

National Pollutant Discharge Elimination System

-NPDES Permit Process-

NPDES Permit

- The NPDES Program is a federally promulgated program that is operated by the Water Bureau of the Michigan Department of Environmental Quality.
- An NPDES permit is required for any wastewater discharge into surface waters of the State.

Step 1: The Permit Application

- In order to obtain a new permit authorizing the discharge of wastewater or to have an existing permit authorization reissued, the applicant must complete and submit an NPDES Permit application.

The application and application appendix are available via the DEQ website located at:

http://www.michigan.gov/deq/0,1607,7-135-3313_3682_3713-10440--,00.html

Step 2: Application Evaluation

- Upon receipt, the Department will review the application for completeness
 - 30 Days for New/Increased Use
 - 90 Days for Reissuance
- If determined to be administratively complete
 - permit processor proceeds with development of the draft NPDES permit documents
- If determined to be administratively incomplete
 - permit processor notifies the applicant of the deficiencies in writing.
 - permitting process is put on hold until all of the required information is received by the department

Step 3: Permit Development

- For new or increased use requests, the Department has 180 days, from the date the application was determined to be complete, to either issue a permit or deny the request for authorization
- For reissuances, the Department has one year from the expiration date of the current authorization.

NOTE: If a permit is not reissued prior to its expiration date, the conditions of the current permit remain in effect until it is superseded by the reissued permit

Step 4: Pre-Public Notice

- Once the Surface Water Permits Section develops a draft NPDES permit and all the associated documentation, the applicant will be given an opportunity to review (usually 2-3 weeks) the draft prior to the permit being placed on Public Notice.

Step 5: Public Notice

- The Department is required by law to public notice a proposal to issue or deny a permit
 - geographical area of the proposed or existing discharge
 - allow 30 days for the submittal of comments from interested persons.
- The draft permit and related documentation will be made available to the general public via the Michigan DEQ website.
- All submitted comments are kept as part of the permanent record.
- During this public comment period it is possible for interested parties to request a public meeting or hearing.

Public Meeting / Hearing

- Public Meeting
 - informal proceeding where the public can ask questions regarding the proposed permit and participate in open discussion with staff.
- Public Hearing
 - formal proceeding
 - public provides comments for the record
 - Department does not respond to testimony at the hearing. A responsiveness summary is prepared and distributed after the close of the record.
- If the Department determines that public meeting, hearing, or both are necessary, then the event must be public noticed, which may extend the application processing time.

Step 6: Issuance or Denial

- After the public comments period ends, the Department will evaluate all of the comments received and make any necessary revisions to the draft permit.
- If all issues raised have been resolved, the decision-maker (usually the Permit Section Chief) will decide whether or not to issue the proposed permit.
- If substantial unresolved issues remain, a public meeting or hearing is held with the decision maker.

Following Issuance or Denial

- For 60 days following the issuance or denial of a permit, any aggrieved party may file a petition for a contested case hearing.
- If a permit is contested by a third party, the newly issued permit will remain the effective control document until deemed otherwise by an Administrative Law Judge.
- If a permit is contested by the permittee/applicant, then the newly issued permit is stayed and the permittee/applicant continues to operate under their prior permit until a decision has been made by an Administrative Law Judge.

Application Information



State of Michigan

National Pollutant Discharge Elimination System Permit Application for Discharges to Surface Waters

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WATER BUREAU
PERMITS SECTION
P.O. BOX 30273
LANSING, MICHIGAN 48909-7773
TELEPHONE: 517-241-1346
FAX: 517-241-8133



Section I – General Information

- E-mail/Website Info

- E-correspondence

- Applicant/Permittee

- Facility

- Contact

Michigan Department of Environmental Quality- Water Bureau
WASTEWATER DISCHARGE PERMIT APPLICATION
SECTION I - General Information

Section I shall be completed by all permit applicants. Instructions for completing Section I, Pages 1 and 2, are on Page 2 of the Appendix. To submit additional information, see Page II, item 3.

Water Bureau Use Only		Cashier Use Only: 37000-40535-9412-481000-00	
Receipt #:		Permit ID #:	

PLEASE TYPE OR PRINT

1	NPDES PERMIT NUMBER		
APPLICANT	Applicant Name		
	Address		Address 2 or P.O. Box
	City	State	ZIP Code
	Telephone (with area code)	FAX (with area code)	Applicant Web Address
FACILITY	Facility Name 1		
	Facility Name 2		
	Facility Name 3		
	Street Address (do not use a P.O. Box Number)		
	City	State	ZIP Code
	Telephone (with area code)	FAX (with area code)	Facility Web Address
<input type="checkbox"/> Application Contact <input type="checkbox"/> Facility Contact <input type="checkbox"/> Discharge Monitoring Reports <input type="checkbox"/> Storm Water Billing <input type="checkbox"/> Biosolids Billing <input type="checkbox"/> NPDES Annual Billing	First Name	Last Name	
	Title	Business	
	Address 1	Address 2	
	City	State	ZIP Code
	Telephone (with area code)	FAX (with area code)	e-mail address

Section I – General Information

- Additional Facility Location Information
 - LUG (Local Unit of Government) e-mail address

the unused loading capacity that exists at the time of the request.

7. ADDITIONAL FACILITY LOCATION INFORMATION - Instructions for this item are on Page 2 of the Appendix.

A.	Local Unit of Government (LUG)				LUG e-mail address	
B.	County				Township	
C.	Town	Range	Section	¼	¼, ¼	Private (French) Land Claim
D.	Latitude				Longitude	

8. CERTIFIED OPERATOR

Does the facility have an MDEQ-certified operator? Yes No Instructions for this item are on Page 2 of the Appendix.

First Name		Last Name	
Certification Number		Certification Classification(s)	
Address 1		Address 2	
City		State	Zip Code
Telephone Number	Fax Number		e-mail address

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EQP 4659-A (Rev. 09/2008)

New Items - Section II & III

- No Change From Last Application checkbox

Michigan Department of Environmental Quality- Water Bureau
WASTEWATER DISCHARGE PERMIT APPLICATION
 SECTION II – Sanitary Wastewater

Section II is to be completed by Publicly-Owned Treatment Works discharging treated or untreated sanitary and industrial wastewater to the surface waters. Section II is also to be completed by all privately-owned treatment works discharging treated sanitary wastewater to the surface waters. The privately-owned treatment works include, but are not limited to, Mobile Home Parks, Campgrounds, Condominiums, Hotels and Motels, and Nursing Homes.

A. Facility Information

PLEASE TYPE OR PRINT

FACILITY NAME	NPDES PERMIT NUMBER
1. WATER SUPPLY INFORMATION List the source(s) of the water supply in the area served by sewers. Identify groundwater wells and surface water intakes, as well as the name(s) of any surface water(s) from which intake water is drawn.	

No Change From Last Application

- Submitted via DMR
 - Effluent Characteristics
 - Conventional
 - Toxics

Michigan Department of Environmental Quality- Water Bureau
WASTEWATER DISCHARGE PERMIT APPLICATION
 SECTION II – Sanitary Wastewater

B. Outfall Information

PLEASE TYPE OR PRINT

FACILITY NAME	NPDES PERMIT NUMBER	OUTFALL NUMBER				
2. EFFLUENT CHARACTERISTICS – CONVENTIONAL POLLUTANTS Existing Treatment Works Treating Domestic Sewage (TWTDS) are required to report data from effluent sampled and analyzed by the permittee for the parameters listed below. (See the Definition Section in the Appendix for sampling definitions, including "maximum daily concentration" and "maximum monthly concentration.") Retention Treatment Basins (RTBs) are required to provide a summary of influent and effluent data for the last three years. For analytical test requirements, or if alternate test procedures for any parameter listed below have been approved, see Page II, Item 5. If the data was previously submitted via DMR's, check the box and proceed to Item 3. New TWTDS are required to provide estimated effluent concentrations for the parameters listed below. <input type="checkbox"/> Check this box if additional information is included as an attachment. To submit additional information, see Page II, Item 3. Please Note: Rule 323.1062 allows the use of either <i>Escherichia coli</i> or Fecal Coliform Bacteria as the indicator that effluent has been disinfected. The MDEQ will use the indicator selected below in the permit issued based on this Application. <input type="checkbox"/> Use <i>Escherichia coli</i> as an indicator of disinfection. <input type="checkbox"/> Use Fecal Coliform Bacteria as an indicator of disinfection.						
Submitted via DMR's	Parameter	Maximum Monthly Concentration	Maximum Daily Concentration	Units	Number of Analyses	Sample Type
<input type="checkbox"/>	Biological Oxygen Demand - 5 day (BOD ₅)			mg/l		<input type="checkbox"/> Grab <input type="checkbox"/> 24 Hr Comp
<input type="checkbox"/>	BOD ₅ , Lowest % Removed		Do Not Use	%		<input type="checkbox"/> Grab <input type="checkbox"/> 24 Hr Comp
<input type="checkbox"/>	Carbonaceous BOD ₅ (CBOD ₅)			mg/l		<input type="checkbox"/> Grab <input type="checkbox"/> 24 Hr Comp
<input type="checkbox"/>	Carbonaceous BOD ₅ , Lowest % Removed		Do Not Use	%		<input type="checkbox"/> Grab <input type="checkbox"/> 24 Hr Comp
<input type="checkbox"/>	Ammonia Nitrogen (as N)			mg/l		<input type="checkbox"/> Grab <input type="checkbox"/> 24 Hr Comp
<input type="checkbox"/>	Total Suspended Solids			mg/l		<input type="checkbox"/> Grab <input type="checkbox"/> 24 Hr Comp
<input type="checkbox"/>	Total Suspended Solids, Lowest % Removed		Do Not Use	%		<input type="checkbox"/> Grab <input type="checkbox"/> 24 Hr Comp

New Items – Section II only

- Section II.A.2 (pg.6)
 - Service Area Info
 - Municipality e-mail

1. WATER SUPPLY INFORMATION No Change From Last Application
 List the source(s) of the water supply in the area served by sewers. Identify groundwater wells and surface water intakes, as well as the name(s) of any surface water(s) from which intake water is drawn.

2. SERVICE AREA INFORMATION No Change From Last Application
 Publicly-Owned Treatment Works are required to provide the following information: List the governmental jurisdictions (cities, townships, villages, etc.) that this facility serves (applicants should include themselves). What is the population in each jurisdiction? Is the jurisdiction's collection system separate, combined, or both? If the collection system is both separate and combined, what percentage is combined? To submit additional information, see Page II, item 3.

Municipality and E-Mail Address	Type of Collection System	Percent Combined	Population Served
_____	<input type="checkbox"/> Separate <input type="checkbox"/> Combined	_____	_____
_____	<input type="checkbox"/> Separate <input type="checkbox"/> Combined	_____	_____
_____	<input type="checkbox"/> Separate <input type="checkbox"/> Combined	_____	_____
_____	<input type="checkbox"/> Separate <input type="checkbox"/> Combined	_____	_____
_____	<input type="checkbox"/> Separate <input type="checkbox"/> Combined	_____	_____

Total population served by this facility: _____

Privately-Owned Treatment Works are required to provide the following information:
 Describe the area served by this facility (mobile home park, condominium, nursing home, etc.).

- Section II.B.1.H (pg.7)
 - Inflow and Infiltration

Maximum Daily Flow in a Single Day (MGD) _____

Batch dischargers are required to provide the following additional information:
 Is there effluent flow equalization? Yes No
 Batch Peak Flow Rate: _____ Number of batches discharged per day: _____

	Minimum	Average	Maximum
Batch Volume (gallons)	_____	_____	_____
Batch Duration (minutes)	_____	_____	_____

H. Inflow and Infiltration
 What is the current average daily volume of inflow and infiltration at this outfall? _____ Gallons/Day
 What corrective actions are being taken to minimize this inflow and infiltration?

New Items – Section III only

- Individual Parameter Waiver Request space

Michigan Department of Environmental Quality- Water Bureau
WASTEWATER DISCHARGE PERMIT APPLICATION
 SECTION III - Industrial and Commercial Wastewater

B. Outfall Information

PLEASE TYPE OR PRINT

FACILITY NAME		NPDES PERMIT NUMBER	OUTFALL NUMBER				
<p>3. EFFLUENT CHARACTERISTICS - CONVENTIONAL POLLUTANTS - Instructions for this item are on Page 4 of the Appendix.</p> <p><input type="checkbox"/> Check this box if additional information is included as an attachment. To submit additional information, see Page II, item 3.</p> <p>Please Note: Rule 323.1062 allows the use of either <i>Escherichia Coli</i> or Fecal Coliform Bacteria as an Indicator that effluent has been disinfected. The MDEQ will use the indicator selected below in the permit issued based on this Application. <input type="checkbox"/> Use <i>Escherichia Coli</i> as an Indicator of disinfection. <input type="checkbox"/> Use Fecal Coliform Bacteria as an Indicator of disinfection.</p>							
Submitted via DMR's	Waiver Request and the Rational Behind the Request	Parameter	Maximum Monthly Concentration	Maximum Daily Concentration	Units	Number of Analyses	Sample Type
<input type="checkbox"/>		Biochemical Oxygen Demand – five day (BOD ₅)			mg/l		<input type="checkbox"/> Grab <input type="checkbox"/> 24 Hr Comp
<input type="checkbox"/>		Chemical Oxygen Demand (COD)			mg/l		<input type="checkbox"/> Grab <input type="checkbox"/> 24 Hr Comp
<input type="checkbox"/>		Total Organic Carbon (TOC)			mg/l		<input type="checkbox"/> Grab <input type="checkbox"/> 24 Hr Comp
<input type="checkbox"/>		Ammonia Nitrogen (as N)			mg/l		<input type="checkbox"/> Grab <input type="checkbox"/> 24 Hr Comp
							<input type="checkbox"/> Grab

Future Events

- NPDES Application Workshop - 2009
 - Comprehensive Application Overview
 - Questions and Answer
 - One-on-One Consultations
 - Permit Processor Assignments
- Two Dates
 - Lansing – January 15, 2009
 - Grand Rapids – January 28, 2009
 - Announcement will be on MDEQ calendar and website.

Questions

