



Archived Publication

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The Multi-Sector General Permit for Stormwater Discharges Associated with Industrial Activity (2000 MSGP), issued in October 2000, expired at midnight on October 30, 2005. A new permit, the 2008 Multi-Sector General Permit (2008 MSGP) was issued on September 29, 2008. Visit www.epa.gov/npdes/stormwater/msgp to view the final 2008 MSGP and supporting documents.



Appendix G
Information required for the Notice of Intent (NOI)

Appendix G – Information required for the Notice of Intent (NOI)

As part of applying for coverage under MSGP 2006, the permittee will be required to submit a Notice of Intent (NOI). The following is the preliminary updated NOI form that must be submitted.

Submission of this completed Notice of Intent (NOI) constitutes notice that the entity in Section B intends to be authorized to discharge pollutants to waters of the United States, from the facility or site identified in Section C, under EPA's Stormwater Multi-Sector General Permit (MSGP). Submission of the NOI also constitutes notice that the party identified in Section B of this form has read, understands, and meets the eligibility conditions of Part 1 of the MSGP; agrees to comply with all applicable terms and conditions of the MSGP; understands that continued authorization under the MSGP is contingent on maintaining eligibility for coverage, and that implementation of the permittee's pollution prevention plan is required two days after a complete NOI is mailed. In order to be granted coverage, all information required on this form must be completed. Please read and make sure you comply with all permit requirements, including the requirement to prepare and implement a stormwater pollution prevention plan.

A. Permit Number: ----- (see Appendix C of the MSGP for the list of eligible permit numbers)

B. Facility Operator Information

1. Name: _____

2. IRS Employer Information Number: ___ - -----

3. Mailing Address: a. Street: _____

b. City: _____ c. State: __ d. Zip code: -----

e. Phone: ___ - ___ - ___ f. Fax (Optional): ___ - ___ - ___

g. E-mail: _____

C. Facility Information

1. Facility Name: _____

2. This discharge is New Existing

If you have an existing stormwater discharge associated with industrial activity and you had coverage under the MSGP 2000, provide the Tracking Number: -----

3. Location Address: a. Street: _____

b. City: _____ c. County or similar government subdivision: _____

d. State: __ e. Zip code: -----

f. Latitude: 1. ___° ___' ___" N (degrees, minutes, seconds) g. Longitude: 1. ___° ___' ___" W (degrees, minutes, seconds)
2. ___° ___' ___" N (degrees, minutes, decimal) 2. ___° ___' ___" W (degrees, minutes, decimal)
3. ___° ___' ___" N (decimal) 3. ___° ___' ___" W (decimal)

4. Is this facility federal? Yes No

5. Is this facility located on Indian Country lands? Yes No

If yes, name of reservation, or if not part of a reservation, put "Not Applicable:" _____

6. Discharge of Stormwater

a. List the name(s) of the receiving water(s) that that you discharge stormwater into: _____

b. Does your facility discharge stormwater into a Municipal separate storm sewer system (MS4)? Yes No

If yes, name of MS4 operator: _____

7. List the code that best represents your Standard Industrial Classification (SIC) Code(s) for your industrial activity: -----

D. StormWater Pollution Prevention Plan Contact Information and Location

1. Name: _____

2. Location Address: a. Street: _____

b. City: _____ c. State: __ d. Zip code: -----

e. Phone number ___ - ___ - ___ ext. ___

f. URL address of Stormwater Prevention Plan (if applicable): _____

E. Endangered Species Act Eligibility

Based on the instructions provided in Appendix E of the MSGP, under which criterion have you satisfied your Endangered Species Act obligations? A B C D E F

If you select criterion F, provide permit tracking number of the operator under which you are certifying eligibility:
__ R _____

F. National Historic Preservation Act Eligibility

Based on the instruction provided in Appendix F of the MSGP, under which permit criterion have you satisfied your National Historic Preservation Act obligations? A B C D

G. Certifier Name and Title

Do you certify under penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted? Based on your inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, do you certify that the information submitted is, to the best of your knowledge and belief, true, accurate, and complete? Do you certify that you are aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations?

Print Name: _____

Title: _____

Signature: _____ Date: __ - __ - __