



Division of Water Resources
National Pollutant Discharge Elimination System (NPDES)

Application for Coverage Under General Permit

NCG530000

Seafood packing, fish packing and fish farms

FOR AGENCY USE ONLY								
Date Received								
Year			Month			Day		
Certificate of Coverage								
N	C	G	5	3				
Check #					Amount			
Assigned To:								

NOTICE OF INTENT

Required by [15A NCAC 02H .0127\(d\)](#); term definition see [15A NCAC 02H .0103\(19\)](#)

(Please print or type)

1) Mailing address of applicant:

Company Name _____
 Owner Name _____
 Street Address _____
 City _____ State _____ Zip Code _____
 Telephone # _____ Fax # _____
 Cell # _____ Email _____

2) Location of facility producing discharge:

Facility Name _____
 Facility Contact _____
 Street Address _____
 City _____ State _____ Zip Code _____
 County _____
 Telephone # _____ Fax # _____

3) This Application applies to which of the following activities:

- [Seafood packing](#) / rinsing
- Fish farms [aquaculture]

Describe the activities to be permitted in detail:

4) Description of Discharge: [Required by [15A NCAC 02H .0105\(c\)\(1\)](#)]

a. Volume of discharge (in GPD): _____

b. The discharge is: Continuous Intermittent

If the discharge is intermittent, describe when the discharge occurs: _____

c. Number of discharge points (outfalls): _____

- d. What percentage of the discharge is treated? _____
- e. Describe the type of wastewater being discharged (including any known pollutants present in the discharge):

Describe the nature of the business applying for coverage under the [General Permit](#):

- f. Identify the treatment methods in use at the facility (*check all that apply*): None
 Settling Ponds Screens* Floor Screens* Treatment Equipment*

Other (describe): _____

***If checked, attach a description of all component specifications (design volume, retention time, surface area, etc.). Describe existing treatment facilities in detail and provide design criteria or operational data (including calculations) showing the facility can meet the requirements for coverage under the General Permit, as required by [15A NCAC 02H .0127](#).**

- g. Describe the discharge location (bay, stream, etc.): _____
- h. A USGS topographic map (1:24000 scale) identifying the exact discharge location(s) must be submitted with this application. Identify all discharge points (outfalls) on this site map.
- i. Is the discharge directly to the receiving water? Yes No – If no, mark the path taken by the discharge from the outfall to the receiving stream on the site map (including the pathway of any storm sewers, ditches, canals, etc.).
- j. Name of receiving water(s): _____

5) Alternatives to Direct Discharge:

[Evaluation required by [G.S. § 143-215.1\(b\)\(5\)\(a\)](#) and [15A NCAC 02H .0105\(c\)\(2\)](#)]

Address the feasibility of implementing each of the following non-discharge alternatives:

- a. Connection to a Regional Sewer Collection System - If the facility is existing and currently discharges to a [POTW](#), when will connection not be allowed?
- b. Subsurface disposal (including nitrification field, infiltration gallery, injection wells, etc.)
- c. Spray irrigation

The alternatives to discharge analysis should include boring logs and/or other information indicating that a subsurface system is neither feasible nor practical as well as written evidence indicating that connection to a POTW is not an option. It should also include a present value of costs analysis as outlined in the Division's [Engineering Alternatives Analysis \(EAA\) Guidance Document](#).

Additional Application Requirements:

For new or proposed discharges, the following information must be included in triplicate with this application or it will be returned as incomplete; per [15A NCAC 02H .0105\(c\)](#)

- a. USGS topographic map (or photocopied portion thereof) with discharge location clearly indicated. If the discharge is not directly to a stream, the pathway to the receiving stream must be clearly indicated.
- b. If this application is being submitted by a consulting engineer (or engineering firm), include documentation from the applicant showing that the engineer (or firm) submitting this application has been designated an Authorized Representative of the applicant; per [15A NCAC 02H .0138\(b\)\(1\)](#).
- c. Final plans for the treatment system (if applicable). The plans must be signed and sealed by a North Carolina registered [Professional Engineer](#) and stamped "FINAL DESIGN - Not Released for Construction;" per [15A NCAC 02H .0139](#).
- d. Final specifications for all major treatment system components (if applicable). The specifications must be signed and sealed by a North Carolina registered [Professional Engineer](#) and shall include a narrative description of the treatment system to be constructed; per [15A NCAC 02H .0139](#).

I certify that I am familiar with the information contained in this application and that to the best of my knowledge and belief such information is true, complete, and accurate.

Printed Name of Person Signing: _____

Title: _____

(Please review [15A NCAC 02H .0106\(e\)](#) for authorized signing officials)

(Signature of Applicant)

(Date Signed)

North Carolina General Statute [§ 143-215.6B](#) provides that:

Any person who knowingly makes any false statement representation, or certification in any application, record, report, plan, or other document filed or required to be maintained under this Article or a rule implementing this Article; or who knowingly makes a false statement of a material fact in a rulemaking proceeding or contested case under this Article; or who falsifies, tampers with, or knowingly renders inaccurate any recording or monitoring device or method required to be operated or maintained under this Article or rules of the Commission implementing this Article, shall be guilty of a Class 2 misdemeanor which may include a fine not to exceed ten thousand dollars (\$10,000). [18 U.S.C. Section 1001](#) provides a punishment by a fine or imprisonment not more than 5 years, or both, for a similar offense.

Design of treatment facilities must comply with requirements in [15A NCAC 02H .0138](#).



Mail this application and one copy of the entire package to:

NC DENR / DWR / Water Quality Permitting Section
1617 Mail Service Center
Raleigh, North Carolina 27699-1617
Attn: Charles Weaver