ATTACHMENT C - INSTRUCTIONS FOR COMPLETING NOTICE OF INTENT (NOI) FORM
To Receive

Authorization to Discharge or Reuse of Extracted Brackish Groundwater and Reverse Osmosis Concentrate Resulting from Treatment of Groundwater by Reverse Osmosis and Discharge or Reuse of Extracted and Treated Groundwater Resulting from Structural Dewatering under the Requirements of

Order No. R2-2007-0033, NPDES Permit No. CAG912004

Facility Address: Please include Zip code and County for the Facility Address.

Table 1. Please Mark Applicable Discharge Category

Category	Notice of Intent for:	
Category 1	Aquifer protection and salinity barrier well discharges	These groundwater extraction facilities are in operation to protect drinking water supply aquifers or other municipal facilities from salt water intrusion.
Category 2	RO concentrate from aquifer protection well discharges	Pumped groundwater may be treated by RO so that the groundwater may be returned to the drinking water supply, and the RO concentrate discharged as waste.
Category 3	Structural dewatering discharges greater than 10,000 gallons per day and requiring treatment. Treatment is required where a physical, biological, or chemical treatment process is necessary in order for the structural dewatering discharge to comply with the prohibitions and limitations of this order	These are long-term dewatering systems under or around buildings and pipelines to remove groundwater infiltration. Buildings and underpass structures are two examples of structures that may require continuous dewatering.

Discharger's Certification

This form must be signed by an appropriate corporate officer, general partner, principal executive officer, or ranking elected official. In no case should the consultant sign the forms.

Administrative Information
Complete Table 2. Facility Information

1	Discharger's Name	
2	Name of Facility	
3	Facility Address	
4	Facility Contact, Title, and Phone	
5	Authorized Person to Sign & Submit Reports	
6	Mailing Address	
7	Billing Address	
8	Type of site or project.	For example: (1) temporary or permanent groundwater dewatering systems, operated to prevent groundwater infiltration or to remove collected groundwater, 2) groundwater extraction systems operated to protect or remediate drinking water supply aquifers from salt water intrusion, 3) facilities which treat groundwater by reverse osmosis (RO), or 4) other (please explain if "Other")
9	Watershed (Please note that Watershed may have a different name than receiving water)	If you do not know, you may check web sites such as "San Francisco Bay Area Creek & Watershed Finder", at http://www.museumca.org/creeks/resc.html.
10	Receiving Water	
11	Receiving Water Type	<enclosed bay, estuary, inland surface water, or Sacramento-San Joaquin Delta>

Condition 1. Please review the Order before completing this form.
Condition 2. The system shall be fully described. The Dischargers that chlorinate their extracted groundwater shall dechlorinate their effluent to nondetectable levels (a non-detect result using a detection level equal or less than 0.08 milligrams per liter will not be deemed to be out of compliance).

Condition 3. This permit requires a professional engineer (PE) certified in the State of California to oversee the design of the system.

Condition 4. A PE shall certify the adequacy of each component of the proposed system. Other relevant information such as the reason(s) if any chemical additive or additives are needed to be used in the treatment system, method of application and disposal shall also be fully explained in the PE certification. Please note that the design engineer has the authority to reject usage of any chemical which has an inadequate MSDS or may cause an adverse effect on most sensitive Beneficial Uses of the receiving water. If you have a batch discharge, provide the frequency, volume, and maximum flow rate.

Condition 5. Some of this information may be obtained from the municipalities. The discharge path shall be highlighted from the facility to the final receiving water.
Condition 6. All documents needed by the facility technicians to properly operate or maintain the treatment facility shall be at or near the facility.

Condition 7. Late Self-Monitoring Reports are considered in violation of the permit's requirements and are subject to mandatory minimum penalty if more than 30 days late.

Condition 8. Prepare a contact List.

Condition 9: No application will be considered complete without complete delineation of constituents in the discharge. The NOI shall include analytical results, including the date the samples were taken, for influent (except for mercury, this may be a weighted average of individual extraction wells for non-operating facilities) and effluent (not required for proposed discharges with no prior operating experience). Please note that Category 2 and 3 discharges (as listed in Table 1) may not receive treatment, and therefore effluent samples only will be required. If you have two or more substantially identical outfalls, you may request to sample and analyze only one outfall and submit the results of the analysis for other substantially identical outfalls. If your request is granted, on a separate sheet attached to the application form, identify which outfall you did test, and describe why the outfalls that you did not test are substantially identical to the outfall that you did test. This NOI requires screening (meaning at least one grab sample analysis for all constituents listed in Table 6 of NOI Form in Attachment B). If you have other monitoring data not specifically listed in Table 6, the highest concentrations of these pollutants shall be reported as an attachment to your NOI application. All analytical test methods number and technique shall be reported. All analytical methods used shall be federally approved methods (in this case, please include 40 CFR part number), USEPA approved methods, Standard Methods, or equivalent. For equivalent methods, the lab director certification and name of the approved method shall be provided as an attachment to the NOI Form.

The Dischargers that dechlorinate their effluents shall document the non detectable levels (e.g. < 0.01 milligram per liter).

Condition 10. Other information such as vicinity to a highly polluted site shall also be provided in Attachment 5.

Condition 12. No application will be considered complete without the applicable fee. For discharges regulated under this General NPDES Permit, annual fees are based on California Code of Regulations (CCR) Title 23, Division 3, Chapter 9, Section 2200 (b) (9). The Regional Water Board may modify this instruction at any time to reflect a new CCR fee schedule. At this time, please follow the fee schedule explained on the next page.

1) Attach a Check for $ 5,688 if your facility includes a treatment system to meet priority toxic pollutant limits and that could impair beneficial uses if limits are violated,

2) Attach a Check for $ 3,437 if your facility includes a treatment system to treat non-priority pollutant, but are not expected to impair beneficial uses if limits are violated. Examples of non-priority pollutants include, but are not limited to, nutrients, inorganic compounds, pH, and temperature); or,

3) Attach a Check for $ 1,185 if your facility includes minimal or no treatment system to meet limits and pose no significant threat to water quality.

Condition 13. All attachments are mandatory.

Please submit the PDF version of completed NOI Form and all attachments to the responsible staff member at the Regional Water Board office. At this time, the responsible staff member is Farhad Azimzadeh and his email address is fazimzadeh@waterboards.ca.gov

Note: The Regional Water Board may modify this instruction at any time as needed.