

MARYLAND DEPARTMENT OF THE ENVIRONMENT
 General Discharge Permit For Discharges from Mineral Quarries,
 Borrow Pits, and Concrete and Asphalt Plants
 Notice of Intent (NOI) for Maryland General Permit No. 15-MM

DISCHARGE PERMIT NO. 15-MM-0000

NPDES PERMIT NO. MDG490000

SECTION I: Facility Operator Information			
(A) Owner/Operator Name			
(B) Primary Contact Name		Title	
Telephone Number		Email Address	
(C) Mailing Address			
Street			
City		State	ZIP Code
(D) IRS Employer Identification Number (EIN)		(E) Ownership Type - check below	
		<input type="checkbox"/> Private	<input type="checkbox"/> Federal <input type="checkbox"/> State/Local
(F) Worker's Compensation Insurance:	Insurance Company Name		Policy Number
SECTION II: Facility Information			
(A) Name of Facility			
(B) Facility Address (if different than your mailing address)			
Street			
City		State	ZIP Code County
		MD	
For MDE use only:	Facility #	Receipt #	Date:
PCA 13710	Comp Object 5710	Suffix 411	

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Submission of this NOI constitutes notice that the party identified in Section I of this form intends to be authorized by a State/ National Pollutant Discharge Elimination System (NPDES) permit issued for discharges from Mineral Quarries, Borrow Pits, and Concrete and Asphalt Plants identified in Section II of this form. All information requested must be provided in order to be considered for authorization to discharge under this permit. Instructions are provided at the end of this form.

SECTION II (continued): Facility Information

(C) Provide the primary four-digit SIC code that best represents the principal products or activities provided by the facility, and any co-located SIC codes.

Primary SIC: <input style="width: 100%;" type="text"/>	Co-located SICs: <input style="width: 20%;" type="text"/> , <input style="width: 20%;" type="text"/> , <input style="width: 20%;" type="text"/>	Description of your primary industrial activity:
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(D) Latitude (in decimal degrees)	Longitude (in decimal degrees)	(E) <input type="checkbox"/> Check here if you a new discharger. If not a new discharger, provide the previous registration (e.g., 10MM1234)
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(F) Total property size (in acres) **(G)** Check if your facility is inactive and unstaffed.

(H) Identify the 8 digit identifier(s) and name(s) of the receiving water(s).

Identify which of these impairments have been identified for the receiving water(s). (Category 4a, 4b, 4c, or 5 waterbodies)	<input type="checkbox"/> Bacteria <input type="checkbox"/> Biological <input type="checkbox"/> Ions <input type="checkbox"/> Metals <input type="checkbox"/> Nutrients <input type="checkbox"/> PCBs	<input type="checkbox"/> Pesticides <input type="checkbox"/> pH <input type="checkbox"/> Stream Modifications <input type="checkbox"/> Sediments <input type="checkbox"/> Toxics <input type="checkbox"/> Trash
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Check here if any of the receiving water(s) are listed as high quality (Tier 2)

Check if stream is protected for Use III Use IV

Identify your local MS4 jurisdiction or N/A if your facility is not within an MS4:

SECTION III: Stormwater Pollution Prevention Plan (SWPPP) and Monitoring

The 15MM permit does require you to evaluate and implement specific control measures and effluent limits. It requires you to perform quarterly visual monitoring, may include numeric limits, benchmark monitoring and reporting for specific industrial sectors. It requires you to update your SWPPP to encompass the new controls required and provide this in conjunction with your NOI, and then keep an updated SWPPP onsite.

(A) Has the SWPPP been prepared in advance of filing this NOI, as required? Yes No

(B) Stormwater Pollution Prevention Plan (SWPPP) Primary Contact (if different than section I.B)

Name			
Title			
Telephone Number	Email Address		
SWPPP Delivery Method (URL, email, etc.)			

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SECTION IV: Discharge Information

Use the table in the instructions to choose the appropriate benchmarks and effluent limitations that apply for the stormwater discharges at each of the outfalls at your facility and fill out the information in the table below:

Outfalls Information: (Attach a separate list if necessary)

List all of outfalls from your facility. Each outfall must be identified by a unique 3-digit ID (e.g. 001, 002).		Benchmark Table(s)		Effluent Limitations Table(s)	
Outfall ID	001	<input type="checkbox"/> A-1	<input type="checkbox"/> E-2	<input type="checkbox"/> A-3	<input type="checkbox"/> E-5
Latitude (decimal)		<input type="checkbox"/> A-2	<input type="checkbox"/> J-1	<input type="checkbox"/> AD.C-1	<input type="checkbox"/> J-2
Longitude (decimal)		<input type="checkbox"/> C-1	<input type="checkbox"/> L-1	<input type="checkbox"/> C-3	<input type="checkbox"/> J-3
* Identical Outfalls		<input type="checkbox"/> D-1	<input type="checkbox"/> L-2	<input type="checkbox"/> D-2	<input type="checkbox"/> J-4
* Flow (GPD)		<input type="checkbox"/> E-1		<input type="checkbox"/> E-3	<input type="checkbox"/> J-5
				<input type="checkbox"/> E-4	<input type="checkbox"/> J-6
Outfall ID		<input type="checkbox"/> A-1	<input type="checkbox"/> E-2	<input type="checkbox"/> A-3	<input type="checkbox"/> E-5
Latitude (decimal)		<input type="checkbox"/> A-2	<input type="checkbox"/> J-1	<input type="checkbox"/> AD.C-1	<input type="checkbox"/> J-2
Longitude (decimal)		<input type="checkbox"/> C-1	<input type="checkbox"/> L-1	<input type="checkbox"/> C-3	<input type="checkbox"/> J-3
* Identical Outfalls		<input type="checkbox"/> D-1	<input type="checkbox"/> L-2	<input type="checkbox"/> D-2	<input type="checkbox"/> J-4
* Flow (GPD)		<input type="checkbox"/> E-1		<input type="checkbox"/> E-3	<input type="checkbox"/> J-5
				<input type="checkbox"/> E-4	<input type="checkbox"/> J-6
Outfall ID		<input type="checkbox"/> A-1	<input type="checkbox"/> E-2	<input type="checkbox"/> A-3	<input type="checkbox"/> E-5
Latitude (decimal)		<input type="checkbox"/> A-2	<input type="checkbox"/> J-1	<input type="checkbox"/> AD.C-1	<input type="checkbox"/> J-2
Longitude (decimal)		<input type="checkbox"/> C-1	<input type="checkbox"/> L-1	<input type="checkbox"/> C-3	<input type="checkbox"/> J-3
* Identical Outfalls		<input type="checkbox"/> D-1	<input type="checkbox"/> L-2	<input type="checkbox"/> D-2	<input type="checkbox"/> J-4
* Flow (GPD)		<input type="checkbox"/> E-1		<input type="checkbox"/> E-3	<input type="checkbox"/> J-5
				<input type="checkbox"/> E-4	<input type="checkbox"/> J-6
Outfall ID		<input type="checkbox"/> A-1	<input type="checkbox"/> E-2	<input type="checkbox"/> A-3	<input type="checkbox"/> E-5
Latitude (decimal)		<input type="checkbox"/> A-2	<input type="checkbox"/> J-1	<input type="checkbox"/> AD.C-1	<input type="checkbox"/> J-2
Longitude (decimal)		<input type="checkbox"/> C-1	<input type="checkbox"/> L-1	<input type="checkbox"/> C-3	<input type="checkbox"/> J-3
* Identical Outfalls		<input type="checkbox"/> D-1	<input type="checkbox"/> L-2	<input type="checkbox"/> D-2	<input type="checkbox"/> J-4
* Flow (GPD)		<input type="checkbox"/> E-1		<input type="checkbox"/> E-3	<input type="checkbox"/> J-5
				<input type="checkbox"/> E-4	<input type="checkbox"/> J-6
Outfall ID		<input type="checkbox"/> A-1	<input type="checkbox"/> E-2	<input type="checkbox"/> A-3	<input type="checkbox"/> E-5
Latitude (decimal)		<input type="checkbox"/> A-2	<input type="checkbox"/> J-1	<input type="checkbox"/> AD.C-1	<input type="checkbox"/> J-2
Longitude (decimal)		<input type="checkbox"/> C-1	<input type="checkbox"/> L-1	<input type="checkbox"/> C-3	<input type="checkbox"/> J-3
* Identical Outfalls		<input type="checkbox"/> D-1	<input type="checkbox"/> L-2	<input type="checkbox"/> D-2	<input type="checkbox"/> J-4
* Flow (GPD)		<input type="checkbox"/> E-1		<input type="checkbox"/> E-3	<input type="checkbox"/> J-5
				<input type="checkbox"/> E-4	<input type="checkbox"/> J-6
Outfall ID		<input type="checkbox"/> A-1	<input type="checkbox"/> E-2	<input type="checkbox"/> A-3	<input type="checkbox"/> E-5
Latitude (decimal)		<input type="checkbox"/> A-2	<input type="checkbox"/> J-1	<input type="checkbox"/> AD.C-1	<input type="checkbox"/> J-2
Longitude (decimal)		<input type="checkbox"/> C-1	<input type="checkbox"/> L-1	<input type="checkbox"/> C-3	<input type="checkbox"/> J-3
* Identical Outfalls		<input type="checkbox"/> D-1	<input type="checkbox"/> L-2	<input type="checkbox"/> D-2	<input type="checkbox"/> J-4
* Flow (GPD)		<input type="checkbox"/> E-1		<input type="checkbox"/> E-3	<input type="checkbox"/> J-5
				<input type="checkbox"/> E-4	<input type="checkbox"/> J-6

* The Identical Outfall applies to benchmarks, and Flow is required for effluent limits.

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SECTION V: Chemical Additives

Will you use chemical additives? Yes Will you use cationic chemical additives? Yes

The use of any cationic chemical additives, that will mix with stormwater or that might otherwise become part of the effluent discharged, is prohibited without prior approval. To obtain approval, refer submit a signed *Request for Cationic Chemical Additive Form* and refer to the *Use of Treatment Chemicals Guidance Document* for further requirements.

SECTION VI: Permit Fee Selection ⁽¹⁾

All discharges to groundwater ONLY	No Fee	<input type="checkbox"/>
Average Daily Discharge Volume: Less than 1,000 Gallons Per Day	\$110	<input type="checkbox"/>
Average Daily Discharge Volume: 1,000—5,000 Gallons Per Day	\$275	<input type="checkbox"/>
Average Daily Discharge Volume: 5,001—50,000 Gallons Per Day	\$600	<input type="checkbox"/>
Average Daily Discharge Volume: 50,001—100,000 Gallons Per Day	\$1175	<input type="checkbox"/>
Average Daily Discharge Volume: 100,001—250,000 Gallons Per Day	\$1740	<input type="checkbox"/>
Average Daily Discharge Volume: 250,001—1,000,000 Gallons Per Day	\$2300	<input type="checkbox"/>
Average Daily Discharge Volume: Greater than 1,000,000 Gallons Per Day	\$2875	<input type="checkbox"/>

SECTION VII: Certification

To be completed by a responsible corporate officer, proprietor, general partner, principal executive officer, or ranking elected official or their duly authorized representative, as detailed in Part II.C of the permit.

"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."

Signature/Certifier		Date
Signatory Name/Title: Typed or Printed		Telephone Number
NOI Preparer (Complete if NOI was prepared by someone other than the certifier)		
Prepared by:		
Telephone Number	Email Address	
Submit completed form and FEE (payable to Maryland Department of the Environment) to:		
Maryland Department of the Environment, P.O. Box 2057, Baltimore, MD 21203-2057		

(1) Annual fee payments should be submitted with new permit applications only (see instructions in Section VI for details).

MARYLAND DEPARTMENT OF THE ENVIRONMENT
NOI for Permit No. 15-MM, NPDES PERMIT NO. MDG49
FORM INSTRUCTIONS

WHO MUST FILE

The operator of a facility that is requesting to discharge water from mineral quarries, borrow pits, concrete and asphalt plants must submit a Notice of Intent (NOI) to obtain coverage under the National Pollutant Discharge Elimination System (NPDES) General Discharge Permit No. 15-MM. If you have a question about whether you need this permit or any NPDES permit, contact the Maryland Department of the Environment (MDE), Wastewater Permits Program, at 410-537-3323.

Submission of this NOI constitutes notice that the party identified in Section I of this form intends to be authorized by a State/ NPDES permit issued for stormwater discharges from industrial facilities identified in Section II of this form. Authorization to discharge begins upon notification of registration by MDE. The permit is available via MDE's [website](#).

SECTION I: Owner/Operator Information

- (A) Provide the legal name of the person, firm, public organization, or other entity that operates the industrial facility described in Section II of this application. An operator of a facility is a legal entity that controls the operation of the facility.
- (B) Provide the name of the Primary Contact; title of Primary Contact; Primary Contact phone number; Primary Contact e-mail address.
- (C) Provide the primary facility contact mailing address; city; state; zip. All correspondence will be sent to this address.
- (D) Provide the IRS Employer Identification Number (EIN).
- (E) Identify whether the owner/operator is private, federal or state/local government.
- (F) Provide worker's compensation insurance information for the facility identified in this section of the application.

SECTION II: Facility Information

- (A) Provide the name of facility – enter "same" if the name does not differ from the information in [Section I\(A\)](#).
- (B) Provide the physical address; city; state; zip – enter "same" if the address does not differ from the information in Section I(C); Provide the County where the facility is located. If this is a contiguous system spanning multiple counties or cities, list all county or city associated with mailing address.
- (C) Provide the primary and any co-located four-digit Standard Industrial Classification (SIC) code describing the facility. Also provide a short written explanation of the industrial process category (e.g., scrap recycling of automobiles). The current Department of Labor's - Occupation, Safety and Health Administration (OSHA) [website](#) provides a detailed written description of SIC codes.
- (D) Provide latitude and longitude of the discharge/outfalls requesting to be permitted. To obtain coordinates, you may use a GPS to find location within your site. There are internet options that you can also use, such as Google's Tool. A step by step method can be found [here](#). We require the coordinates be in degrees decimal. An example of this for Maryland Department of the Environment at 1800 Washington Blvd, Baltimore, MD would be latitude of 39.276027, longitude of -76.644779.
- (E) Identify if you are a new discharger, or previously covered under another permit. Identify any previously obtained NPDES permit (general or individual) for your stormwater discharges. If applicable, include the permit number. (e.g., 10MM1234 general permit or 12DP1234 individual permit, where 1234 was the unique 4 digit designation for your coverage).
- (F) Provide the total property size at the address, including both the industrial and non-industrial portions of your property (e.g., 2 acres).
- (G) Indicate whether your facility is currently inactive and unstaffed (Part V.A.4 of the permit). Note that if your facility becomes inactive and unstaffed during the permit term, you must notify the Department immediately.
- (H) This section is to verify information about where the stormwater is discharged. Identify the name(s) and 8 digit identifier of the receiving stream or water (e.g., Gwynns Falls 02130905) by using the Department's [Watersheds map](#). Type the address in the search bar, and then place your mouse at your discharge points and click to bring up the watershed name and 8 digit identifier.

To verify if receiving waters are impaired (Category 4a, 4b, 4c, or 5 water bodies), use the Department's [TMDL map](#) and review each of the impairments provided on that website (bacteria, BOD, low pH, metals, nutrients, PCBs, pesticides, sediments, and trash) for your facility's location.

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When looking at each of the map layers, you can use the Legend Button in the upper right corner of the map to identify what each color means.

To verify if the receiving waters are designated as high quality waters, view the Department's [Tier II High Quality Waters](#) map to find your facility's location and use the legend to identify if the stream or catchment are categorized as Tier II.

To verify whether your receiving stream is a Use III or Use IV, use the Department's [Designated Use map](#).

If your facility discharges to a municipal storm sewer system (MS4), you are required to contact the jurisdiction. Local storm sewer systems under NPDES Phase I permits are listed [here](#). If you are uncertain of the MS4 operator, contact your local Department of Public Works.

SECTION III: Stormwater Pollution Prevention Plan (SWPPP) and Monitoring

- (A) Preparation and delivery of the SWPPP is required prior to the submittal of the NOI.
- (B) Indicate how you are providing your SWPPP to the Department, either online with appropriate URL (provide your URL in the space on the form), by email, or other methods provided in the permit. Also, identify the name, telephone number, and email address of the person who will serve as a contact for the Department on issues related to stormwater management at your facility. This person should be able to answer questions related to stormwater discharges, the SWPPP and other issues related to stormwater permit coverage, or have immediate access to individuals with that knowledge.

SECTION IV: Discharge Information

Depending on your industrial activities, your facility may be subject to benchmarks or federal effluent limitation guidelines which include additional effluent limits and monitoring requirements for your facility. Review the summary table below in order to check the appropriate box(es) in the table in section IV where you must provide information for each of the outfalls on site. If there are any substantially identical outfalls, indicate it in the table by listing the outfall ID(s) in the appropriate box. For Outfalls subject to limits, list the Flow in Gallons Per Day (GPD).

Discharge Type	Table*	Benchmarks	Effluent Limitations
Sector A3 Storage and Handling Facilities (SIC 2411)	A-1	✓	
Sector A4 Natural Woodwaste Facilities (SIC 2499)	A-2	✓	
Wetting of logs at wet deck storage areas	A-3		✓
Sector C1 Composting Facilities (SIC 2875)	C-1	✓	
Phosphate fertilizer manufacturing (SIC 2874)	C-3		✓
Sector D1 Asphalt Paving and Roofing Materials (SIC 2951, 2952)	D-1	✓	
Asphalt Emulsion Facilities	D-2		✓
Sector E1 Clay Product Manufacturers (SIC 3251-3259, 3261-3269)	E-1	✓	
Sector E2 Concrete Gypsum Product Manufacturers (SIC 3271-3275)	E-2	✓	
Cement Manufacturing Storage Pile Run-off	E-3		✓
Concrete Washout from Concrete Mixer Trucks, Moulds, or Equipment	E-4		✓
Concrete Plant Vehicle Wash Water Only	E-5		✓
Sector J1 Sand and Gravel Mining (SIC 1442, 1446) and Stone and Minerals (SIC 1411, 1422-1429, 1481, 1499)	J-1	✓	
Dewatering and/or process water discharges at crushed or broken limestone mining facilities (SIC 1422)	J-2		✓
Dewatering discharges at crushed stone mining facilities (SIC 1423-1429)	J-3		✓
Dewatering discharges at construction sand and gravel mining facilities and clay mines (SIC 1442, 1455-1459)	J-4		✓
Dewatering discharges at industrial sand mining facilities (SIC 1446)	J-5		✓
Vehicle washing at Mining Facility	J-6		✓
Sector L4 Concrete or Asphalt Recycling	L-1, L-2	✓	
Wastewater from Hydro-blasting Operations	AD.C-1		✓

* Please see the referenced tables in Appendix D of the permit.

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FORM INSTRUCTIONS

SECTION V: Chemical Additives

Confirm whether any Chemical Additives are used in the treatment of water, and whether you cationic chemical additives (Part III.B.1.b.v) which you are requesting approval for use (Part I.E.5). The use of polymers, flocculants, or other treatment chemicals, including use of cationic treatment chemicals (Part III.B.1.b.v), require that you include documentation in your SWPPP of the appropriate controls and implementation procedures designed to ensure that your use of treatment chemicals will not lead to a violation of water quality standards.

SECTION VI: Permit Fee

Annual fee payments should be submitted only with new permit applications (NOIs), not required for permit renewals or modifications. However, permit fee category box must be checked off based on the actual flow and you may be billed for any difference in annual fee. Indicate the amount sent with this NOI form (if applicable). Mineral mines, quarries, and borrow pits which discharge mining wastewater, process generated wastewater, and storm water to ground water only are exempt from the permit fee. The permit fee for discharges from mineral quarries, borrow pits, and concrete and asphalt plants stormwater is based on the total volume of effluent discharged from the facility. The permittee shall pay an annual permit fee. The annual rate and application fee may change over time, so you are encouraged to check COMAR 26.08.04.09-1(F) at the time of your application.

SECTION VII: Certification

Signatures and Certifications are detailed in the permit Part II.C. Individuals who discharge to waters of the State without an individual State or general State/NPDES discharge permit, are in violation of the Federal Clean Water Act and of the Environment Article, Annotated Code of Maryland, and may be subject to penalties. An original signature and date is required.

A completed form will not be processed until the fee has been paid-in-full and your SWPPP has been received.

HOW TO SUBMIT:

Send the completed NOI and fee (see permit) to **Maryland Department of the Environment, P.O. Box 2057, Baltimore, MD 21203-2057** and provide the SWPPP in one of the allowed formats (Part II.A.3.b of the permit). You must ensure that the form is completely filled out and payment is enclosed, and the SWPPP follows all permit requirements and is successfully provided to the Department. Your permit application will be handled as efficiently as possible. However, if you fail to provide us with the information we request, we will be unable to process your registration for the permit.