STATE OF UTAH, DEPARTMENT OF ENVIRONMENTAL QUALITY, DIVISION OF WATER QUALITY 195 North 1950 West, P.O. Box 144870, Salt Lake City, Utah 84114-4870 (801)536-4300

General Permit No. UTR361995

Notice of Intent (NOI) for Storm Water Discharges Associated with Construction Activity Under the UPDES SEE REVERSE FOR INSTRUCTIONS

Submission of this Notice of Intent constitutes notice that the party(s) identified in Section I of this form intends to be authorized by UPDES General Permit No. UTR361995 issued for storm water discharges associated with construction activity in the State of Utah. Becoming a permittee obligates such discharger to comply with the terms and conditions of the permit. ALL NECESSARY INFORMATION MUST BE PROVIDED ON THIS FORM.

	Permit Registration Date: 11/05/2012	Permit Start Date: 11/07/2012	Permit Expiration Date: 06/30/2013
	OPERATOR INFORMATION	*	*
	Name (Main operator): CONROCK RECYCLING	G INC.	Phone: 801-731-4725
	Address: 1351 S 1900 W		Status of Owner/Operator: PRIVATE.
	City: MARRIOTT-SLATERVILLE	State: UT	Zip: 84401
	Contact Person: RYAN BOWDEN		Phone: 801-731-4725
	Name (1st Co-permittee):		Phone:
	Address:		Status of Owner/Operator:
	City:	State: UT	Zip:
	Contact Person:		Phone:
	Name (2nd Co-permittee):		Phone:
	Address:		Status of Owner/Operator:
	City:	State: UT	Zip:
	Contact Person:		Phone:
	Name (3rd Co-permittee):		Phone:
	Address:		Status of Owner/Operator:
	Cįty:	State:	Zip:
	Contact Person:		Phone:
leaso	e copy this form if you have more co-permittees the	an what is allowed on this form.	-
II.	FACILITY SITE / LOCATION INFORMATI	ON	Is the facility located in Indian Country?
	Name: THE SUMMIT AT SKI LAKE - PHASE	9 AND 11	N (Y or N)
	Project No. (if any):		
	Address: 6750 E. VIA CORTINA DRIVE		County: WEBER
	City: HUNTSVILLE	State: UT Zip: 84	310
	Latitude: 41.3270443	Longitude: -111.8091625	
	Method (check one): USGS Topo Map, Scal	e EPA Web site	GPS Other

Ш.	SITE ACIVITY INFORMATION			
	Municipal Separate Storm Sewer System (MS4) Operator Name: WEBER COUNTY			
	Receiving Water Body: PINEVIEW RESERVOIR known			
	How far to the nearest water body? 3000 ft			
	List the Number of any other UPDES permits at the site:			
IV.	TYPE OF CONSTRUCTION (Check all that apply)			
	1.★ Residential 2. Commercial 3. Industrial 4.★ Road 5. Bridge 6.★ U	tility 7.X Contouring, Landscaping		
	8. Other (Please list)	4		
V.	BEST MANAGEMENT PRACTICES			
	Identify proposed Best Management Practices (BMPs) to reduce pollutants in storm water discharges: (Check all that apply)			
	1. Silt Fences 2. Sediment Pond 3. Seeding/Preservation of Vegetation 4. Mulching/Geotextiles 5. Check Dams			
	6. Structural Controls (Berms, Ditches, etc.)			
	7. Other (Please list)			
VI.	ADDITIONAL INFORMATION REQUIRED			
	Estimated Area to be Disturbed (in Acres): 3	otal Acreage: 3		
	A storm water pollution prevention plan has been prepared for this site and is to the best of my knowledge in Compliance with State and/or Local Sedim and Erosion Plans and Requirements. Y (Y or N) (A pollution prevention plan is required to be on hand before submittal of the NOL)			
	Enter the best e-mail address for contacting the permittee: conrockrecycling@gmail.	com		
VII.	CERTIFICATION: I certify under penalty of law that I have read and understand the Part I eligibility requirements for coverage under the general permit for storm water discharges from construction activities. I further certify that to the best of my knowledge, all discharges and BMPs that have been schedule and detailed in a pollution prevention plan will satisfy requirements of Part 1, and Part 3 of this permit. I understand that continued coverage under this storm water general permit is contingent upon maintaining eligibility as provided for in Part 1.			
	I also certify under penalty of law that this document and all attachments were prepared under the direction or supervision of those who have placed their signature below, in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or 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.			
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Print	Name (of responsible person for the main operator from first page):	Date:		
CON	IROCK RECYCLING INC.	11/05/2012		
Signature:				
Print	Name (of responsible person for the 1st co-permittee from first page):	Date:		
Signature:				
Print Name (of responsible person for the 2nd co-permittee from first page):		Date:		
Sign	ature:			
Sign	ature:			
Prin	t Name (of responsible person for the 3rd co-permittee from first page):	Date:		
Sign	ature:	Amount of Permit Fee Enclosed: \$ 110.00		