

For each outlet, list the latitude and longitude to the nearest second and the River Mile Point (if known). Refer to Instructions Document.

Outlet Number	Latitude			Longitude			River
	Degrees	Minutes	Seconds	Degrees	Minutes	Seconds	Milepoint
001							

11. List the Standard Industrial Classification (SIC) Code designated for your facility
 1. _____ 2. _____ 3. _____ (Insert 4 Digit Number)

12. List any existing WV/NPDES Permits previously issued by the Division of Water and Waste Management:

Number _____ Date _____ 19__ If you have none check this box
 Number _____ Date _____ 19__

13. Nature of Business and state when operations at this facility began (provide brief description):

14. Facility Type; **CHECK (√) ONE.**

Facility With Existing Multi Sector General Stormwater Permit Coverage and no Significant Changes. **Complete Sections 19, 20 21 & 22**

Facility With No Existing Multi Sector General Stormwater Permit Coverage or, Facility with existing coverage and significant changes. **Complete Sections 15, 16, 17, 18, 19, 20 21 & 22**

15. Attach to this application a topographic map of the area. The map must mark the location of the facility, location of all wells, sinkholes, springs, rivers and other surface water bodies, and drinking water wells known to the applicant in the area of the facility. Is your facility within the zone of critical concern for a public drinking water intake? If so, please list the name and the contact information for the public drinking water operator.

16. Attach to this application a sketch of the facility showing the location of any treatment system for storm water, each location of outlets carrying storm water, and the site and runoff characteristics of each drainage area carrying runoff in square feet.

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Runoff Characteristics - Determination of Areas:

A. Paved, roofed or other impervious areas	_____	Square Feet
B. Graveled or stoned areas	_____	Square Feet
C. Exposed or barren ground	_____	Square Feet
D. Vegetated areas	_____	Square Feet
Total	_____	Square Feet
17. Average Runoff in Gallons per Day	_____	

18. **Waste Characteristics:** For each storm water outlet, samples must be taken for the following parameters and the results submitted with this registration form:

A. Pollutant analyses required for outlets at all sites:

Oil & Grease	TSS
pH	TKN
BOD-5	Nitrate plus nitrite
COD	Total Phosphorus

B. List each pollutant shown in Tables 2, 3, 4 and 5 that you know or have reason to believe is present. See instructions for additional details and requirements. Complete one table for each outlet.

19. Has your facility developed a Storm Water Pollution Prevention Plan (SWPPP) / Groundwater Protection Plan (GPP), and are copies of the plan(s) retained on site?

YES NO

If YES, attach the plan(s) to the permit application. If the plans have not been revised / updated within the last five years please revise and update plan(s) prior to submittal.

If NO, permit coverage cannot be granted until a SWPPP/GPP for the site is submitted and approved.

PLEASE NOTE: All facilities applying for multi-sector general storm water permit coverage MUST submit a Stormwater Pollution Prevention Plan (SWPPP) and a Groundwater Protection Plan (GPP) for the facility. Each plan or a combined plan must be certified (See Item No. 23 for certification language) by the designated signatory authority of the facility.

19a. Has the facility at any time been required to maintain a Spill Prevention Control and countermeasures Plan (SPCC) per 40 CFR 112.8-12 or a Facility Response Plan (FRP) per 40 CFR 122.2? If so please attach the SPCC Plan or FRP for review.

20. Attach to this application a summary of the Discharge Monitoring Report data submitted under the previous storm water general permit. (Note: this requirement does not pertain to new facilities.)

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21. If there is a pond on your facility, please determine whether or not it collects stormwater from areas on which industrial activities occur. If no, mark no for Parts A and B. If yes, mark yes for A or B depending on the type of pond and enter the total acres drained by the pond. Please indicate if there are any oil / water separators at your facility. If so, please list which outlets have an oil / water separator.

A. Is there a wet pond at your facility? (See instructions for definition)

Yes_____ No_____ Acres Drained:_____

B. Is there a dry pond at your facility? (See instructions for definition)

Yes_____ No_____ Acres Drained:_____

C. Do any of your storm water outlets discharge through an oil water separator?

Yes_____ No_____ Acres Drained:_____ Outlet:_____

22. A. List the total number of chemical, fuel and lubricant storage tanks including raw material, product, intermediate, and waste storage tanks located at your facility that store at least 1,320 gallons. _____

B. List the maximum size of each tank and what materials are stored in EACH tank. Also for each tank please include the date the tank's integrity was last tested and whether the tank has ever had an observed release. If a release has occurred please attach the release report and describe what repairs to the tank have been made to prevent future releases. Use additional pages as necessary. If this information is already included in an AST registration program or permitting program there is no need to supply this information.

Tank No.	Size of Tank	Material Stored in Tank	Date Integrity of Tank Tested	Observed Release	
				Yes	No

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C. For each tank indicated above list whether secondary containment is provided for the tank, what type of secondary containment type is used (double walled tank, containment wall etc.) and the volume in percent this secondary containment provides for the largest tank within the secondary containment. Also for each tank please include the date the secondary containment's integrity was last tested and whether the containment has ever had an observed release. If a release has occurred please attach the release report and describe what repairs to the secondary containment have been made to prevent future releases. Use additional pages as necessary.

Secondary Containment	Size of Secondary Containment	Type of Secondary Containment	Date of Integrity Testing of Secondary Containment	Observed Release	
				Yes	No

For tanks of 5,000 gallons or more that are not already included in either the facility's SWPPP, GPP or SPCC Plans please indicate spill prevention and control measures that are employed at the facility including procedures for notifying downstream receptors in the case of a release of materials that could potentially migrate off the facility's property. Use additional pages as necessary. If this information is already included in an AST registration program or permitting program there is no need to supply duplicate information.

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23. Signature

By completing and submitting this application, I have reviewed, understood and agreed to the terms and conditions of the general permit. I understand that provisions of the permit are enforceable by law. Violations of any term and condition of the general permit and/or other applicable law or regulation can lead to enforcement action.

I certify under penalty of law that I have personally examined and am familiar with the information submitted on this application form and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining 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 the possibility of fine and imprisonment.

SIGNATURE _____ DATE _____

PLEASE **PRINT** NAME _____

PLEASE **PRINT** TITLE _____

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