



This is the Notice of Intent for Stormwater Discharges Associated with Industrial Activity under the State Pollutant Discharge Elimination System (SPDES) Multi-Sector General Permit GP-0-17-004.

SUBMISSIONNUMBER REVISIONNUMBER

304-PMA8-TAS2 2

SECTION 1

Owner/Operator Information

Federal Tax ID # 16-0978663

Enter the name of the legally responsible entity and the address of the executive office.

O/O Name

Jack Williams

O/O Street Address

3 Eagle Drive

O/O City

Endwell

Contact Information

Enter the name and contact information for the individual responsible for communicating with DEC regarding the implementation of the MSGP on behalf of the Owner/Operator

Contact First Name Contact Last Name

Carrie Bushnell

Contact Phone

607-687-1160

Contact Email

carrie@rjwilliamslumber.com

Facility Information

<u>racinty information</u>		
Enter the complete street address of the phy	sical location of the facility.	
Facility Name		
R.J. Williams, Inc.		
Facility Street Address		
3716 State Route 434		
Facility City		
Apalachin		
Facility State	Facility Zip	
NY	13732	
Provide the geographic coordinates in decim Interactive Map on the DEC's website can b	nal degrees for the latitude longitude of the fa e used to get coordinates.	acility. The NYSDEC Stormwater
Go to: www.dec.ny.gov/imsmaps/stormwate	er/viewer.htm	
42.078677,-76.19742500000001		
Latitude, Longitude		
Billing Information		
Yes		
Billing First Name		Billing Last Name
Jack		Williams
Billing Street Address		
PO Box 566		
Billing City		
Apalachin		
Billing State	Billing Zip	
NY	13732	

SECTION 2

1. Does your facility meet all the eligibility gain coverage under this general permit?	requirements listed in Part I.B of the SPDES Multi-Sector General Permit to	Yes (Continue with this
If No, contact the Department to discuss n	ext steps. If Yes, go to question 2(a).	
	on Plan (SWPPP) been prepared for this facility in PDES Multi-Sector General Permit GP-0-17-004? If No,	Yes (Continue with 2b)
2(b). How will you make your SWPPP ava	ilable to the public?	
SWPPP at Facility		
Yes		
SWPPP URL		
SWPPP Street Address		
SWPPP City		
SWPPP State	SWPPP Zip	
3. Does your facility conduct any activities make your facility ineligible for coverage up	listed in Part I.C of the SPDES Multi-Sector General Permit which would nder this general permit?	No (Continue)
If Yes, contact the Department to discuss i	next steps. If No, go to question 4.	
4. Provide the name of the nearest surface	e waterbody into which site runoff will discharge. If more than one, list all that apply.	
Susquehanna River		
5(a). Has the surface waterbody in question	on 4 been identified as an impaired waterbody as defined in MSGP 0-17	No (Skip to Question 6a)
To determine if the waterbody in Question	4 is impaired use the following links available on the Department's public	
MSGP Toolbox with Map of Impaired	http://www.dec.ny.gov/chemical/62803.html	
Impaired Waters	http://www.dec.ny.gov/chemical/31290.html	
limitations to which the facility is subject to	ment a pollutant of concern included in the benchmarks and/or effluent in Part VII of the SPDES Multi-Sector General Permit? A list of PDES Multi-Sector General Permit can be found in Appendix G of the	
	s to address the pollutant(s) of concern as required by Part III.D.2 of the o, contact the Department to discuss next steps.	
6(a). Does site runoff enter a Municipal Se culverts, etc.? If No, go to question 7(a).	parate Storm Sewer System (MS4) including roadside drains, swales, ditches,	Yes (Continue with 6b)
6(b). If Yes, enter the name of the municip	ality/entity that owns the Municipal Separate Storm Sewer System.	
7(a). Has this facility been assigned a SPE	DES MSGP ID under previous versions of the MSGP?	Yes
If No, go to question 8.		
7(b). If Yes, Provide the ID if known (Note:	All SPDES MSGP IDs begin with NYR00)	
The facility's existing ID is: NVP004536		

SECTION 3

8. Does this facility have coal piles that are exposed to precipitation?	No
9. Does this facility have salt piles that are exposed to precipitation?	No
10. Does this facility discharge stormwater from secondary containment areas for liquid bulk storage or transfer	No
11. SECTOR S - Is this facility an airport that uses more than 100,000 gallons of glycol-based deicing/anti-icing chemicals and/or 100 tons or more of urea on an average annual basis?	No
12. Is a Representative Outfall Waiver being claimed in accordance with Part IV.G?	No

(If Yes, please submit the Representative Outfall waiver form with the NOI)

13. For each stormwater discharge associated with industrial activity at your facility, identify the outfall number (e.g., 001, 002, etc.); the four digit Standard Industrial Classification (SIC) codes, the Sector Code, the Sector N Subsector, or 2-letter Industrial Activity Codes that best represent the principal products or services rendered by the facility for that drainage area; and the Benchmark (B) and/or Compliance (C) monitoring required; and the acreage of industrial activity exposed to stormwater for each outfall (round to nearest tenth of an acre):

Industrial Activities (SIC or 2-letter Codes)

Outfall Number 001	Primary SIC 2421	Sector A	Monitoring Required Benchmark (B)	Secondary SIC	<u>Sector</u>	Monitoring Required	<u>Tertiary</u> <u>SIC</u>	<u>Sector</u>	Monitoring Required	Acreage 7.5
SECTO	OR A	SECTOR C	SECTOR D	SECTOR I	E SECT	OR J	SECTOR L	SECTOR O	SECTOR S	
No)	No	No	No	N	0	No	No	No	