



**Salt Lake City Department of Public Utilities
Storm Water Division
1530 S. West Temple
Salt Lake City, Utah 84115**

Dewatering Activities Discharge Permit – Annual Renewal Form

(INTERNAL SLCDPU ONLY) **Date:** _____

PUT#: _____

Submission of this Notice of Intent for Permit Renewal (NOI-R) constitutes the understanding that the party(s) identified in Section I of this form intends to continue to be authorized under Salt Lake City’s Dewatering Activities Discharge Permit for Construction/Hydrostatic-Testing or Treated Groundwater. As a permittee, this renewal obligates such discharger to comply with all the terms and conditions of Salt Lake City’s Storm Water Ordinance Title 17.84, and applicable UPDES Dewatering Permits (UTG070000/UTG790000). If the State of Utah (DWQ) updates the UPDES permit(s) as part of 5-year permit cycle, then as Permittee the owner/operator will adhere to all new requirements of the State permit and adjust all plans to meet those requirements.

Check this box to confirm that no changes to original Permittee’s Owner and Operator (Section I), or DCP Coordinator (Section III) have occurred, and that the Type of Dewatering Activities (Section IV) has not changed. If any changes have occurred, please fill out the appropriate sections below to reflect the new roles of the respective party*.

***Must always enter the Site Information (Section II) and the new Estimated Dates of Dewatering Activities (Section V).**

I. OWNER INFORMATION:

Name (Owner): _____ Phone: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Contact Person: _____ Phone: _____
 Email: _____

OPERATOR INFORMATION:

Name (Operator): _____ Phone: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Contact Person: _____ Phone: _____
 Email: _____

If you have more co-permittees than space allows on this form, please use back of page.

II. SITE INFORMATION:

Name (Facility/Project): _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Site Contact Person: _____ Phone: _____
 Email: _____

III. DCP COORDINATOR:

Name of the contact person responsible for overseeing implementation and coordination of the DCP on behalf of the Owner/Operator if different from the Owner/Operator contact:
 Name: _____ Company: _____ Phone: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Email: _____

IV. TYPE OF DEWATERING

Identify the type of dewatering to be conducted onsite (check all that apply):
 Construction Dewatering (UTG070000) Hydrostatic Testing (UTG070000)
 Treated Ground Water (UTG790000)

V. ESTIMATED DATES OF DEWATERING ACTIVITIES:

Start Date: _____
 Estimated Completion Date: _____
 Estimated discharge flow rate [gallons per minute (gpm)]: _____ gpm



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VI. CERTIFICATION

I certify under penalty of law that I am duly authorized to sign this NOI, and that I have read and understand the Part 1 eligibility requirements for coverage under the UPDES Dewatering General Permits for discharges from construction activities, hydrostatic testing, or treated ground water. I further certify that to the best of my knowledge, all discharges and BMPs that have been scheduled and detailed in an approved dewatering control plan will satisfy requirements of this permit. I understand that continued coverage under this permit is contingent upon maintaining eligibility as provided herein.

I 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(s) 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.

If this permit is already expired, Dewatering activities shall not re-commence until the Owner and/or Operator have renewed a SLC City Discharge Permit for Dewatering Activities and Best Management Practices (BMPs) have been maintained per the approved DCP.

Owner: (print name and signature of responsible person for the Permittee from first page)

Printed Name: _____

Signature: _____ Date: _____

OR

Operator/Contractor: (print name and signature of the Operator from first page)

Printed Name: _____

Signature: _____ Date: _____

Fee: Amount of Permit Fee Enclosed: \$ _____

Who must file for a Notice of Intent for Permit Renewal (NOI-R) form?

- (a) Owner: The party that owns/leases the land on which the dewatering activities occur and has ultimate control over the project; OR
- (b) Operator: The party that has the day-to-day operational control of the project and site activities and ensures compliance with this permit.

Where to file a Notice of Intent for Permit Renewal (NOI-R) form:

If submitting electronically, submit the NOI form to: Stormwaterquality@slcgov.com

If submitting hardcopy, the NOI form with application fee must be sent to the following address:

**Salt Lake City Corporation
Department of Public Utilities
Attention: Storm Water Quality Program Manager
1530 South West Temple
Salt Lake City, UT 84115**

Permit Renewal Fee: \$132

IF PAYING BY MAIL, MAKE CHECKS PAYABLE TO: Salt Lake City Department of Public Utilities

IF PAYING ONLINE: Remit payment via the payment portal using the PUT# issued for this permit (see email correspondence from SLCDPU-SWQ for instructions)