



Request for Coverage under the National Pollutant Discharge Elimination System (NPDES) Water Treatment Plant General Permit

This information is for a waste discharge permit, as required in accordance with the provisions of Chapter 90.48 RCW and Chapter 173-226 WAC, and will be used to determine if coverage by general permit is appropriate. All questions must be answered completely and accurately to be considered for coverage. If a question does not apply, answer with "NA."

SECTION A. GENERAL INFORMATION

1. Name: (Company/municipality) _____

(Facility name) _____

2. Mailing Address: _____

(General correspondence) Street _____

City State Zip

3. Billing Address: _____

(If different from above) Street _____

City State Zip

4. Facility Address: _____

(Actual site location) Street _____

City State Zip

5. Does company/municipality own property on which facility is located? Yes No

If no, what is the name and address of property owner? _____

If no, attach certified copy of legal contract with the property owner.

For Office Use Only	
Date Received _____	Application/Permit No. _____
Waterbody No. _____	
Facility Category	<input type="checkbox"/> Group 1 <input type="checkbox"/> Existing <input type="checkbox"/> Group 2 <input type="checkbox"/> New

Facility: _____

SECTION B. FACILITY OPERATION AND LOCATION INFORMATION

1. Facility Latitude/Longitude location (if not known, provide Township/Range/Section):

Latitude: _____

Township: _____

Longitude: _____

OR Range: _____

Section: _____ Qtr/Qtr _____

2. Does this facility presently have a wastewater discharge permit: Yes No

If yes, what is the date of issuance: _____

date of expiration: _____

permit number: _____

3. Source of Raw Water is: Surface Water Groundwater Both

4. Facility Finish (Potable) Water Production:

Maximum Production Capacity:¹ _____ (gallons per day)

Average Production: _____ (gallons per day)

Peak Production: _____ (gallons per day)

5. Facility Processes that Contribute to Wastewater Discharge (check all that apply):

Presedimentation Wash Down

Filter Backwash

Other (list)

Sedimentation Wash Down

Filter-to-Waste

6. Wastewater Discharge Quantity:

Average Discharge: _____ (gallons per day)

Maximum Discharge: _____ (gallons per day)

Highest Volume Month: _____ (month)

Lowest Volume Month: _____ (month)

7. Facility Discharges Wastewater To: _____

Receiving water name(s)

8. Location of Outfall (point of wastewater discharge):

Latitude: _____

Longitude: _____

¹ "Maximum production capacity" refers to the amount of potable water that a treatment facility is designed to produce at peak output and 24-hour production.

SECTION B. FACILITY OPERATION AND LOCATION INFORMATION (Continued)

9. Facility is: Public Or Private

10. Facility is: Existing _____ Or New¹ _____
Date constructed Date to be constructed

11. Directions to the facility from the nearest town or city:

12. Provide a complete description of (attach additional sheets as necessary):

- a) The raw water treatment requirements (*e.g.*, iron/manganese removal, pathogen removal);
- b) Treatment processes employed by the facility (*e.g.*, coagulation, oxidation, pH adjustment);
- c) All known substances (*e.g.*, removed substances, chemical additives, chemical reaction products) that may potentially be found in wastewater discharge (*e.g.*, silt, chlorine, chloroform);
- d) All chemical additives associated with the treatment processes (*e.g.*, alum for coagulation, chlorine for oxidation); and
- e) Attach a sketch, aerial photograph, or map, including scale, of the facility, with the following marked:
 - 1. Approximate overall dimensions of the facility
 - 2. A properly-labeled line drawing of water and wastewater flows throughout the facility's processes
 - 3. All chemical storage areas
 - 4. All settling ponds, including dimensions and volume
 - 5. All discharge point(s) and receiving water(s)
 - 6. All sludge disposal areas

¹ A new facility is one that begins activities that result in a discharge, or a potential discharge to waters of the state on or after the effective date of the general permit. New facilities must submit with the application for coverage:

- a) proof of public notice (WAC 173-226-130(5))
- b) proof of compliance with SEPA