APPENDIX C

SAMPLE "NONDISCHARGE PERMIT" APPLICATION

This Appendix contains sample "Nondischarge Permit" Applications. One original and the specified number of completed copies of the appropriate application form must be submitted with all wastewater system extension plans as required by Section 5.4.2 of the Manual. Additional blank copies of the forms are available from the DENR, Division of Environmental Management, Raleigh, North Carolina.

Please note that Greenville Utilities' requirements for copies of the application form, plans and specifications may differ from the DENR instructions.

Also note that form FTA 12/07 begins on page C-1 and form PSFMGSA 12/07 begins on page C-3.



State of North Carolina Department of Environment and Natural Resources Division of Water Quality

FAST-TRACK APPLICATION

(FTA 12/07 ver2)

for GRAVITY SEWERS, PUMP STATIONS, AND FORCE MAINS

(Pressure & Vacuum sewer systems are not to be included as part of this application package)

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checkir being r	INSTRUCTIONS: Indicate that you have included/addressed the following list of required application package items by checking the space provided next to each applicable item. Failure to submit all required items will lead to your application being returned as incomplete. Forms are available from the web site or by calling the Regional Office serving your county:		

☐ G.	Stream Classifications – Watershed Classification Attachment (Form WACAS-12/07) If any portion of the project boundary is within 100 feet of any surface water or wetlands, the Watershed Classification Attachment must be completed.			
□н	Environmental Assessments – If this project is subject to an Environmental Assessment (EA) [15A NCAC 01C], this application cannot be used. Send the project application on the most current version of Form PSFMGSA to the Design Management Unit, 1633 Mail Service Center, Raleigh, NC 27699-1633. Applications cannot be accepted until a Finding of No Significant Impact (FONSI) or Environmental Impact Statement (EIS) has been issued. A copy is to be submitted with that permit application.			
☐ I.	Flow Direction – Many wastewater treatment systems are entering into agreements for regionalization efforts and emergency treatment capacity. Parts of the system are installed so that the wastewater flow can be directed to more than one treatment facility. If this is the case with this project, please indicate in B(12) and give the permit number of the second treatment facility.			
☐ J.	J. Certifications – Section C The application must be certified by both the applicant and the design engineer who is a North Carolina Registered Professional Engineer (PE). The applicant signature must match the signing official listed in Item A(1b). The PE should NOT certify the application if he/she is unfamiliar with 15A NCAC Chapter 2T, the Gravity Sewer Minimum Design Criteria (most recent version) and the Minimum Design Criteria for the Fast-Track Permitting of Pump Stations and Force Mains (most recent version), as applicable to the project. THE COMPLETED FTA 12/07 APPLICATION PACKAGE, INCLUDING ALL SUPPORTING DOCUMENTS AND \$480 FEE, SHOULD BE SENT TO THE APPROPRIATE REGIONAL OFFICE:			
REGIONAL OFFICE		ADDRESS	COUNTIES SERVED	
Asheville Regional Office		2090 US Highway 70 Swannanoa, North Carolina 28778 (828) 296-4500 (828) 299-7043 Fax	Avery, Buncombe, Burke, Caldwell, Cherokee, Clay, Graham, Haywood, Henderson, Jackson, Macon, Madison, McDowell, Mitchell, Polk, Rutherford, Swain, Transylvania, Yancey	
Fayetteville Regional Office		225 Green Street Suite 714	Anson, Bladen, Cumberland, Harnett, Hoke,	

REGIONAL OFFICE	ADDRESS	COUNTIES SERVED	
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Fayetteville Regional Office	225 Green Street Suite 714 Fayetteville, North Carolina 28301-5094 (910) 433-3300 (910) 486-0707 Fax Anson, Bladen, Cumberland, Harnett, Montgomery, Moore, Robeson, Richm Sampson, Scotland		
Mooresville Regional Office	610 E. Center Avenue Mooresville, North Carolina 28115 (704) 663-1699 (704) 663-6040 Fax	Alexander, Cabarrus, Catawba, Cleveland, Gaston, Iredell, Lincoln, Mecklenburg, Rowan, Stanly, Union	
Raleigh Regional Office	1628 Mail Service Center Raleigh, North Carolina 27699-1628 (919) 791-4200 (919) 788-7159 Fax	Chatham, Durham, Edgecombe, Franklin, Granville, Halifax, Johnston, Lee, Nash, Northampton, Orange, Person, Vance, Wake, Warren, Wilson	
Washington Regional Office	943 Washington Square Mall Washington, North Carolina 27889 (252) 946-6481 (252) 975-3716 Fax	Beaufort, Bertie, Camden, Chowan, Craven, Currituck, Dare, Gates, Greene, Hertford, Hyde, Jones, Lenoir, Martin, Pamlico, Pasquotank, Perquimans, Pitt, Tyrrell, Washington, Wayne	
Wilmington Regional Office	127 Cardinal Drive Extension Wilmington, North Carolina 28405 (910) 796-7215 (910) 350-2004 Fax	Brunswick, Carteret, Columbus, Duplin, New Hanover, Onslow, Pender	
Winston-Salem Regional Office	585 Waughtown Street Winston-Salem, North Carolina 27107 (336) 771-5000 (336) 771-4630 Fax	Alamance, Alleghany, Ashe, Caswell, Davidson, Davie, Forsyth, Guilford, Rockingham, Randolph, Stokes, Surry, Watauga, Wilkes, Yadkin	

For more information, please visit our web site at: http://h2o.enr.state.nc.us/percs/ or contact the Regional Office serving your county.

		USE THE TAB KEY TO MOVE FROM FIELD TO FIELD! Application Number: (to be completed by DWQ)				
	1.	Owner/Permittee:				
	1a.	Greenville Utilities Commission				
		Full Legal Name (company, municipality, HOA, utility, etc.)				
5	1b.	Clifton H. Cahoon, PE, Construction/Contracts Engineer				
Ξ		Signing Official Name and Title (Please review 15A NCAC 2T .0106 (b) for authorized signing officials!)				
INFORMATION	1c.	The legal entity who will own this system is: ☐ Individual ☐ Federal ☐ Municipality ☐ State/County ☐ Private Partnership ☐ Corporation ☐ Other (specify):				
Ö	1d. PO Box 1847					
INF		Mailing Address City				
	1f.	North Carolina 1g. 27835				
Z		State Zip Code				
<u>0</u>	1h.	252-551-3386 1i. 252-551-1598 1j. cahoonch@guc.com				
5		Telephone Facsimile E-mail				
Ö	2.	Project (Facility) Information:				
APPLICATION	2a.	2b. Pitt				
ᅙ		Brief Project Name (permit will refer to this name) County Where Project is Located				
<u>D</u>	3.	Contact Person:				
	3a.					
A		Name and Affiliation of Someone Who Can Answer Questions About this Application				
	20 ·					
	JD.	Phone Number E-mail				
	1.	Project is New Modification (of an existing permit) If Modification, Permit No.:				
	1.	Troject is Tree Tribumication (or all existing permit) in Modification, 1 cmit 110				
	2.	Owner is Public (skip to Item B(3))				
	2a.	2a. If private, applicant will be: 2b. If <u>sold</u> , facilities owned by a (must choose <u>one</u>)				
		☐ Retaining Ownership (i.e. store, church, single office, etc.) or ☐ Leasing units (lots, townhomes, etc skip to Item B(3)) ☐ Selling units (lots, townhomes, etc go to Item B(2b)) ☐ Public Utility (Instruction C) ☐ Homeowner Assoc./Developer (Instruction D)				
7	3.	Greenville Utilities Commission Owner of Wastewater Treatment Facility (WWTF) Treating Wastewater From This Project				
ō	40	i. Greenville Utilities Commission 4b. NC0023931				
F	4a.	Name of WWTF WWTF Permit No.				
₹		Greenville Utilities Com. 5b Gravity 5c.				
2	Sa.	Owner of Downstream Sewer Receiving Sewer Size Force Main Permit # of Downstream Sewer (Instruction E)				
Ö	6.	The origin of this wastewater is (check all that apply):				
Ÿ	0.	The origin of this wastewater is (check all that apply).				
B. PERMIT INFORMAT		☐ Residential Subdivision ☐ Retail (Stores, shopping centers) % Domestic/Commercial ☐ Apartments/Condominiums ☐ Institution % Industrial (attach ☐ Mobile Home Park ☐ Hospital % Gescription.) ☐ Church ☐ Nursing Home [RO: contact your Regional Office Pretreatment staff) ☐ Office ☐ Other (specify): % Other (specify):				
	7.	Volume of wastewater to be allocated or permitted for this particular project: gallons per day				
		*Do not include future flows or previously permitted allocations				
	8.	If the permitted flow is zero, indicate why:				
		□ Pump Station, Outfall or Interceptor Line where flow will be permitted in subsequent permits that connect to this line □ Flow has already been allocated in Permit No. □ Rehabilitation or replacement of existing sewer with no new flow expected (see 15A NCAC 02T .0303 to determine if a permit is required)				

	9.	the value in Item B Item B(7). Values	(7) AND/OR the design f	low for line or pump station sizing if a CAC 2T .0114 (b) and (c) must be sup	n accordance with 15A NCAC 2T .0114 for reduced or zero flow is being requested in ported with actual water or wastewater use
	10). Summary of Sew e	er Lines to be Permitted	(attach additional sheets if necessary)
		Size (inches)		Length (feet)	New Gravity or Additional Force Main
ERMIT INFORMATION (CONTINUED)			o Stations w/ associated in ID	Power Reliability Ontion	additional sheets as necessary) s shown on plans/map for reference) Force Main Size Force Main Length
	Pui	mp Station Locatio Design Flow (MGD)	n ID Operational Point GPM @TDH	Power Reliability Ontion	as shown on plans/map for reference) Force Main Size Force Main Length
B. PERMIT	Pui	mp Station Locatio Design Flow (MGD)	n IDOperational Point GPM @TDH	Power Polichility Ontion	as shown on plans/map for reference) Force Main Size Force Main Length
	 12. Will the wastewater flow in the proposed sewer lines or pump stations be able to be directed to another treatment facility? Yes No If Yes, permit number of 2nd treatment facility				

	14.	Have the following permits/certifications been submitted for appro-	al for the system of	project to be served?		
		Wetland/Stream Crossings - General Permit or 401Certification?	☐ Yes ☐ No	□ N/A		
		Sedimentation and Erosion Control Plan?	☐ Yes ☐ No	□ N/A		
		Stormwater?	☐ Yes ☐ No	□ N/A		
	 15. Does this project include any high priority lines, [see 15A NCAC 02T .0402 (2)] involve aerial lines, siphons, or interference manholes)? These lines will be considered high priority and must be checked once every six months Check if Yes: ☐ and provide details 					
	1.	 Owner/Permittee's Certification: (Signature of Signing Official and Project Name) I, Clifton H. Cahoon, attest that this application for has been reviewed by me and is accurate and complete to the best of my knowledge. I understand that if all required parts of this application are not completed and that if all required supporting documentation and attachments are not included, this application package is subject to being returned as incomplete. Note: In accordance with North Carolina General Statutes 143-215.6A and 143-215.6B, any person who knowingly makes any false statement, representation, or certification in any application shall be guilty of a Class 2 misdemeanor, which may include a fine not to exceed \$10,000 as well as civil penalties up to \$25,000 per violation. 				
	1a.					
		Signing Official Signature		Date		
SNC	ENGINEERING DESIGN DOCUMENTS MUST BE COMPLETED PRIOR TO SUBMITTAL OF THIS APPLICATION. THESE DOCUMENTS MUST INCLUDE PLAN AND PROFILE OF SEWERS, THEIR PROXIMITY TO OTHER UTILITIES, DESIGN CALCULATIONS. ETC. REFER TO 15A NCAC 02T .0305					
ΙΨ	2.	2. Professional Engineer's Certification: (Signature of Design Engineer and Project Name)				
2		I,, attest that this application forhas been				
C. CERTIFICATIONS		reviewed by me and is accurate, complete and consistent with the information in the engineering plans, calculations, and all other supporting documentation to the best of my knowledge. I further attest that to the best of my knowledge the proposed design has been prepared in accordance with the applicable regulations, Gravity Sewer Minimum Design Criteria for Gravity Sewers adopted February 12, 1996, and the Minimum Design Criteria for the Fast-Track Permitting of Pump Stations and Force Mains adopted June 1, 2000 and the watershed classification in accordance with Division guidance. Although other professionals may have developed certain portions of this submittal package, inclusion of these materials under my signature and seal signifies that I have reviewed this material and have judged it to be consistent with the proposed design. Note: In accordance with NC General Statutes 143-215.6A and 143-215.6B, any person who knowingly makes any false statement, representation, or certification in any application shall be guilty of a Class 2 misdemeanor which may include a fine not to exceed \$10,000 as well as civil penalties up to \$25,000 per violation.				
	2a.					
	2h	Professional Engineer Name				
	2b.	Engineering Firm				
	2c.					
	24	Mailing Address 2e. 2f.				
	∠u.		Zip			
	2g.	2h2i				
		Telephone Facsimile E-mail		NC PE Seal, Signature & Date		