# DEPARTMENT OF AGRICULTURE AND NATURAL RESOURCES
# NOTICE OF INTENT (NOI)

to Obtain Coverage Under the SWD General Permit for
Temporary Discharge Activities and a Temporary Water Rights Use Permit

Original to: SD Department of Agriculture and Natural Resources
Surface Water Quality Program
523 East Capitol Avenue
Pierre, South Dakota 57501
Telephone: 1-800-SDSTORM

**ALL QUESTIONS MUST BE ANSWERED COMPLETELY FOR THIS FORM TO BE VALID**

## I. Primary Contact Information: ☐ Owner ☐ Operator ☐ Contractor

Contact Person: _____

Company Name: _____

Mailing Address: _____

City: _____ County: _____ State: _____ Zip Code: _____

Phone Number: _____ Email Address: _____

## II. Other Contact Information: ☐ Owner ☐ Operator ☐ Contractor

Contact Person: _____

Company Name: _____

Mailing Address: _____

City: _____ County: _____ State: _____ Zip Code: _____

Phone Number: _____ Email Address: _____

## III. Project Information:

Project/Facility Name: _____

On-Site Contact Person: _____ Phone Number: _____

Physical Project Address or Description of Construction Site Location: _____

_____

City: _____ County: _____ State: _____ Zip Code: _____

Latitude: _____ Longitude: _____ Source (GPS, Google, etc.): _____

Quarter(s): _____ Section(s): _____ Township(s): _____ Range(s): _____

Is this project/facility located on Tribal Lands? ☐ Yes ☐ No

## IV. Project Activities:

Please describe the activities which require the applicant to obtain a discharge permit:

_____

_____

_____

_____

_____

FOR DANR USE ONLY

Permit Number: _____ Limit Classifications: _____ Date Approved: _____ Approved by: _____

## V. Discharge Information:

Estimate the following information:

A. Date water **withdrawal** will commence: _____

B. Date water **withdrawal** will cease: _____

C. Total volume of **withdrawal** (in gallons): _____

D. Date water **discharge** will commence: _____

E. Date water **discharge** will cease: _____

F. Total volume of **discharge** (in gallons): _____

G. Average flow rate of **discharge** (in gpm): _____

Source of water being withdrawn/discharged: _____

Name of receiving waters: _____

Treatment processes employed, if any: _____

_____

_____

Describe the discharge and type of wastewater from each discharge location (including overflows, bypasses or discharges from holding ponds, trenches, excavations, vessels, pipelines, etc.) Attach additional sheets if necessary.

A. Discharge 1: _____

B. Discharge 2: _____

C. Discharge 3: _____

***NOTE: Please place points of withdrawal and discharge on a topographic map, or other map if a topographic map is unavailable. This map should extend to one (1) square mile beyond the property boundaries of the facility and each of its discharge facilities, and those wells, springs, and other surface water bodies, drinking water wells, and surface water intake structures listed in public records, or otherwise known to the applicant in the map area.***

## VI. Stormwater Pollution Prevention Plan (SWPPP):

Is there any reason to believe the discharge may contain any pollutants other than those limited in the permit (i.e. TSS, pH, BTEX, Benzene, & TPH)? ☐ Yes ☐ No

Has the SWPPP been developed in lieu of sampling for TSS or TRC? ☐ Yes ☐ No

Describe the best management practices being used in lieu of, or along with, sampling:

_____

_____

## VII. Hydrostatic Testing:

A. Type of vessel being tested: _____

B. Material vessel is constructed from: _____

C. Check the appropriate box: ☐ Vessel has been previously used ☐ Vessel is virgin material

## VIII. Other Information:

Please list other information you feel should be brought to the attention of the SDDENR regarding coverage under this general permit. Attach additional sheets if necessary.

_____

_____

_____

_____

_____

**STATE OF SOUTH DAKOTA**

**BEFORE THE SECRETARY OF**

**THE DEPARTMENT OF AGRICULTURE AND NATURAL RESOURCES**

| | | |
|---|---|---|
| **IN THE MATTER OF THE APPLICATION OF** | ) | |
| | ) | **CERTIFICATION OF** |
| _____ | ) | |
| | ) | **APPLICANT** |
| **STATE OF** _____ | ) | |
| | ) | |
| **COUNTY OF** _____ | ) | |

I, _____, the applicant in the above matter after being duly sworn upon oath hereby certify the following information in regard to this application:

I have read and understand South Dakota Codified Law Section 1-41-20 which provides:

*"The secretary may reject an application for any permit filed pursuant to Titles 34A or 45, including any application by any concentrated swine feeding operation for authorization to operate under a general permit, upon making a specific finding that:*

*(1) The applicant is unsuited or unqualified to perform the obligations of a permit holder based upon a finding that the applicant, any officer, director, partner, or resident general manager of the facility for which application has been made:*

*(a) Has intentionally misrepresented a material fact in applying for a permit;*

*(b) Has been convicted of a felony or other crime involving moral turpitude;*

*(c) Has habitually and intentionally violated environmental laws of any state or the United States which have caused significant and material environmental damage;*

*(d) Has had any permit revoked under the environmental laws of any state or the United States; or*

*(e) Has otherwise demonstrated through clear and convincing evidence of previous actions that the applicant lacks the necessary good character and competency to reliably carry out the obligations imposed by law upon the permit holder; or*

*(2) The application substantially duplicates an application by the same applicant denied within the past five years which denial has not been reversed by a court of competent jurisdiction. Nothing in this subdivision may be construed to prohibit an applicant from submitting a new application for a permit previously denied, if the new application represents a good faith attempt by the applicant to correct the deficiencies that served as the basis for the denial in the original application.*

*All applications filed pursuant to Titles 34A and 45 shall include a certification, sworn to under oath and signed by the applicant, that he is not disqualified by reason of this section from obtaining a permit. In the absence of evidence to the contrary, that certification shall constitute a prima facie showing of the suitability and qualification of the applicant. If at any point in the application review, recommendation or hearing process, the secretary finds the applicant has intentionally made any material misrepresentation of fact in regard to this certification,*

*consideration of the application may be suspended and the application may be rejected as provided for under this section.*

*Applications rejected pursuant to this section constitute final agency action upon that application and may be appealed to circuit court as provided for under chapter 1-26."*

I certify pursuant to 1-41-20, that as an applicant, officer, director, partner, or resident general manager of the activity or facility for which the application has been made that I; a) have not intentionally misrepresented a material fact in applying for a permit; b) have not been convicted of a felony or other crime of moral turpitude; c) have not habitually and intentionally violated environmental laws of any state or the United States which have caused significant and material environmental damage; (d) have not had any permit revoked under the environmental laws of any state or the United States; or e) have not otherwise demonstrated through clear and convincing evidence of previous actions that I lack the necessary good character and competency to reliably carry out the obligations imposed by law upon me. I also certify that this application does not substantially duplicate an application by the same applicant denied within the past five years which denial has not been reversed by a court of competent jurisdiction. Further;

*"I declare and affirm under the penalties of perjury that this claim (petition, application, information) has been examined by me, and to the best of my knowledge and belief, is in all things true and correct."*

Dated this _____ day of _____ , 20____ .

_____
Applicant (print)

_____
Applicant (signature)

Subscribed and sworn before me this _____ day of _____ , 20_____ .

_____
Notary Public (signature)

My commission expires: _____

(SEAL)

**PLEASE ATTACH ANY ADDITIONAL INFORMATION NECESSARY TO DISCLOSE ALL FACTS AND DOCUMENTS PERTAINING TO SDCL 1-41-20 (1) (a) THROUGH (e). ALL VIOLATIONS MUST BE DISCLOSED, BUT WILL NOT AUTOMATICALLY RESULT IN THE REJECTION OF AN APPLICATION**