Information Needed for 316(b) Determination in Regards to General NPDES Permits

Permit Number _________________________________
Permittee Name _________________________________

1. Regarding type of facility and date it began operating:
   a. Is this a new offshore oil and gas facility which began operation after June 16, 2006?
      Yes [ ]     No [ ]
      (If yes, Phase III rules (40 CFR Part 125.130) may apply.)
   b. Is this a new facility, other than offshore oil and gas, which began operation after January 17, 2002?
      Yes [ ]     No [ ]
      (If yes, Phase I rules (40 CFR Part 125.80) may apply.)
   c. Is this an existing power plant which began operation prior to September 7, 2004?
      Yes [ ]     No [ ]
      (If yes, Phase II rules (40 CFR Part 125.90) may apply.)

2. Do you have a surface water intake?
   Yes [ ]     No [ ]
   (If “No,” go to question 3. If “Yes,” go to question 5. If more than one intake, provide information for each intake separately.)

3. Does the provider of your source water operate a surface water intake?
   Yes [ ]     No [ ]
   (If “Yes,” provide name and location of provider, including the latitude and longitude of the intake, and provide responses to questions 4 through 7. If “No,” stop.)

   Provider Name _______________________________
   Location of provide ___________________________
   Latitude and longitude of the intake
   _______________________________
   _______________________________

4. Is the provider a public water system (defined as a system which provides water to the public for human consumption or which provides only treated water, not raw water, to the industry with the NPDES permit)?
   Yes [ ]     No [ ]
   (If “Yes,” stop. If “No,” provide responses to questions 5 through 7.)
Information Needed for 316(b) Determination (continued)

Permit Number _________________________________
Permittee Name _________________________________

5. Is any water withdrawn from the source water used for cooling?
   (If “No,” stop. If “Yes,” continue.)

6. Approximately what percentage\(^2\) of water withdrawn is used exclusively for cooling water? __________%\(^2\)
   \(^2\)The percentage must be based on average monthly measurements.

7. Is treated process effluent used as part or all of the cooling water?
   Yes [ ]   No [ ]
   (If “Yes,” stop. If “No,” continue.)

8. Is the cooling water used in a once-through or closed cycle cooling system?
   Yes [ ]   No [ ]

9. When was the intake installed?
   (Please provide dates for all major construction/installation of intake components including screens.)

10. What is the location and configuration of the intake pipe in the source water? (e.g., source water name, onshore/offshore, at what depth, location in relation to bottom, etc.). Include a diagram of the intake.

11. What is the maximum design intake volume? (maximum pumping capacity in gallons per day)
    _______________________________ gallons/day

12. What is the average intake volume? (average intake pump rate in gallons per day average in any 30-day period)
    _______________________________ gallons/day
Information Needed for 316(b) Determination (continued)

Permit Number _________________________________

Permittee Name _________________________________

13. How is the intake operated? (e.g., continuously, intermittently, batch)

14. What is the mesh size of the screen on your intake?

15. What is the intake screen flow-through area?

16. What is the through screen design intake flow velocity?

17. What is the mechanism for cleaning the screen? (e.g., does it rotate for cleaning?)

18. Do you have any additional fish detraction technology on your intake?

19. Have there been any studies to determine the impact of the intake on aquatic organisms? (If so, please provide.)

20. Attach a site map showing the location of the water intake in relation to the facility, shoreline, water depth, etc.

"I certify under penalty of law that this document 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 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."

________________________  ____________________
Signature                      Date

________________________
Printed Name

________________________
Title

ADEM Form 014 01/11