

V. Discharge Information:

Estimate the following information:

- A. Date water **withdrawal** will commence: _____
- B. Date water **withdrawal** will cease: _____
- C. Total volume of **withdrawal** (in gallons): _____
- D. Date water **discharge** will commence: _____
- E. Date water **discharge** will cease: _____
- F. Total volume of **discharge** (in gallons): _____
- G. Average flow rate of **discharge** (in gpm): _____

Source of water being withdrawn/discharged: _____

Name of receiving waters: _____

Treatment processes employed, if any: _____

Describe the discharge and type of wastewater from each discharge location (including overflows, bypasses or discharges from holding ponds, trenches, excavations, vessels, pipelines, etc.) Attach additional sheets if necessary.

- A. Discharge 1: _____
- B. Discharge 2: _____
- C. Discharge 3: _____

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.

VI. Stormwater Pollution Prevention Plan (SWPPP):

Is there any reason to believe the discharge may contain any pollutants other than those limited in the permit (i.e. TSS, pH, BTEX, Benzene, & TPH)? Yes No

Has the SWPPP been developed in lieu of sampling for TSS or TRC? Yes No

Describe the best management practices being used in lieu of, or along with, sampling:

VII. Hydrostatic Testing:

- A. Type of vessel being tested: _____
- B. Material vessel is constructed from: _____
- C. Check the appropriate box: Vessel has been previously used Vessel is virgin material

VIII. Other Information:

Please list other information you feel should be brought to the attention of the SDDENR regarding coverage under this general permit. Attach additional sheets if necessary.

Submit information as a change to the NOI through CDX or email to john.weeldreyer@state.sd.us