

**ATTACHMENT B – NOTICE OF INTENT APPLICATION FORM  
To Receive**

**Authorization or Reauthorization to discharge and/or reuse extracted and treated groundwater resulting from the cleanup of groundwater polluted by volatile organic compounds under the requirements of NPDES Permit No. CAG912003 (VOC General Permit)**

**For Groundwater Treatment Facility located at:**

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**Complete Facility Address**

**Table B-1. Mark only one as applicable**

1	For a New Discharge, please provide complete information on the following items:	
	a. Discharger's Certification	
	b. Administrative and Technical Information (Table Nos. B-2, B-3, B-4, B-5, B-6, and B-7)	
	c. Other Information including Item 13.a through 13.f and permit and Order number(s) if your discharge has been previously regulated	
2	For Modification of a current Notice of VOC General Permit Coverage: Except 13.f, please provide all Table B-1 Items 1.a, 1.b, and 1.c information specifically highlighting the requested modifications	
3	For an Existing Discharge (Permit Reissuance): Except 13.f, please provide all Table B-1 Items 1.a, 1.b, and 1.c information submitted 180 days before expiration date (no later than April 3, 2014).	
	<b>Applicable to all new and existing dischargers.</b> Please mark the cell to the right that you have contacted the local sanitary sewer agency serving your facility and discharge to sanitary sewer is not an option.	
	<b>Applicable to all new and existing dischargers.</b> Please mark the cell to the right that you have considered reuse of the effluent and in the section below provide a description of current or planned reuse and provide reason(s) why partial or full reuse is not an option.	

**Discharger's Certification**

I certify under penalty of law that this document and all attachments are 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 on my inquiry of the design engineer whose signature and engineering license number is documented in this notice, 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.

\_\_\_\_\_  
Name (print)

\_\_\_\_\_  
Signature and Date

\_\_\_\_\_  
Title/Organization

\_\_\_\_\_  
Address

**ADMINISTRATIVE AND TECHNICAL INFORMATION**

**Complete Table B-2. Facility Information**

1	Discharger's Name	
2	Name of Facility	
3	Facility Address	
4	Facility Contact and Title, Phone, and email address	
5	Consultant Name, Phone, and email address	
6	Authorized Person to Sign & Submit Reports Note: Perjury statement shall only be signed by the Discharger and/or its authorized representative	

7	Mailing Address and Contact Person Name, Phone, and email address	
8	Billing Address and Contact Person Name, Phone, and email address	
9	Type of site or project. For example: Solvent Spills/Leaks Active or Closed Groundwater Cleanup Sites, Short Term Dewatering Project, Long Term Dewatering Project, or other (please explain if "Other")	
10	Watershed	
11	Receiving Water Type	

I understand that if the proposed discharge is eligible under the requirements of NPDES Permit No. CAG912003 (VOC General Permit) and if I meet the conditions described below, I will be authorized to discharge treated groundwater to surface waters from the above named facility.

1. Condition No. 1: Comply with all applicable requirements of the Order and the associated Monitoring and Reporting Program.
2. Condition No. 2: Ensure that the effluent does not contain constituents in excess of the limits listed under 1 or 2 in Table B-3:

**Complete Table B-3. Mark only one as applicable**

1	Discharge to Drinking Water Areas (Section IV.A – Effluent Limitations, Table 2, Column A of the Permit)	
2	Discharge to Other Surface Water Areas (Section IV.A – Effluent Limitations, Table 2, Column B of the Permit)	

3. Condition No. 3: Provide a treatment system including the elements described in Table B-4 below and the schematic shown in item 13.a, which will effectively treat the extracted groundwater to comply with the requirements of the permit.

**Complete Table B-4. Treatment System Description**

	Unit	Number	Size, or capacity (e.g. pounds of GAC and/or air strippers), Further Description (If Applicable)
1	Extraction Well(s)		
2	Extraction Wells with Dedicated		

	Unit	Number	Size, or capacity (e.g. pounds of GAC and/or air strippers), Further Description (If Applicable)
	Treatment Unit(s)		
3	Dedicated Treatment Unit(s)		
4	Settling Tank(s) in series		
5	Settling Tank(s) in parallel		
6	Oil/Water Separator(s)		
7	Filter(s)		
8	Air Strippers with Air Filters		
9	Air Strippers without Air Filters		
10	Other Treatment Unit(s) installed for removing pollutants such as 1,4-dioxane		
11	Advanced Treatment Unit(s)		
12	Liquid-phase Granular Activated Carbon (GAC) vessel(s) in series		
13	GAC vessel(s) in parallel		
14	Effluent reuse Infrastructure (If so, provide additional detail)		
15	Chemical Additives		If applicable, please attach Material Safety Data Sheet (MSDS) as item 13.e

4. Condition No. 4: Retain, at all times, a professional engineer (PE) certified in the State of California to oversee the design, and proper operation and maintenance (O&M) of the treatment system, including all facilities necessary to achieve compliance with the Order. The PE shall certify the adequacy of each component of the proposed treatment system and shall ensure compliance with the Order (the PE shall affix his/her signature and engineering license number to this certification report as item 13.b). Further, the PE shall certify that:
- a. All treatment facility startup and operation instruction manuals are adequate and available to operating personnel.
  - b. Adequate treatment facility maintenance and testing schedules are included in the treatment facility O&M Manual.
  - c. Influent and effluent sampling locations or ports are located in areas where samples representative of the waste stream to be monitored can be obtained.
  - d. The residual concentration of any chemical additive or additives used in the treatment process is designed to be zero and will never exceed the No Adverse Effect Concentration (NOEC) as documented in the ecological section of the applicable Material Safety Data Sheet (MSDS). A copy of the MSDS for every chemical used is provided as item 13.e.
  - e. If any chemical used in the treatment process may cause pH variances in the effluent, the frequency of pH monitoring in the effluent will be increased as

explained in the Legends for Table E.2 of Attachment E to the permit (Monitoring and Reporting Program).

**Complete Table B-5. Professional Engineer(s) and Other Information**

1	Design Professional Engineer's Name, California License Number, address, phone number, and email address	
2	Operation and Maintenance Professional Engineer's Name, California License Number, address, phone number, and email address	

5. Condition No. 5: Comply with the authorized maximum discharge flow rate from the groundwater treatment system, which is \_\_\_\_\_ gallons per minute (gpm). The groundwater treatment system's capacity is designed for \_\_\_\_\_ gpm.
6. Condition No. 6: Ensure that treated water is discharged (e.g. through a storm drain) only to the receiving water(s) described in Table B-6 below and shown on the aerial map attached as item 13.c.

**Complete Table B-6. Discharge Location**

Discharge Point Location	Discharge Point Latitude	Discharge Point Longitude	Receiving Water
Storm-Drain Location:			Storm-Drain
Outfall Location:			

7. Condition No. 7: Maintain a copy of the Order, a complete copy of this Notice of Intent documentation and its approved Notice of general Permit Coverage, a full copy of the O&M Manual, and any other related documents recommended by the PE at the treatment facility. These documents shall be made available to Regional Water Board staff during inspections.
8. Condition No. 8: Upload Self-Monitoring Reports on Geo-Tracker on a quarterly calendar basis, no later than 45 days after the last day of each calendar quarter. The report shall consist of a cover letter documenting number of violations occurred during the quarter and a brief description of the operation and maintenance of the groundwater extraction and treatment system. A summary of quality assurance/quality control data such as field, trip, and laboratory blank results shall

be reported for each analyzed constituent or group of constituents. The laboratory data sheets need not be included in the monitoring reports unless requested. However, each monitoring report shall include a table summarizing the laboratory results with the following information:

- a. The sample location (e.g. influent, effluent, and receiving water);
  - b. The constituents analyzed;
  - c. The analytical methods used;
  - d. The laboratory reporting limits in micrograms per liter (ug/l);
  - e. The sample results (ug/l); the date sampled; and the date samples were analyzed.
9. Condition No. 9: Upload on Geo-Tracker an annual report by February 15 of each year covering the previous calendar year. You may submit the Annual Report in lieu of the 4<sup>th</sup> quarterly report of a calendar year. In the cover letter to your Annual Report, document that the annual fee (currently \$6, 970) has been paid.
  10. Condition No. 10: For new discharges, submit a Check for \$6,970 or most current fee amount, payable to State Water Resources Control Board.
  11. Condition No. 11: As item 13.d of this application, list all pollutants of concern name and concentrations in influent or projected influent and effluent including the data suggested in Table B-7. For new discharges, you may use monitoring data from the groundwater extraction wells to estimate the concentration of pollutants of concern in the influent. Please do not include any laboratory reports unless requested.

**Table B-7. Suggested format for listing pollutants in two tables for existing discharges (one table for influent and one table for effluent)**

Monitoring data since effective date of the initial discharge authorization letter or estimated from groundwater monitoring data for new discharges	Pollutant 1	Pollutant 2	Pollutant 3	Add Columns and/or tables as needed (all detected pollutants with effluent limitations and all triggered pollutants exceeding the triggers shall be listed in this table)
Number of Samples				
Maximum Concentration				
Average Concentration (average of detected pollutants only)				
Number of times the effluent limitation was exceeded				

Monitoring data since effective date of the initial discharge authorization letter or estimated from groundwater monitoring data for new discharges	Pollutant 1	Pollutant 2	Pollutant 3	Add Columns and/or tables as needed (all detected pollutants with effluent limitations and all triggered pollutants exceeding the triggers shall be listed in this table)
Median Concentration				
Minimum Concentration				
Number of Non-Detects				
Lowest Reporting Limit				
Highest Reporting Limit				
Number of Samples with Lowest Reporting Limit				
Most recent sample Date, Method Number				

12. Condition No. 12: Include any other relevant information about this project that may be necessary to evaluate the eligibility of this discharge under the Order in 13.e below. An existing discharger, who is applying for permit reissuance, shall also provide the following information:

- a. The Reason(s) why reclamation or discharge to POTW is not feasible, and
- b. Total volume of the effluent reused and/or discharged and total grams of pollutants removed during 2009-2014 period.

13. Condition No. 13: **Please upload this NOI form and all the applicable following items 13 a through 13.f to Geo-Tracker [http://www.waterboards.ca.gov/ust/electronic\\_submittal/index.shtml](http://www.waterboards.ca.gov/ust/electronic_submittal/index.shtml) (you may contact Lourdes Gonzales at (510) 622-2365 or [lgonzales@waterboards.ca.gov](mailto:lgonzales@waterboards.ca.gov) if you have any questions).** If you have no access to computers or internet, please submit the NOI package to California Regional Water Quality Control Board, San Francisco Bay Region, located at 1515 Clay Street, Suite 1400, Oakland, California 94612:

- a. Flow Schematics (shall include every components of the treatment system)
- b. Engineering Certification Report
- c. Aerial Map (highlight the discharge path)
- d. More Tables listing Pollutants of Concern at this Site (Tables B-7a, B-7b, ...)
- e. Other Information (If applicable)
- f. Check for \$6,970 (applicable only to new dischargers)

Note: The Regional Water Board may modify this form at any time to reflect any new fees and other needed improvements as applicable.