



**State of Georgia Department of Natural
Resources Environmental Protection
Division**

**NOTICE OF INTENT
For Coverage Under NPDES General Permit GAG640000
General Permit To Discharge Filter Backwash
Associated With Water Treatment Plant with Sludge Handling Capability**

NOI for: Existing New Change of Information

For EPD Use Only
Assigned Permit No. _____

SECTION I. CONTACT & FACILITY INFORMATION

Facility Type of Ownership: State Government Municipal or Water District Federal Facility Tribal Facility

Permittee Organization Formal Name:

Associated NPDES ID Number:

Associated NPDES ID Number Reason:

1. Effluent Trade Partner (ETP)
2. Associated Permit Record (APR)
3. Switched To An Individual Permit (SIP)
4. Switched To A General Permit (SGP)

Facility Site Name:

Facility Site Address:

Facility Site City: Facility Site State: Facility Site Zip Code: Facility Site County:

Is the facility located on Indian Lands? *yes* or *no* If yes, what is tribal land indicator:

Facility Site Latitude/Longitude (ex. 34.543, -84.804):

Facility Contact Affiliation Type: Owner Operator Main Contact

Facility Contact Name (first & last): Facility Contact Title:

Facility Contact E-mail Address: Facility Contact Phone:

Permittee Mailing Address:

Permittee City: Permittee State: Permittee Zip Code: Permittee County:

NAICS Codes: NAICS Code Primary Indicator:

SECTION II. OPERATOR INFORMATION

Facility Organization Formal Name:

Is operator also the owner?: *yes* or *no*

Status:
 Federal State Private Public Other

E-mail Address: Phone:

SECTION III. FACILITY DESCRIPTION

Section III. Table No. 1 - Provide the name and permit nos. for all permits issued to this facility

Name of Permit	Permit No.
1. Does your facility require any additional permits not listed above? <input type="checkbox"/> Yes <input type="checkbox"/> No	1.a. If yes, what are they and what is the timeframe to obtain them?
2. Provide description of water treatment process and how filter backwash is produced (attach a process flow chart):	
3. Frequency of Filter Backwashing: Volume of water used during backwashing: Frequency of basin washdown: Volume of the sludge handling facility: Volume of water user during washdown:	4. Method of Sludge handling treatment:
5. Provide a description of how sludge is disposed of:	6. Is sludge disposal area located in floodplain or subject to flooding? <input type="checkbox"/> Yes <input type="checkbox"/> No
7. Design Flow of Facility (average daily flow):	8. Anticipated design effluent TSS and pH: TSS: pH:
9. Percent TSS removed (actual): %	10. Population served: <input type="checkbox"/> 1-199 <input type="checkbox"/> 1,000-4,999 <input type="checkbox"/> 200-499 <input type="checkbox"/> 5,000-9,999 <input type="checkbox"/> 500-999 <input type="checkbox"/> 10,000 or more
10. How much volume is treated before discharging? %	11. Is any sludge ultimately returned to a waterway? <input type="checkbox"/> Yes <input type="checkbox"/> No
12. Total Actual Average Flow (mgd):	13. Total Maximum Flow (mgd):

SECTION IV. OUTFALL IDENTIFICATION AND WATER QUALITY

Outfall ID	Permitted Feature Identifier	Permitted Feature Type	Permitted Feature Actual Average Flow (MGD)	Permitted Feature Latitude/Longitude (ex. 34.5364, -84.8045)	Receiving Waterbody For Permitted Feature

SECTION V. CERTIFICATION

Certification: 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 gathered and evaluated the information submitted. Based upon 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.

Printed Name of Applicant:	Date:
Signature of Applicant:	Title:

Completed NOI forms must be sent to the following address:
 Georgia Environmental Protection Division
 Wastewater Regulatory Program
 2 Martin Luther King Jr. Drive, Suite 1152 E
 Atlanta, Georgia 30334