

STATE OF UTAH, DEPARTMENT OF ENVIRONMENTAL QUALITY, DIVISION OF WATER QUALITY

288 North 1460 West, P.O. Box 144870, Salt Lake City, Utah 84114-4870 (801)538-6146

NOI

Notice of Intent (NOI) for Storm Water Discharges Associated with **Construction Activity** Under the UPDES General Permit No. UTR340015
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. UTR340015 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.

Is this NOI seeking continuation for previously expired permit coverage at the same site? N (Y or N)
If yes, what is the number of the previous permit coverage? Permit No. _____

Permit Start Date: 04/07/10

Permit Expiration Date: 04/07/11

I. OPERATOR INFORMATION Date NOI is received at DWQ (to be completed by DWQ)

Name (Main operator): Pine Ridge Excavation and Landscape, LLC Phone: 435 994-2061
Address: 3080 E. 4100 N. Status of Owner/Operator: P - Private
City: Liberty State: UT Zip: 84310
Contact Person: Dan Lockwood Phone: 435 994-2061

Name (1st Co-permittee): Phone:
Address: Status of Owner/Operator:
City: State: Zip:
Contact Person: Phone:

Name (2nd Co-permittee): Phone:
Address: Status of Owner/Operator:
City: State: Zip:
Contact Person: Phone:

Name (3rd Co-permittee): Phone:
Address: Status of Owner/Operator:
City: State: Zip:
Contact Person: Phone:

Please copy this form if you have more co-permittees than what is allowed on this form.

II. FACILITY SITE / LOCATION INFORMATION

Is the facility located in Indian Country?

Name: Pine Ridge Landscape Stockpile N (Y or N)

Project No. (if any): _____

Address: _____ County: WEBER

City: LIBERTY State: UT Zip: 84310

Latitude: 41.365 Longitude: 111.873

Method (checkone): USGS Topo Map, Scale EPA Web site GPS Other

III. SITE ACTIVITY INFORMATION

Municipal Separate Storm Sewer System (MS4) Operator Name: Weber County

Receiving Water Body: Sheep Creek (this is known)

How far to the nearest water body? 10 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. Utility
- 7. Contouring, Landscaping
- 8. Other (Please list) Landscape product stockpile

V. 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

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 Sediment and Erosion Plans and Requirements. Y (Y or N)
(A pollution prevention plan is required to be on hand before submittal of the NOI.)

Project Start Date: 04/07/10
terminate on June 30, 2013)

Completion Date: 08/01/10


All coverage's issued under this NOI will

VII. CERTIFICATION: I certify under penalty of law that I have read and understand the Part 1 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 scheduled 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.

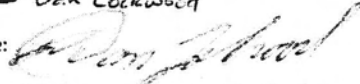
Print Name (of responsible person for the main operator from first page):

Date:

 Dan Lockwood

10/25/10

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:

Signature:

Print Name (of responsible person for the 3rd co-permittee from first page):

Date:

Signature:

Amount of Permit Fee Enclosed: \$ 100