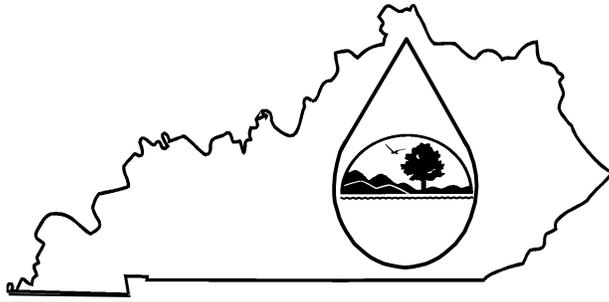


KPDES FORM 1

KENTUCKY POLLUTANT DISCHARGE ELIMINATION SYSTEM

PERMIT APPLICATION



This is an application to: (check one)

- Apply for a new permit.
- Apply for reissuance of expiring permit.
- Apply for a construction permit.
- Modify an existing permit.

Give reason for modification under Item II.A.

A complete application consists of this form and one of the following:

Form A, Form B, Form C, Form F, or Form SC

For additional information contact:

Surface Water Permits Branch (502) 564-3410

I. FACILITY LOCATION AND CONTACT INFORMATION	AGENCY						
	USE						

A. Name of Business, Municipality, Company, Etc. Requesting Permit	
B. Facility Name and Location	C. Primary Mailing Address (all facility correspondence will be sent to this address). Include owner's mailing address (if different) in D.
Facility Location Name:	Facility Contact Name and Title: Mr. <input type="checkbox"/> Ms. <input type="checkbox"/>
Facility Location Address (i.e. street, road, etc., not P.O. Box):	Mailing Address:
Facility Location City, State, Zip Code:	Mailing City, State, Zip Code:
D. Owner's name (if not the same as in part A and C):	Facility Contact Telephone Number:
Owner's Mailing Address:	Owner's Telephone Number (if different):

II. FACILITY DESCRIPTION	
A. Provide a brief description of activities, products, etc:	
B. Standard Industrial Classification (SIC) Code and Description	
Principal SIC Code & Description:	
Other SIC Codes:	

III. FACILITY LOCATION	
A. Attach a U.S. Geological Survey 7 1/2 minute quadrangle map for the site. (See instructions)	
B. County where facility is located:	City where facility is located (if applicable):
C. Body of water receiving discharge:	
D. Facility Site Latitude (degrees, minutes, seconds):	Facility Site Longitude (degrees, minutes, seconds):
E. Method used to obtain latitude & longitude (see instructions):	

IV. OWNER/OPERATOR INFORMATION

A. Type of Ownership:

Publicly Owned Privately Owned State Owned Both Public and Private Owned Federally owned

B. Operator Contact Information (See instructions)

Name of Treatment Plant Operator:	Telephone Number:
Operator Mailing Address (Street):	
Operator Mailing Address (City, State, Zip Code):	
Is the operator also the owner? Yes <input type="checkbox"/> No <input type="checkbox"/>	Is the operator certified? If yes, list certification class and number below. Yes <input type="checkbox"/> No <input type="checkbox"/>
Certification Class:	Certification Number:

V. EXISTING ENVIRONMENTAL PERMITS

Current NPDES Number:	Issue Date of Current Permit:	Expiration Date of Current Permit:
Other DOW Operational Permit #:	Kentucky DMR Permit Number(s):	Sludge Disposal Permit Number:
Other Existing Environmental Permit #:	Other Existing Environmental Permit #:	Other Existing Environmental Permit #:

Which of the following additional environmental permit/registration categories will also apply to this facility?

CATEGORY	EXISTING PERMIT WITH NO.	PERMIT NEEDED WITH PLANNED APPLICATION DATE
Air Emission Source		
Solid or Special Waste		
Hazardous Waste - Registration or Permit		

VI. DISCHARGE MONITORING REPORTS (DMRs)

KPDES permit holders are required to submit DMRs to the Division of Water on a regular schedule (as defined by the KPDES permit). Information in this section serves to specifically identify the name and telephone number of the DMR official and the DMR mailing address (if different from the primary mailing address in Section I.C).

A. DMR Official (i.e., the department, office or individual designated as responsible for submitting DMR forms to the Division of Water):	
DMR Official Telephone Number:	

B. DMR Mailing Address:

- Address the Division of Water will use to mail DMR forms (if different from mailing address in Section I.C), or
- Contact address if another individual, company, laboratory, etc. completes DMRs for you; e.g., contract laboratory address.

DMR Mailing Name:	
DMR Mailing Address:	
DMR Mailing City, State, Zip Code:	

VII. APPLICATION FILING FEE

KPDES regulations require that a permit applicant pay an application filing fee equal to twenty percent of the permit base fee. Please examine the base and filing fees listed in "Form 1 Instructions" and enclose a check payable to "Kentucky State Treasurer" for the appropriate amount. For permit renewals, please include the KPDES permit number on the check to ensure proper crediting. Please see the separate document "General Instructions" for an expanded description of the base fee amounts.

Facility Fee Category:	Filing Fee Enclosed:
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VIII. CERTIFICATION

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 persons 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 the possibility of fine and imprisonment for knowing violations.

NAME AND OFFICIAL TITLE (type or print): Mr. <input type="checkbox"/> Ms. <input type="checkbox"/>	PHONE NUMBER:
SIGNATURE	EMAIL:
	DATE:

Return completed application form and attachments to: **Surface Water Permits Branch, Division of Water, 200 Fair Oaks Lane, Frankfort, KY 40601. Direct questions to: Surface Water Permits Branch at (502) 564-3410.**

KPDES FORM 1 -- INSTRUCTIONS

Section A: General Instructions

With the exceptions described in Section C of these instructions, Federal and State laws prohibit you from the discharge of pollutants into the waters of the United States or waters of the Commonwealth.

Where to file

Return completed application forms to Surface Water Permits Branch, Division of Water, 200 Fair Oaks Lane, Frankfort, Kentucky 40601.

When to file

File the application at least 180 days prior to expiration of your current KPDES permit or at least 180 days prior to startup of a new facility.

Fees

Filing fees and five-year permit fees are listed in Section B. Filing Fees are not refundable.

Completion of Forms

Unless otherwise specified in the detailed instructions, each item in each form must be answered. To indicate that each item has been considered, enter "NA," for not applicable, if a particular item does not fit the circumstances or characteristics of your facility or activity. If more space is necessary to answer a question, attach a separate sheet entitled "Additional Information."

Section B: Completing Form 1

Listed below are explanations of select Form 1 questions. If further information is needed concerning any question, please **contact Division of Water, Surface Water Permits Branch at (502) 564-3410**.

I. Facility Location and Contact Information

- A. Use the official or legal name of the business, company, municipality, etc. requesting permit. Do not use a colloquial name. Give the name, as it is legally referred to, of the person, firm, public organization, or any other entity that operates the facility described in this application. This may or may not be the same name as the facility. The operator of the facility is the legal entity which controls the facility's operation rather than the plant or site manager. This use of "operator" in many cases is not the same as the treatment plant Certified Operator.
- B. The facility name should be the name by which the facility is commonly known and/or uniquely identified. Enter the facility's official or legal name. Do not use a colloquial name. The information given as the facility name and location address should be for the actual location of the facility (i.e. road name, highway number, not the P O Box address). If there is no street address, identify the facility location by the most accurate alternative geographic information such as direction and distance to nearest intersection or permanent landmark (e.g., ½ mile east of intersection of KY 70 and US 127).
- C. The primary mailing address should be the legal permittee of record and is the address where correspondence regarding the application, permit, etc. for the facility will be sent unless otherwise indicated. This often is not the address used to designate the location of the facility or activity. Give the name, title, and work telephone number of a person who is thorough familiar with the operation of the facility and with the facts reported in this application and who can be contacted by reviewing offices if necessary. The owner mailing address is to be provided in "D" if different from the primary mailing address. Discharge Monitoring Reports will be mailed to the address indicated in part VI.
- D. If the applicant for the permit is not the owner of the facility, include the name of the owner of the facility. Include the mailing address of the owner of the facility if the owner is not the applicant for the permit.

II. Facility Description

- A. Briefly describe the nature of the business and the activities being conducted that require a KPDES permit.
- B. List, in descending order of significance, the four 4-digit standard industrial classification (SIC) codes that best describe your facility in terms of the principal products or services you produce or provide. Also, specify each classification in words. These classifications may differ from the SIC codes describing the operation generating the discharge. The SIC codes are numbers and descriptions of activities classified by the Executive Office of the President, Office of Management and Budget. These are found in the 1987 Edition of the Standard Industrial Classification (SIC) Manual. List the SIC codes(s) that best describe the products or services provided by the facility in descending order of importance. If an SIC code book is not available, please describe in detail the nature of the business and activities conducted so that an appropriate code can be assigned.

III. Facility Location

- A. Attach a U.S. Geological Survey (USGS), 7 1/2 minute topographic quadrangle map(s) extending at least one mile beyond the property boundary of the discharge source. Depict or mark the facility and each of its intake and discharge structures. Also mark the locations of those wells, springs, surface water bodies, and drinking water wells listed in public records or otherwise known to the applicant within one-quarter mile of the facility property boundary. USGS maps may be obtained from the University of Kentucky, Mines and Minerals Bldg. Room 104, Lexington, Kentucky 40506. Phone: (859) 257-3896.
- B. List the county and, if applicable, city where facility is located.
- C. List the body of water receiving discharge.
- D. List the latitude and longitude for the facility site. The latitude/longitude reading for the site should be taken at the influent to the wastewater treatment plant, if applicable.
- E. List the method used to obtain the latitude and longitude (i.e. topo map coordinates, GPS reading, etc.)
- F. List the facility's Dun and Bradstreet Number if applicable.

IV. Owner/Operator Information

- A. Place a check in the applicable type ownership as listed.
- B. These sections must be completed by **all municipal and sanitary wastewater applicants**.
 - For those facilities that require a Certified Operator, enter the name of a Certified Operator who will operate the treatment plant, or enter the name of an operator who will be certified before commencement of discharge. The operator of the treatment plant is often someone other than the operator of the facility identified in Part I.
 - List the name and address of the person who operates the sewage treatment plant.
 - Indicate if the operator is also the owner.
 - The operator must be currently certified with the Division of Water. For information concerning those requirements, Contact: Division of Compliance Assistance, Certification Section, at (502) 564-0323.
 - List the Operator's Certification Class and Certification Number.
- V. List any existing environmental permits that the facility has or will be applying for. KPDES permits use an NPDES generated number.
- VI. List the address where Discharge Monitoring Report (DMR) forms are to be mailed. Complete this section if you are requesting a different address than the address in Part I (C.)

VII. Application Filing Fee

The payment of a filing fee as listed below must accompany the application for a KPDES Permit. **Your check must be made payable to "Kentucky State Treasurer." For permit renewals, to ensure proper credit to your account, please include the KPDES permit number on the check.** This fee will be applied toward the final discharge permit fee. The filing fee is not refundable if the application is withdrawn or the permit is denied. Listed below are the facility categories, associated base five-year fees, and application filing fees. (See the separate "General Instructions" for definitions of facility categories.)

Facility Category	Five-Year Fee (100%)	Application Filing Fee (20%)
Major Industry	\$7,000	\$1,400
Minor Industry	\$4,500	\$900
Non-Process Industry	\$2,200	\$440
Large Non-POTW	\$3,700	\$740
Intermediate Non-POTW	\$3,200	\$640
Small Non-POTW	\$2,200	\$440
Agriculture	\$1,200	\$240
Surface Mining Operation	\$3,300	\$660
501(c)(3)	\$100	\$20

If this application is for a new project, see separate General Instructions for the applicable Construction Permit fee. A permit application cannot be processed unless the application filing fee and (if applicable) construction permit fee is enclosed. Make your check payable to "Kentucky State Treasurer."

VIII. Certification

The permit application must be signed as follows:

Corporation: by a principal executive officer of at least the level of vice president.

Partnership or sole proprietorship: by a general partner or the proprietor respectively.

Municipality, state, federal, or other public agency: by either a principal executive officer or ranking elected official.

Section C—Activities Which Do Not Require KPDES Permits

You are not required to obtain a KPDES permit if your discharge is one of the following categories, as provided by the Clean Water Act (CWA) and KPDES regulations (401 KAR Chapter 5).

1. **Dredged or Fill Material:** Discharges of dredged or fill material as defined at 33 CFR 323.2 into waters of the Commonwealth do not need KPDES permits if the dredging or filling is authorized by a permit issued by the U.S. Army Corp of Engineers.
2. **Discharges into Publicly Owned Treatment Works (POTW):** The introduction of sewage, industrial wastes, or other pollutants into a POTW does not need a KPDES permit. You must comply with all applicable pretreatment standards promulgated under Section 307 (b) of the CWA, which may be included in the permit issued to the POTW. If you have a plan or an agreement to switch to a POTW in the future, this does not relieve you of the obligation to apply for and receive a KPDES permit until you have stopped discharging pollutants into waters of the Commonwealth.
3. **Dischargers into Privately Owned Treatment Works:** Dischargers into privately owned treatment works do not have to apply for or obtain KPDES permits except as otherwise required by the Cabinet. The owner or operator of the treatment works itself, however, must apply for a permit and identify all users in its application.
4. **Discharges from Agricultural and Silvicultural Activities:** Most discharges from agricultural and silvicultural activities to waters of the Commonwealth do not require KPDES permits. These include runoff from orchards, cultivated crops, pastures, range lands, and forest lands. However, the discharge listed below DO require KPDES permits.
 - a. **Discharges from Concentrated Animal Feeding Operations**
 - b. **Discharges from Concentrated Aquatic Animal Production Facilities.**
 - c. **Discharges associated with approved Aquaculture Projects.**
 - d. **Discharges from Silvicultural Point Sources.** Nonpoint source silvicultural activities are excluded from KPDES permit requirements. However, some of these activities, such as stream crossings for roads, may involve point source discharge of dredged or fill material which may require a Section 404 permit. See 33 CFR 209.120.
5. **Underground Injection Control Permits Under the Safe Drinking Water Act**