

Request for Authorization (RFA) Certification Form
NJPDES - Discharge to Surface Water
Short-term De Minimis Discharge General Permit (NJ0134511)



DIVISION OF WATER QUALITY
Bureau of Surface Water Permitting
Mail Code: 401-02B
401 East State Street, P.O. Box 420
Trenton, NJ 08625-0420

Date Certification Received by the DEP:

Any applicant who requests authorization under the New Jersey Pollutant Discharge Elimination System (NJPDES) General Permit Number NJ0134511 is required to designate an authorized agent who will be responsible for ensuring that the discharge to be authorized by this general permit complies with all applicable requirements of this permit and has certified this in writing. The Department shall receive an original copy of this Certification form and the untreated discharge analysis at least 14 days prior to the proposed commencement of discharge. A copy of this Certification form and the untreated discharge analysis shall also be submitted to the appropriate Enforcement Office 14 days prior to discharge.

Please complete the following Certification to request authorization under the Master General Permit for Short-term De Minimis Discharge(s):

1. Identify the name of Applicant/Operating Entity authorizing the work:

Business address: _____

Telephone Number: _____

Name of the Operating Entity's Principal Officer: _____

Title: _____

Telephone Number: _____

Email: _____

2. Identify the name of Authorized Agent for the Operating Entity:

Title: _____

Affiliation: _____

Address: _____

Telephone Number: _____

Email: _____

3. Describe the Project: _____

4. Identify the scheduled date(s) of the proposed discharge event(s):

5. State the approximate duration of the discharge:

6. The applicant must submit the analytical results of at least **one representative analysis of the untreated discharge water** from the proposed site with this certification form. The analysis shall address all of the parameters in Attachment 1 and must be performed by a New Jersey certified laboratory. For discharges to Category One waters, the effective term of authorizations under this general permit is 30 consecutive calendar days from the initiation of discharge. Should a discharge to Category One waters continue beyond the initial 30 days, a complete request for re-authorization (including a new collected sample analysis data and a new WET test result) must be submitted to the Department prior to the expiration of the authorization.

7. The proposed discharge volume will be less than 1 million gallons per day.

Please indicate one: Yes No

8. Identify the source of the water to be discharged:

9. List the number of well point(s) if applicable, and include the approximate total quantity of water to be discharged as well as the anticipated flow rate of the discharge:

10. Describe the designated discharge point:

11. Identify the location(s) of the discharge (street address, municipality, county, latitude and longitude):

12. Identify the (1) name, (2) classification, (3) 7Q10 flow values (from USGS) of the receiving waters to which the discharge is directed, and (4) the description of the method of transport (i.e., by hose, via storm sewer, via ditch, tributary, etc.):

(1) _____ (2) _____

(3) _____ (4) _____

13. Describe all best management practices (BMP) to be used, including any treatment provided:

The signature below must be completed in accordance with N.J.A.C. 7:14-4.9.

"I certify under penalty of law that this Certification Form and all attachments were prepared under my direction or supervision 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 purposely, knowingly, recklessly, or negligently submitting false information."

Signature of Operating Entity
(Principal Officer or Specified Official)

Printed Name/Title

Date of Signature

Signature of Authorized Agent

Printed Name/Title

Date of Signature