DEQ USE ONLY
Application #:_____
File #:_____
Mail ID #2/#9:_____
LLID/RM:_____
ACD Fee Paid:_____
Notes:_____

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM PERMIT APPLICATION FOR SMALL MS4s

Oregon Department of Environmental Quality

DEQ USE ONLY
Received:_____
Amount Received:_____
Check #:_____
Deposit #:_____
Notes:_____
_____

A. REFERENCE INFORMATION

1. Legal Name:

2. Type of Entity: ☐ Federal ☐ State ☐ County ☐ City ☐ Special District ☐ Other:

3. Responsible Official: Title:
   Organization: Telephone #:
   Mailing Address: City, State, Zip Code:

4. Primary Contact: Title:
   Organization: Telephone #:
   Mailing Address: City, State, Zip Code:

5. Invoice to: Telephone #:
   Billing Address: City, State, Zip Code:

B. REQUIRED INFORMATION

1. LOCATIONAL INFORMATION

   a) The Urbanized Area within which the MS4 is located (or municipality if not located within an Urbanized Area):

   b) The latitude and longitude of the approximate center of the applicant's MS4:

Latitude			**Longitude**		
____	____	____	____	____	____
Deg.	Min.	Sec.	Deg.	Min.	Sec.

2. Is any portion of the MS4 located on Tribal Lands? ☐ YES ☐ NO
3. Name of receiving water(s):
4. Does the applicant plan to rely on another governmental entity(s) satisfy any permit obligations? ☐ YES ☐ NO If "YES", which entities will be sharing permit responsibilities :
5. Attach a Storm Water Management Program Plan, and an associated timetable for completing actions.

C. SIGNATURE OF LEGALLY AUTHORIZED REPRESENTATIVE

I hereby certify that the information contained in this application is true and correct to the best of my knowledge and belief. In addition, I agree to pay all permit fees required by Oregon Administrative Rules 340-045. This includes a renewal application fee to renew the permit and a compliance determination fee invoiced annually by DEQ to maintain the permit.

_____ _____

Name of Legally Authorized Representative (Type or Print) **Title**

_____ _____

Signature of Legally Authorized Representative **Date**

APPLICATION INSTRUCTIONS FOR NPDES GENERAL PERMIT FOR SMALL MS4s

Please answer all questions. An incomplete application will not be processed.
If the information requested is not applicable, please indicate as such.

A. REFERENCE INFORMATION:

1. Enter the legal name of the applicant. The permit will be issued to the legal name of the applicant.
2. Enter the type of entity that is applying for the permit. If the appropriate category is not listed as an option, enter the type of entity in the space next to "Other."
3. Enter the name, telephone number, and mailing address of the Responsible Official. The Responsible Official is the person that receives official correspondence from DEQ, such as renewal notices or notices of noncompliance, and may be contacted if there are questions about this application.
4. Enter the name, telephone number and mailing address of the Primary Contact if different from the Responsible Official. The Primary Contact is assigned storm water program implementation responsibility, and the person with specific knowledge of operations and activities addressed by the permit. This person may be contacted if there are specific questions about this application.
5. Enter invoicing information for billing purposes if different from the Responsible Official (e.g., "Invoice To: Business Office - Accounts Payable").

B. REQUIRED INFORMATION:

1. Enter the following information regarding the location of the MS4:
   a. The Urbanized Area within which the MS4 is located. Urbanized Areas are defined by the U.S. Census Bureau. Four Urbanized Areas exist in Oregon: Portland, Salem, Eugene, Corvallis, Medford, and Bend. To verify that your jurisdiction (or parts of your jurisdiction) is located within one of these Urbanized Areas, visit http://cfpub.epa.gov/npdes/stormwater/urbanmapresult.cfm?state=OR.
   b. The latitude and longitude of the approximate center of the MS4 in degrees, minutes, and seconds. Latitude and longitude can be obtained from DEQ's location finder web site at http://deq12.deq.state.or.us/website/findloc/
2. Provide the Department with a Land Use Compatibility Statement and associated findings document.
3. List the names of the Oregon surface water bodies that directly receive storm water discharged from the MS4.
4. Indicate whether you plan to collaborate with other governmental entities in satisfying permit requirements (i.e., sharing Storm Water Management Program implementation responsibilities). If so, list the entity(s) with which you plan to share responsibilities.
5. Develop and attach a comprehensive Storm Water Management Program Plan that addresses the six (6) minimum control measures required by federal regulations (40 CFR § 122.34). The SWMP must include the following information for each of the six minimum control measures:
   a. The structural and non-structural best management practices (BMPs) that the permittee or another entity will implement for each of the stormwater minimum control measures;
   b. The measurable goals for each of the BMPs including, as appropriate, the months and years in which the permittee will undertake required actions, including interim milestones and the frequency of the action;
   c. The person or persons responsible for implementing or coordinating the BMPs for the permittee's SWMP; and
   d. In addition to the requirements listed above, the permittee must provide a rationale for how and why the permittee selected each of the BMPs and measurable goals for the permittee's Stormwater Management Program.
   e. A timetable for completing each of these actions must be included in the attachment.
6. The storm water management program plan must be submitted to DEQ before permit issuance.

C. SIGNATURE OF LEGALLY AUTHORIZED REPRESENTATIVE:

The signature of a legally authorized representative must be provided in order to process this application. For city, county, state, federal, or other public entities the legally authorized representative is the principal executive officer or ranking elected official

D. FEE AND APPLICATION SUBMITTAL:

The application fee is $1,586. This total fee covers application processing ($782) and the first year's annual compliance determination fee ($804). Subsequent annual fees will be $804. Send this form and application fee to the following address (make your check payable to the Department of Environmental Quality):

Oregon Department of Environmental Quality
Water Quality Division
811 SW Sixth Avenue
Portland, OR 97204
1-800-452-4011 or (503) 229-5630