



State of Georgia
Department of Natural Resources
Environmental Protection Division
Watershed Protection Branch
Wastewater Regulatory Program

NOTICE OF INTENT (NOI) FOR COVERAGE UNDER
TIER 1 OPERATION
FOR LAND DISPOSAL OF DOMESTIC SEPTAGE
GENERAL PERMIT GAG620000

For EPD Use Only
Assigned Permit No. _____

SITE INFORMATION

I. Name of owner/company: _____
Address: _____
City: _____ State: _____ Zip Code: _____
County: _____ Phone: _____

II. Name of site for land disposal of domestic septage: _____

A. Mailing Address:

Contact Person: _____
Address: _____
City: _____ State: _____ Zip Code: _____
County: _____ Phone: _____

B. Site Location:

Address: _____
City: _____ State: _____ Zip Code: _____
County: _____ Phone: _____

C. List the latitude and longitude to the nearest 15 seconds for the approximate center of the application site:

LATITUDE			LONGITUDE		
Deg.	Min.	Sec.	Deg.	Min.	Sec.

III. Attach a recorded plat of the property. If the applicant does not own the property, then attach a letter of agreement between the applicant and the owner of the site stating that the owner authorizes the use of the property for land application of septage and acknowledges that the site has low potential for public exposure.

IV. Description of septage land application system:

Include a process flow diagram of the septage land application site. Also, include a description of the method of pretreatment and the method of application of septage to the site including a brief description of operational procedures from receipt of waste through final land application. (The permit requires that the sites and location of the land application system shall consist of the number of acres identified in the NOI. Attach additional pages if necessary).

A. Is the waste to be land applied domestic septage only? Yes _____ No _____

B. Quantity of septage waste (liquid gallons) that will be land applied

C. Is there an underdrain collection system proposed or installed to lower the groundwater table? _____

D. Is there any surface water adjacent to or traversing the septage land application site?

V. A Division approved septage management plan (SMP) is required in order to engage in the land application of septage. The SMP will include closure details, descriptions and locations of proposed groundwater monitoring wells.

VI. Attach a copy of your current Septage Removal and Disposal Permit issued by the County Board of Health where the septage removal business is based. Attach proof of acceptance with an approved septage disposal facility as required by the County Board of Health.

VII. Attach a copy of a current pumper Level II certification (located on your Septage Removal and Disposal Permit) or other proof of operator certification.

VIII. For privately-owned systems, a copy of the following items must be attached as part of this NOI. Please check off each item to ensure it is attached. Do not submit this NOI application if you have not checked off and included each item.

- a. A recorded plat of the property
- b. A process flow diagram of the septage land application site
- c. A description of the method of pretreatment and the method of application of septage to the site
- d. A septage management plan with closure details (for new systems)
- e. A copy of your current Septage Removal and Disposal Permit
- f. A current pumper Level II certification or other proof of operator certification.

IX. Certification:

The certification statement below must be signed by the following:

- i. For a corporation, by a responsible corporate officer. A corporate officer means:
 1. A president, secretary, treasurer, or vice-president of the corporation in charge of a principal business function, or any other person who performs similar policy or decision-making functions for the corporation; or
 2. The manager of one or more manufacturing, production, or operating facilities, if authority to sign documents has been assigned or delegated to the manager in accordance with corporate procedures;
- ii. For a partnership or sole proprietorship, by a general partner or the proprietor; or
- iii. For a municipality, State, Federal, or other public facility, by either a principal executive officer or a ranking elected official.

Any person who knowingly makes any false statements, representation or certification of this application may be punished by a fine of not more than \$10,000 or by imprisonment for not more than two years or both. Georgia Water Quality Control Act, Official Code of Georgia Section 12-5-53(b).

To be signed by the system owner or operator:

I certify under penalty of law that this document and all attachments were prepared under 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.

Printed Name of Applicant

Title

Date application signed

Signature of Applicant

Submit to:

**Environmental Protection Division
Watershed Protection Branch
Wastewater Regulatory Program
2 MLK Jr. Dr., Suite 1152E
Atlanta, Georgia 30334**