Formerly Utilized Sites Remedial Action Program (FUSRAP)

ADMINISTRATIVE RECORD

for Niagara Falls Storage Site





Department of Energy

Oak Ridge Operations P.O. Box 2001 Oak Ridge, Tennessee 37831-8723

March 17, 1994

Storm Water Notice of Intent P.O. Box 1215 Newington, VA 22122

To Whom It May Concern:

NIAGARA FALLS STORAGE SITE (NFSS) - SPDES GENERAL PERMIT FOR STORM WATER DISCHARGES ASSOCIATED WITH INDUSTRIAL ACTIVITY - SUBMITTAL OF NOTICE OF INTENT (NOI)

Enclosed is a NOI for the NFSS for the purpose of obtaining coverage under a New York State Pollutant Discharge Elimination System general permit for discharge of storm water associated with industrial activity except construction activities. NFSS is a non-operating facility owned by the U.S. Department of Energy (DOE) and is assigned to the Formerly Utilized Sites Remedial Action Program.

At the request of the New York State Department of Environmental Conservation, DOE has reconsidered obtaining coverage for NFSS under an individual permit and is seeking coverage under a general permit. With submittal of this NOI, DOE agrees to abide by and comply with the terms and conditions of the general permit, and is officially withdrawing the individual permit application submitted for the site in September 1992.

If you have any questions, please contact Ronald E. Kirk at (615) 576-7477.

Sincerely.

Lester K. Price, Director

Former Sites Restoration Division

Enclosure

See Reverse for Instructions

SPDES FORM



New York State Department of Environmental Conservation 50 Wolf Road, Albany, New York 12233-3505

Notice of Intent (NOI) for Storm Water Discharges Associated with Industrial Activity Under the SPDES General Permit

Submission of this Notice of Intent constitutes notice that the party identified in Section I of this form intends to be authorized by a SPDES permit Issued for storm water discharges associated with industrial activity in the State in Section II of this form. 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.

The terms and conditions of the parint. All Necessary and office of the parint.	
I. Facility Operator Information	
Name: $V.S.$, $D.E.P.T.$, $O.F.$, $E.N.E.R.G.Y./*$, $B.E.C.H.T.E.L.$, $N.A.T.$) Phone:	6,1,5,5,7,6,7,4,7,7
Address: [O,A,K, ,R,1,D,6,E, ,O,P,E,R,A,T,1,O,N,S, , ,B,O,X, ,2,0,0,1,	Status of Owner/Operator:
City: [O,A,K,,R,I,O,G,E,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	3,7,8,3,7,-,8,7,2,3
II. Facility/Site Location Information	
Name: [N, 1, A, G, A, R, A, R, A, L, L, S, S, T, O, R, A, G, E, S, 1, T, E,]	Is the Facility Located on Indian Lands? (Y or N)
Address: [1,3,9,7, P,L,E,T,C,H,E,R, R,O,A,D]	
City: Y,O,U,N,G,S,T,O,W,N, State: N,Y ZIP Code:	1,4,1,7,4,-
Latitude: Longitude: Quarter: Section: Township:	Range: L
III. Site Activity Information	
MS4 Operator Name:	لب
Receiving Water Body: FOURMILE, CREEK	
If You are Filing as a Co-permittee, Enter Storm Water General Permit Number: Are There Existing Quantitative Data? (Y or N) Is the Mon	e Facility Required to Submit 1/2 itoring Data? (1, 2, or 3)
SIC or Designated Activity Code: Primary: LF 2nd: 1 3rd: 4th: 1	لب
If This Facility is a Member of a Group Application, Enter Group Application Number:	
If You Have Other Existing NPDES Permits, Enter Permit Numbers:	ــــــــــــــــــــــــــــــــــــــ
IV. Additional Information Required for Construction Activities Only	
Project Completion Start Date: Is the Storm Water	r Pollution Prevention Plan
, , , , , Estimated Area to be , , in Compliance with	n State and/or Local sion Plans? (Y or N)
V. Certification: I certify under penalty of law that this document and all attachments were prepared under my direction system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my to manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the b accurate, and complete. I am aware that there are significant penalties for submitting false information, including the pot knowing violations.	nquiry of the person or persons who est of my knowledge and belief, true
Print Name: * R.L. HARBERT, PROGRAM MANAGER, BNI	
LESTER K. PRICE DIRECTOR-DOEFS CO	<u>31,69,4</u>
Signature: Permit Number: 17700000 (Dasettine)	piration: August 1, 1998
TO EXPLANATORY STATEMENT	Printed on Recycled Paper

Explanatory Statement

The Department of Energy has signed as "owner and operator" where applicable and Bechtel National, Inc. has signed as co-operator this application for the permitted facility or activity. Department of Energy has determined that dual signatures best reflect the actual apportionment of responsibility under which the Department of Energy's responsibilities are for policy, programmatic, funding and scheduling decisions, as well as general oversight; and, the contractor's responsibilities for day-to-day operations (in accordance with general directions given by the Department of Energy as part of its general oversight responsibility), including but not limited to, the following responsibilities: waste analyses and handling, sampling, monitoring, record keeping, reporting, and contingency planning. For purposes of the certification required by 40 C.F.R. Section 122.22(d) and 40 C.F.R. Section 270.11(d), the Department of Energy's and Bechtel National, Inc.'s representatives certify, to the best of their knowledge and belief, the truth, accuracy and completeness of the application for their respective areas of responsibility.