



WATER PROTECTION BUREAU

Agency Use

Permit No.:

Date Rec'd

Amount Rec'd

Check No.

Rec'd By

FORM
SW-1

Storm Water Discharges - Permit Application

Form SW-1 must be completed by owners or operators of facilities which discharge storm water and are seeking coverage under an MPDES General Permit for Storm Water Discharges Associated with Industrial Activity (MTR000000); Storm Water Discharges Associated with Mining and with Oil and Gas Activities (MTR300000); or, that the Department has determined are contributing to a violation of water quality standards or are a significant source of pollutants (ARM 17.30.1105). Please read the attached instructions before completing this form. You must print or type legibly; forms that are not legible or are not complete or are unsigned will be returned. You must maintain a copy of the completed SW-1 form for your records.

Section A - Application Status (*Check one*)

- New No prior SW-1 Form submitted for this site.
- Resubmitted Permit Number: MT _____
- Renewal Permit Number: MT _____
- Modification Permit Number: MT _____ (Discuss Modification in Section I)

Section B - Facility or Site Information (*See instruction sheet.*)

Facility or Site Name _____

Facility physical address _____

Nearest City or Town _____ Zip Code _____ County _____

Latitude _____ Longitude _____

Is this facility or site located on an Indian Reservation? No Yes (See instructions for further information)

Section C - Applicant (Owner/Operator) Information

Owner or Operator Name _____

Mailing Address _____

City, State, and Zip Code _____

Phone Number (____) _____

Is the person listed above the facility or site owner? Yes No

Status of Applicant (*Check one*) Federal State Private Public Other (specify) _____

Section D - Existing or Pending Permits, Certifications, or Approvals None

- MPDES _____ RCRA _____
- PSD (Air Emissions) _____ Other _____
- 404 Permit (dredge & fill) _____ Other _____

Section E - Nature of Business or Activity

Standard Industrial Classification (SIC) Codes.

Provide at least one SIC code which best reflects the products or services provided by the facility or site described in Section B.

Code	A. Primary	Code	B. Second
1		2	
Code	C. Third	Code	D. Fourth
3		4	

Section F - Facility or Site Contact Person/Position

Name and Title, or Position Title _____

Mailing Address _____

City, State, and Zip Code _____

Phone Number (____) _____ Email address _____

Section G - Receiving Surface Water(s)

For each outfall or discharge location provide the latitude and longitude to the nearest second and the name of the receiving water. Attach additional sheets if necessary.

Outfall Number	Latitude	Longitude	Receiving Surface Waters (Name)
001			
002			
003			
004			
005			

MAP: Attach a USGS topographic quadrangle map extending one mile beyond the property boundaries of the site or activity identified in Section B depicting the facility or activity boundaries, major drainage patterns, and the receiving surface waters stated above.

Section H - Site Information

In accordance with ARM 17.30.1110(8), all applicants must certify that the discharge has been tested or evaluated for the presence of non-storm water discharges. Has the discharge been evaluated for the presence of non-storm water discharges? Yes No

Describe the basis for this evaluation:

If analytical testing was used as the basis for this evaluation, copies of the test results, including the laboratory name, test method, date of testing and sample collection information must be attached to the application.

Analytical laboratory results attached.

Describe any non-storm water discharges:

Non-Storm Water discharges are not present.

Identify Major Potential Pollutant Sources Exposed to Storm Water.

Summary of Best Management Practices (BMPs) or Treatment Methods.

Total size of regulated facility or activity (acres): _____

Section I – Supplemental Information (For Permit Modification Only – leave blank except for modification)

Section J - CERTIFICATION

Applicant Information: This form must be completed, signed, and certified as follows:

- For a corporation, by a principal officer of at least the level of vice president;
- For a partnership or sole proprietorship, by a general partner or the proprietor, respectively; or
- For a municipality, state, federal, or other public facility, by either a principal executive officer or ranking elected official.

All Applicants Must Complete the Following Certification

I certify under penalty of law that this document and all attachments were prepared under my 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 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. [75-5-633, MCA]

A. Name (Type or Print)

B. Title (Type or Print)

C. Phone No.

D. Signature

E. Date Signed

The Department will not process this form until all of the requested information is supplied, and the appropriate fees are paid. Return this form (Form SW-1), a complete and signed Storm Water Pollution Prevention Plan (SWPPP), and the applicable fee to:

Department of Environmental Quality
Water Protection Bureau
PO Box 200901
Helena, MT 59620-0901
(406) 444-3080

INSTRUCTIONS FOR Form SW-1 – Storm Water Discharge

IMPORTANT Your application will not be considered complete unless you answer every question on this form. If an item does not apply to you, enter “NA” (not applicable) to show that you considered the question. Responses must be self-explanatory and must not refer exclusively to attached maps, plans, or documents. The appropriate fees must accompany this application form. Do not submit these items separately. Mail this application form to the DEQ address stated on the application form. Forms and additional information on storm water discharges are available from the Water Protection Bureau at (406) 444-3080 or on the DEQ website at: <http://www.deq.mt.gov>

Please type or print legibly; applications that are not legible or are not complete will be returned.

SPECIFIC ITEM INSTRUCTIONS

Section A – Application Status

Check the box that applies and provide the requested information. If an SW-1 Form has not been previously submitted for this site, check the first box (New). The Department will assign a permit number when you submit Form SW-1. The permit number is a 9-digit code beginning with MT that is unique to your facility or site. If you submitted a Form SW-1 and the Department returned it to you as deficient or incomplete, check the second box (Resubmitted); if your current discharge permit or authorization is due to expire and you want to maintain coverage, check the third box (Renewal); if there is a change in the facility or site information (Section E), check the last box (Modification). If an SW-1 has been submitted and returned as incomplete the number appears in the upper right hand corner of the SW-1 form and on any correspondence sent to you by the Department. The permit number must be included on any correspondence with the Department regarding this site.

Section B – Facility or Site Information

Identify the name of the facility or activity at this site that is the source of storm water discharge. The site is the land or property where the facility or activity is physically located or conducted, including other land used in connection with the facility or activity. Give the address or location of this facility or site and the geographical information. Latitude and longitude must be accurate to the nearest second. Sources include GPS, a USGS topographic map, and/or “Topofinder” from <http://nris.mt.gov/interactive.html> . The location may be a physical mailing address or description of how the site may be accessed. (PO Boxes are not acceptable.)

If the facility or site is located on or within the boundaries of a federally recognized Indian Reservation the Montana DEQ is not the permitting authority. You must contact the Environmental Protection Agency (EPA) Montana’s Region 8 Operation Office in Helena at (406) 457-5000.

Section C – Applicant (Owner/Operator) Information

Give the name, as it is legally referred to, of the person, business, public organization, or other entity that owns, operates, controls or supervises the site or activity described in Section B of this form. The permit will be issued to the entity identified in this section (Section C). The owner or operator assumes all liability for discharges from the site and compliance with the terms and conditions of the permit and applicable regulations. If the owner or operator is other than a person or government entity it must be registered with the Montana Secretary of State’s office.

Section D– Existing or Pending Permits, Certifications, or Approvals

Check the box(s) that apply for any existing or pending permits that exist for this facility or activity and provide the permit or certification number.

Section E – Nature of the Business or Activity and Standard Industrial Classification (SIC)

Provide a brief description of the nature of the business and list, in descending order of significance, the four-digit SIC codes that best describes your facility in terms of the principal products or services you produce or provide. A complete list of SIC codes can be obtained from the Internet at <http://www.census.gov/epcd/www/naics.html> or in paper form from the document entitled “Standard Industrial Classification Manual”, Office Management and Budget, 1987. SIC Code listings may also be found at <http://www.osha.gov/pls/imis/sicsearch.html> . At least one SIC code must be provided. See attached table for common SIC codes.

Section F – Facility or Site Contact Person/Position

Give the name, title, and work phone number of a person who is thoroughly familiar with the operation of the facility or activity at this site and with the facts reported in this form, and who can be contacted by the Department for additional information. Those facilities with periodic changes in the contact person may provide the contact person position instead of a person's name.

Section G – Receiving Surface Water(s)

An outfall location is considered to be a discrete channel, conveyance, structure, or flow path from which storm water discharge leaves the boundary of the facility or site. “Surface waters” is defined in ARM 17.30.1102(32) as any waters on the earth’s surface including, but not limited to, streams, lakes, ponds, reservoirs, or other surface water including ephemeral and intermittent drainage ways and irrigation systems. Water bodies used solely for treating, transporting, or impounding pollutants shall not be considered surface water. Provide the following information in the table on the application form:

1. Assign a number to each outfall starting with 001. If the outfall is not well defined, assign the outfall number to a drainage area. For existing permittees, ensure outfall numbers used are consistent with those identified in the past for the same outfall.
2. Latitude/longitude can be derived from a USGS 7.5 minute topographic map and/or “Topofinder” at <http://nris.mt.gov/interactive.html> or from “Global Position Satellite (GPS) System”. Latitude and longitude must be accurate to the nearest second.
3. Give the name of the surface waters that receive the discharge. If the discharge reports to a municipal storm sewer, please indicate so.
4. Please attach a USGS topographic map(s) indicating the boundary of your site or facility, major drainage patterns, and the receiving surface water(s).

If additional space is necessary, attach additional sheets with requested information.

Section H – Site Information

Non- Storm Water Discharges

ARM 17.30.1110(8) requires that applicants must submit to the Department a certification that all storm water discharges have been tested or evaluated for the presence of non-storm water discharges. List any non-storm water discharge from the facility and describe the basis for this determination.

If your certification of no non-storm water discharges is based on analytical test results, you must provide these analytical tests results

Major Potential Pollutant Sources

Identify potential sources which may reasonably be expected to affect the quality of storm water discharges at this site. Examples of potential pollutant sources include, but are not limited to, immediate access roads or rail lines used or created by carriers of raw materials, manufactured products, waste material, or by-products used or created by the facility; materials handling sites; refuse sites; sites used for residual treatment, storage, or disposal; sites used for the application or disposal of process wastewaters; shipping and receiving areas; manufacturing buildings; storage areas for raw materials and intermediate and final products; loading or unloading of dry bulk materials or liquids, outdoor storage of materials, and

waste management practices; and areas where industrial activity has taken place in the past and significant materials remain and are exposed to storm water.

Best Management Practices (BMPs)

List and describe good housekeeping and erosion and sediment control BMPs used at the site to control pollutants from being discharged to surface waters. Detailed information should be included in the Storm Water Pollution Prevention Plan.

Size of Facility

Provide a reliable estimate of the total acreage at this site on which the regulated facility or activity occurs and that contributes storm water run off to the discharge at this site.

Section I – Supplemental Information

Use the space provided to expand upon any information requested in the SW-1 or information you wish to bring to the attention of the reviewer. Attach additional sheets, if necessary. For applicants requesting a modification to an existing Form SW-1, provide an explanation of the requested modification.