

IV. PHYSICAL LOCATION of FACILITY/SITE (continued):

Directions to site from nearest Highway or Town:

V. REGULATORY STATUS: (provide information for all that apply to your site)

1. NPDES Permit Number (other than Sand and Gravel Permit Number) _____
2. State Waste Discharge Permit Number _____
3. Air Notice of Construction, Permit or Order, Agency _____
4. City or County Permit Number _____
5. Department of Natural Resources Reclamation Permit Number _____
6. UIC Registration Number _____

GROUND WATER PROTECTION DESIGNATIONS

- Is site within a *Critical Aquifer Recharge Area*? YES NO
 Is site within a designated *Wellhead Protection Area*? YES NO
 Is site within a *Sole Source Aquifer*? YES NO

VI. SITE MAP

The Applicant is required to submit a copy of the facility site map from the Stormwater Pollution Prevention Plan or the Monitoring Plan. The map must show the **number** of water discharges and the **type(s)** of discharge. Refer to Application Instructions for an example.

Do you discharge to a surface water body? NO YES If YES, name of surface water body.

Latitude _____ Longitude _____ (In decimal format)

VII. SITE ACTIVITIES INFORMATION: (include ALL activities, current and planned, at the site)

In order for Ecology to properly calculate permit fees, the applicant must complete the following section. Refer to application instructions for appropriate production codes.

<u>Activity</u>	<u>NAICS Code (s)</u>	<u>Production Amount</u>
<input type="checkbox"/> Mining	_____	_____
<input type="checkbox"/> Screening	NA	NA
<input type="checkbox"/> Aggregate Crushing	NA	NA
<input type="checkbox"/> Concrete/ Asphalt Crushing	<u>212399</u>	_____
<input type="checkbox"/> Aggregate Washing	NA	NA
<input type="checkbox"/> Stockpile(s)	_____	NA
<input type="checkbox"/> Asphalt Batch Plant	<u>324121</u>	2006 _____ 2007 _____ 2008 _____
<input type="checkbox"/> Concrete Batch Plant	<u>327320</u>	2006 _____ 2007 _____ 2008 _____
<input type="checkbox"/> Concrete Products	<u>327332; 327390; 327999</u>	2006 _____ 2007 _____ 2008 _____

Additional activities conducted on site

- Do you use chemical settling agents (flocculants, coagulants, etc.)? If Yes, attach **MSDS**
- Truck Washout
- Wheel wash
- Vehicle Washing (exterior)
- Oil/ water separator
- Other (describe) _____

VIII. FACILITY ACTIVITY STATUS

1. What will your facility's status be on February 4, 2010?

- Active Inactive (no activity **or** only removal of material from existing stockpiles)

2. Does the facility operate year round? Yes **NO**

If **NO**, circle all months of operation for **each NAICS Code**:

Aggregate Mining, Screening, Crushing, and/ or Washing

NAICS Codes: 113110; 113310; 212311; 212313; 212319; 212321; 212322; 212324; 212325; 212319; 212399

Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec

Hot Mix Asphalt Batch Plant - NAICS Code: 324121

Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec

Concrete Batch Plant/ Products - NAICS Codes: 327320; 327332; 327390; 327999

Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec

Other NAICS Codes: _____

Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec

IX. PLAN PREPARATION AND REVIEW:

Required Plans

Are the following required plans up to date and complete?

- | | | |
|--|------------------------------|-----------------------------|
| Stormwater Pollution Prevention Plan | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Monitoring Plan including map of monitoring points | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Spill Control Plan | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Erosion and Sediment Control Plan | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

X. CERTIFICATION BY PERMITTEE*:

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

_____	_____
Printed Name of Person Signing Below	Title
_____	_____
Signature of Applicant	Date Application Signed

- * NOTE: Federal regulations require this application to be signed as follows:**
- A.) For corporation, by a principal executive officer of at least the level of vice president;**
 - B.) For a partnership or sole proprietorship, by a general partner or the proprietor, respectively;**
 - C.) For a municipality, State, Federal, or other public facility, by either a principal executive officer or ranking elected official.**

If you require this document in an alternate format, please contact the Water Quality Program at 360-407-6401(Voice) or 711 or 1-800-833-6388 (TTY).