DISCHARGE PERMIT NO. 21-SE NPDES PERMIT NO. MDG52

Submission of this Notice of Intent (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 seafood processing facility identified in Section II of this form.

* Instructions at end of form. Please answer all questions; incomplete requests will be returned.

SECTION I: Owner/Operator Information								
(A) Company Name								
(B) Facility Contact Nam	е			Title				
Telephone Number				Email Addres	SS			
(C) Mailing Address								
City	County			State	ZIP Coo	ZIP Code		
(D) Federal ID No				(E) Status of Facility (check)				
				Private	Federa		State/Local	
(E) Warker's Comp Insurance			me			Poli	cy Number	
(F) Worker's Comp Insurance								
SECTION II: Facility Information								
(G) Name of Facility								
(H) Location (Address)								
City		State		ZIP Code	County			
(I) Location (Coordinates)								
Latitude:			Longitude:					
(J) Is this a new discharg	e or a facility	with exis	sting o	coverage unde	er the 11-S	SE?		
This is a new discharge without previous permit coverage.			I had permit coverage under the 11-SE or another relevant permit. My registration number was:					

MARYLAND DEPARTMENT OF THE ENVIRONMENT GENERAL PERMIT for DISCHARGES from SEAFOOD PROCESSING FACILITIES NOI for Permit No. 21-SE

* Instructions at end of form. Please answer all questions; incomplete requests will be returned.							
SECTION II (continued): Facility Information (K) 8-digit watershed basin code(s) and name(s): <u>https://mdewwp.page.link/MDWatershedMap</u>)							
(K) 6-digit watersned basin code(s) and name(s). <u>mups.//indewwp.page.inik/ind/watersnediwap</u>)							
SECTION III: Discharge Information							
(L) Select the facility(s) type for which you are requesting coverage under this permit:			(M) Identify average pounds of material processed daily and in what season				
🗌 Handpi	cked Blue Crab, Existing Sourc	es (EHB)					
🗌 Handpi	cked Blue Crab, New Sources	(NHB)					
🗌 Mechar	nized Blue Crab, Existing Sourc	es (EMB)					
Mechar	nized Blue Crab, New Sources	(NMB)					
Shucke	d Oyster Processing, Existing F	Facilities (EO)					
Shucke	d Oyster Processing, New Sou	rces (NO)					
Steame	ed and Canned Oyster Processi	ing, New Sour	ces (SO)				
Hand-S	Shucked Clam Processing, New	Sources (HC)				
Scallop	Processing, New Sources (SP)					
Non-Br	eaded Shrimp Processing, New	/ Sources (NB)				
Breaded Shrimp Processing, New Sources (BS)							
🗌 Tuna P	rocessing, New Sources (TP)						
Conver	tional Bottom Fish Processing,	(CB)					
Mechanized Bottom Fish Processing, New Sources (MB)							
Farm-Raised Catfish Processing (FC)							
Herring Processing, New Sources (HP)							
Fish Meal (FM)							
Other Seafood Processors (Other)							
(N) Date of Start of Operation (DD/MM/YYYY)							
(O) For each facility, provide a description (and coordinates if possible) of each outfall location, type of discharge, estimated flow (in gallons per day), and receiving water							
Outfall #	Location	Type(s)	Flow	Receiving water			

MARYLAND DEPARTMENT OF THE ENVIRONMENT GENERAL PERMIT for DISCHARGES from SEAFOOD PROCESSING FACILITIES NOI for Permit No. 21-SE

* Instructions at end of form. Please answer all	questions; incomplete requests will be returned.

(O) Conti	nued					
Outfall #	Location	Type(s)	Flo	Flow Receivir		g water
SECTION	IV: Permit Fee					
	erage Daily Discharge Volume (Gal	lons Per Day)		(Check initial NOI fee	submitted
	0< 1,000				\$120	
	1,000–5,000				\$440	
	5,001-50,000				\$1,050	
50,001-100,000 \$2,100						
100,001-500,000 \$3,200						
SECTION	V: Additional Information					
Verify site map is included						
Verify a Stormwater Pollution Prevention Plan (SWPPP) or No Exposure form is included						
Check this box if the discharge is to an alternative to surface water (Permit Part III.A.3)						
Identify the alternative discharge:						
Groundwater						
	Groundw					
	Identify the methods					
	Identify the method:					
	Offsite D					
	Sanitary	Sewer				

SECTION VI: Certification

To be completed by a responsible corporate officer, proprietor, general partner, principal executive officer or ranking elected official, as detailed in 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."

Facility Representative S	Signature		Date			
Facility Representative Name/Title: Typed or Printed						
Make check payable to: Maryland Department of the Environment						
Mail payment to: Maryland Department of the Environment P.O. Box 2057 Baltimore, MD 21203-2057						
For MDE use only:	Facility #	Rec	eipt #	Date:		
PCA 13710 Comp Object 5710 Suffix 411						

Please answer all questions. Incomplete requests will be returned for completion.

WHO MUST FILE

The operator of a facility that is requesting to discharge from seafood processing facilities must submit a notice of intent (NOI) to obtain coverage under the NPDES General Discharge Permit No. 21-SE. 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/ National Pollutant Discharge Elimination System (NPDES) permit issued for discharges from seafood processing facilities identified in Section II of this form. Authorization to discharge begins upon notification of registration by MDE. The permit is available for download via MDE's website at https://mdewwp.page.link/SEGP.

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 and is requesting coverage under the MDE 21-SE general discharge permit.
- (B) Provide the name of the Primary Contact; title of Primary Contact; Primary Contact phone number; Primary Contact e-mail address.
- (C) Provide company mailing address; city; state; zip; and the county.
- (D) Provide the federal identification number (this is necessary if a refund is due to the facility)
- (E) Identify whether the owner/operator is private, federal or state/local.
- (F) Workers compensation insurance information for the facility identified in Section II of this application.

SECTION II: Facility Information

- (G) Provide the name of facility enter "same" if the name does not differ from the information in <u>Section I(A)</u>.
- (H) Provide the physical address, city, state, zip for the facility enter "same" if the address does not differ from the information in <u>Section I(C)</u>; Provide the County where the facility is located. If this is a contiguous system spanning multiple counties or cities, list all counties and cities.
- (I) Provide a set of coordinates for the facility. These can be from google or some other source. They can be for any major point in the facility (e.g. A front office building, front entrance of the site, processing building, etc).
- (J) Identify whether you have any other relevant permit coverage (most likely the 11-SE). If you did not have permit coverage or this is a new facility, check the left box. Identify any previously obtained, applicable NPDES permit (individual or general) and include the permit number. (e.g., 11SEXXXX, where XXXX is the unique 4 digit registration number).
- (K) Identify all 8-digit watershed basin codes and names that the facility discharges to. (Watershed Basin information can be found here: https://mdewin64.mde.state.md.us/WSA/TMDLWaterSheds/index.html)

- (L) Select the facility type for which you are requesting coverage under this general permit. If more than one type of operation is located on the property, select multiple processes. To determine if you are considered a New or Existing source, please refer to Appendix C: Effluent Limitation Tables.
- (M) Provide the average numeric quantity of material processed daily in pounds for each facility and in what season your facility processes each type.
- (N) Provide the year the facility was built. If it was significantly upgraded after such date, provide that year as well.
- (O) For each facility:
 - 1) Description of outfall location e.g., white pvc pipe directly beneath chiller house from bulkhead, etc. Also provide the latitude and longitude of the discharge/outfalls requesting to be permitted.
 - 2) *Type of discharge -* use the abbreviations listed in (L) at the end of each product type to identify the type of wastewater being discharged.
 - 3) *Estimated flow -* provide the average flow in gallons per day for each discharge
 - 4) Receiving Water Indicate if the discharge is directly to groundwater or surface waters. Groundwater includes injection or ground saturation. If to a surface water, indicate the name of the closest receiving stream (i.e., Back Creek Bay).

SECTION IV: Permit Fee

Indicate the amount sent with this NOI form. The permit fee is based on the total flow volume of effluent discharged from the facility divided by the total number of days discharged provided in units of gallons per day (e.g., three days of discharge totaling 150,000 gallons equals 50,000 gpd).

Average Daily Discharge Volume (Gallons Per Day)	Initial fee	Fee for subsequent years
0< 1,000	\$120	
1,000–5,000	\$440	
5,001-50,000	\$1,050	See <u>COMAR</u>
50,001-100,000	\$2,100	<u>26.08.04.09-1</u>
100,001-500,000	\$3,200	

SECTION V: Additional Information

Per Part II - Section A.2 of the permit, a site map is required with submission of application.

Per Part II – Section A.3 of the permit, a Stormwater Pollution Prevention Plan (SWPPP) is required with submission of application.

Per Part I.F of the permit, you may submit a completed No Exposure Certification form with your NOI in lieu of a SWPPP if you meet the requirements.

Per Part III.A.3 of the permit, you may discharge via an alternative method. Options include Ground water (i.e., drain field, seepage pit, overland flow, infiltration basin, land application, other MDE approved methods), Offsite disposal, or Sanitary Sewer.

SECTION VI: Certification

Signatures and Certifications are detailed in the permit. Individuals who discharge to waters of the State without an individual State or State/NPDES discharge permit, are in violation of the Federal Act and of the Environment Article, <u>Annotated Code of Maryland</u>, 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.

HOW TO SUBMIT:

Send the completed NOI, site map and fee to MDE via the address provided. You must ensure that the form is completely filled out and payment is enclosed. 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.