and belief true, accurate and complete.

I am aware there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

(This certification is required by Federal Regulation 40 CFR 122.26(g)(4)(iv).)

Owner authorized signature:

(For No Exposure only)

Owner (please print): _____

Title: _____

Signature: _____

Date (mm/dd/yyyy): _____

Operator authorized signature:

(For No Exposure only)

Operator (if different): _____

Title: _____

Signature: _____

Date(mm/dd/yyyy): _____

If you were unable to certify for the No Exposure exclusion, continue.

10. Do industrial stormwater discharges flow from the facility to a regulated MS4?

☐ Yes ☐ No If Yes, name of Regulated MS4 Owner: _____
(Ex: St. Paul Municipal Stormwater)

11. List all surface waters that receive your industrial stormwater discharge.

Indicate below the name of surface water(s) and type of surface water (Fen, Ditch, Lake, Lake Trout Lake, Pond, River, Stream, Trout Stream, or Wetland) that receive your industrial stormwater discharges. If you are unsure of your receiving waters, the following website may be useful: <http://viewer.nationalmap.gov/viewer/>. Once you have found your location select the Hydro-NHD button in the upper right hand corner.

Name of surface water	Type of surface water
Ex: St. Croix River	Ex: River
Ex: Unnamed Ditch	Ex: Ditch

12. Monitoring location information.

List all Benchmark and Effluent Monitoring Locations. **A minimum of one monitoring location is required.** These monitoring locations apply to sheltered product/activity/waste storage areas as well. See instructions for clarification. Attach additional sheets as necessary.

#	Describe the location of the monitoring location	Latitude	Longitude	List Subsector of Narrative Activities and/or SIC Codes for monitoring location
	Ex: NW corner of facility, near road	Ex: 44. 956497	Ex: -93. 084619	Ex: SIC 3111
		Ex: 44. 956497	Ex: -93. 084619	Ex: 02
1				
2				
3				
4				
5				
6				