



NOTICE OF INTENT TO COMPLY WITH THE MAINE MULTI-SECTOR GENERAL PERMIT FOR STORMWATER DISCHARGES ASSOCIATED WITH INDUSTRIAL ACTIVITY

Notice of Intent (NOI) submission constitutes the expressed intent of the entity in Section A (of this form) and authorizes the discharge of stormwater associated with industrial activity to waters of the State (excluding groundwater), from the facility/site identified in Section B (of this form), under Maine's Multi-sector General Permit (MSGP). This also certifies that the responsible official understands and meets the eligibility conditions of Part I of the MSGP, agrees to comply with all applicable terms and conditions of the MSGP, and understands that continued authorization under the MSGP is contingent on maintaining eligibility for coverage. In order to be granted coverage the information on this form must be correct and up-to-date. Please send the completed form with any corrections or updates to the Maine Department of Environmental Protection, 17 State House Station, Augusta, ME 04333-0017. Be sure to include a check for \$317.00 made payable to: Treasurer, State of Maine. Please read the instructions on the back prior to completing the NOI form.

A. Company Information – Legal Name & Billing Address

| | | | | | | | |
|--|--|-------|--|-----------------------|--|----------------------------------|--|
| Permit Owner Legal Name | | | | | ME State Charter Number (if business): | | |
| Billing Address | | | | | | | |
| City/Town | | State | | Zip Code: | | | |
| Daytime Phone: (with area code) | | | | | | | |
| E-mail: | | | | | | | |
| The 4-digit Standard Industrial Classification (SIC) Code(s) or the 2-letter Activity Code(s) that best represent the industrial activity at the facility or any multiple sector-specific industrial activities. | | | | SIC# or Activity Code | | Additional SIC# or Activity Code | |

| B. Facility/Site Physical Location | C. Contact Person Information for this NOI |
|------------------------------------|--|
|------------------------------------|--|

| | | | | | | | | | | |
|--|-----|-------|----|-----------|-----------------------|--|-------|--|----------|--|
| Facility/Site Name | | | | | Permit Contact Person | | | | | |
| Physical Address | | | | | Title | | | | | |
| City/Town | | State | | Zip Code: | Contact Address | | | | | |
| Daytime Phone: | | | | | City/Town | | State | | Zip Code | |
| Title, Right, or Interest (to this site location): | Yes | | No | | Daytime Phone: | | | | | |
| Email: | | | | | Email: | | | | | |



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| | | | |
|--|--|--|--|
| Facility Latitude: (if known) | | Facility Longitude: (if known) | |
| Name(s) of the receiving waters: | | The facility discharges stormwater to a municipal separate stormwater sewer system (MS4). <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Is the water considered impaired? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, list category: | | If Yes, name(s) of MS4 operator: | |

D. Permit Information

Applicable Sector(s) of industrial activity, as designated in Part I(B)(1) and Part I(B)(2) of the MSGP, that include associated discharges that you seek to have covered under this permit (check all that apply):

- | | | | | | | | |
|-----------------------------------|-----------------------------------|------------------------------------|------------------------------------|------------------------------------|------------------------------------|-----------------------------------|-----------------------------------|
| <input type="checkbox"/> Sector A | <input type="checkbox"/> Sector B | <input type="checkbox"/> Sector C | <input type="checkbox"/> Sector D | <input type="checkbox"/> Sector E | <input type="checkbox"/> Sector F | <input type="checkbox"/> Sector G | <input type="checkbox"/> Sector H |
| <input type="checkbox"/> Sector I | <input type="checkbox"/> Sector J | <input type="checkbox"/> Sector K | <input type="checkbox"/> Sector L | <input type="checkbox"/> Sector M | <input type="checkbox"/> Sector N | <input type="checkbox"/> Sector O | <input type="checkbox"/> Sector P |
| <input type="checkbox"/> Sector Q | <input type="checkbox"/> Sector R | <input type="checkbox"/> Sector S | <input type="checkbox"/> Sector T | <input type="checkbox"/> Sector U | <input type="checkbox"/> Sector V | <input type="checkbox"/> Sector W | <input type="checkbox"/> Sector X |
| <input type="checkbox"/> Sector Y | <input type="checkbox"/> Sector Z | <input type="checkbox"/> Sector AA | <input type="checkbox"/> Sector AB | <input type="checkbox"/> Sector AC | <input type="checkbox"/> Sector AD | | |

E. Certification of Responsible Official

I certify under penalty of law that I have personally examined the information submitted in this document and all attachments thereto and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the information is true, accurate, and complete. By my signature as a responsible official for the entity or individual identified in Section A of this NOI, I certify under penalty of law that that I am the operator of the facility, and have Title, Right or Interest, as indicated in Section B.

Printed Name:

| | |
|-------------------|--------------|
| Title: | Date: |
| Signature: | |

OFFICE USE ONLY

| | | | | |
|---|--|-----------|--|--------------------------|
| In Good Standing <input type="checkbox"/> Yes <input type="checkbox"/> No | | Permit ID | | Acct. # 014-06A-1751-142 |
|---|--|-----------|--|--------------------------|



NOTICE OF INTENT TO COMPLY WITH THE MAINE MULTI-SECTOR GENERAL PERMIT FOR STORMWATER DISCHARGES ASSOCIATED WITH INDUSTRIAL ACTIVITY

Instructions for Completing the NOI Form

To complete and correct this form, type or print, in the appropriate areas only and use uppercase (ALL CAPS). Answer all applicable questions, keep a copy for your records, and mail the original signed completed form with a check for \$317.00 made payable to "Treasurer, State of Maine" to the: **Maine Department of Environmental Protection, 17 State House Station, Augusta, ME 04333-0017.**

Section A: Company Information – Legal Name & Business Address (Parent Company Information)

1. Enter the **LEGAL Company or Corporate Name** (as registered with the Secretary of State, for corporations) of the permit holder. The Legal entity is defined as:
 - a. The full legal name of the person, partnership, co-partnership, firm, company, corporation, association, trust, estate, governmental entity or other legal entity that owns/operates the facility or site. This may be the given name of an individual (as listed on their social security card) or a registered legal entity (please provide Maine State Charter number). The name of the operator in this section may or may not be the same as the name of the facility that will be required in Section B of the NOI form.
 - b. Legal entities registered to conduct business in Maine, whether for profit or not for profit, have a Charter Number issued to a particular name by the State of Maine, Department of the Secretary of State, Bureau of Corporations, Elections and Commissions (note: federal and municipal owned entities are not issued a Charter Number). The registration number must be provided. In the absence of such a registration number, the NOI must be filed in the name of an individual whether or not they are conducting business under an unregistered assumed name.
2. The billing address of the identified facility or operator will be the street address or P.O. Box, city/town, state and zip code to which annual bills will be delivered. All correspondence regarding the permit will be sent to this address, not the facility address in Section B of the NOI form.
3. Enter your company's Standard Industrial Classification Code(s) if known, which best describes the industrial activity conducted; products or services provided (See **Table 2. Sectors of Industrial Activity Covered by this General Permit**). The telephone number listed for the facility operator must be a number at which calls are regularly received during normal business hours (8:00 AM to 5:00 PM).

B. Facility/Site Physical Location

1. Enter the name of the **Facility/Site** along with the **Physical Address** or location of the site (city/town, state and zip code). Include associated telephone number, including area code. If the physical name & address of the site is the same as the Company Information, write "same as company" in the Facility/Site section.
2. Extra spaces are provided for separate facility/site phone numbers for field offices, etc., and e-mail contact information where appropriate. Please include area codes with all phone numbers.
3. Indicate whether or not the legal entity in **Section A** holds **Title, Right or Interest** in the facility conducting the industrial activity covered by this NOI (Check **Yes** or **No**). If **Yes** is checked by signing the certification in **Section E** the responsible official certifies that there is **Title Right or Interest** held by the legal entity in **Section A** for the facility and the industrial stormwater discharge noted in this NOI.



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4. Enter the **latitude and longitude** (if known) for the approximate center of the facility/site in **degrees/minutes/seconds or decimal degrees**. Latitude and longitude may be obtained by using a GPS unit, or by searching for your facility's address on several commercial map sites on the internet. Maine sites are typically between the latitudes of 43°4'N to 47°28'N and the longitudes of 66°57'W to 71°7'W.
5. Indicate whether the facility/site discharges stormwater either directly or indirectly to a receiving water(s) and/or a municipal separate storm sewer system or (MS4). Please use the **Yes/No** checkbox and enter the name(s) of the closest receiving water(s) which include but are not limited to a river, stream, brook, pond, lake, wetland, coastal wetland, ocean; i.e., unnamed tributary of Cold Brook or it may flow into an unnamed wetland. A MS4 is defined as a conveyance or system of conveyances (including roads with drainage systems or ditches, municipal streets, catch basins, curbs, gutters, ditches, human-made channels, or storm drains) that are owned or operated by a state, municipality, county, district, association or other public entity and is designed or used for collecting or conveying stormwater.

C. Contact Information for this Permit

Enter the name of the **Contact Person** for this facility/site, their title, mailing address (street or P.O. Box, city, state, zip code), telephone number with the area code, and an e-mail address. If this contact is your consultant please supply an e-mail address as well. If your contact for this permit uses the same address as the company, parent company or facility/site, please enter "same as company", etc.

D. Permit Information

1. Check **all of the boxes that apply to the sectors of industrial activity**, as designated in **Table 2. Sectors of Industrial Activity Covered by This Permit**, that you seek to have covered by this permit.
2. If this facility was covered by a previous EPA Multi-Sector General Permit, enter the EPA assigned number for the facility.

E. Certification Statement

Legibly print the name and title of the responsible official. Have the official sign and date the application.

A **Responsible Official** must be one of the following:

- ✓ For a corporation: a responsible corporate officer
- ✓ For sole proprietorship or a partnership: the proprietor or general partner
- ✓ For a municipal, State, Federal, or other public facility: either a principal executive or ranking elected official.

If you have questions concerning this form, please contact your regional stormwater inspector.

Portland: Alison Moody 207-615-8936; Augusta: David Ladd 207-215-7168;

Bangor: Jana Wood 207-215-7869