



INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

We Protect Hoosiers and Our Environment.

100 N. Senate Avenue • Indianapolis, IN 46204
(800) 451-6027 • (317) 232-8603 • www.idem.IN.gov

Eric J. Holcomb
Governor

Bruno Pigott
Commissioner

VIA ELECTRONIC MAIL

September 30, 2020

Marshall@ReaWire.com

Mr. Roger Marshall, Plant Manager
Rea Magnet Wire Company
2800 Concord Rd.
Lafayette, IN 47909

Dear Mr. Marshall:

Re: Approval of New NPDES General
Permit Coverage No. ING250111
Rea Magnet Wire Company
2800 Concord Rd.
Lafayette, IN
Tippecanoe Co.

Our office has received your Notice of Intent (NOI) submittal for the above-referenced facility. We are pleased to inform you that the submittal is sufficient to comply with the NOI requirements for NPDES General Permit ING250000 for Once Through Non-Contact Cooling Water, and that this facility will be covered under this general permit.

Permit coverage will be in effect as of October 1, 2020 at which time you will be required to follow all terms and conditions of ING250000. Please note that the expiration date for this general permit coverage is October 31, 2020. This general permit is in the process of being renewed as this time. If your discharge is likely to extend beyond October 31, 2020, you will be required to submit a new Notice of Intent before this expiration date. We will keep you posted about any further requirements as this general permit is rewritten.

The NPDES general permit coverage number is referenced above. This number will be used as an identification number and should be included on all correspondence submitted to IDEM in relation to this NPDES general permit. This general permit coverage for the facility will include all outfalls listed on Attachment 1 to this letter.

You may obtain a copy of the permit and other related documents by visiting our web site at <http://www.in.gov/ideM/cleanwater/2480.htm> or you may contact the permit manager listed below to request a copy. You will be responsible for following the general permit requirements contained therein. This includes the reporting of several effluent parameters.

Reporting is to be done using the federal Discharge Monitoring Report (DMR) and the state Monthly Monitoring Report (MMR) form. The MMR form can be found on the internet at <http://www.in.gov/ideM/cleanwater/2396.htm>. Both the state and federal forms need to be completed and submitted on a routine basis. Please note that IDEM no longer accepts paper DMR or MMR forms; all NPDES and Individual Wastewater Permit holders will be required to submit their monitoring data to IDEM using NetDMR. Please see <https://www.IN.gov/IDEM/cleanwater/2422.htm> or contact Helen Demmings at (317) 232-8815 or HDemming@idem.IN.gov for more information on NetDMR.



Mr. Roger Marshall, Plant Manager
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IDEM is required to serve notice of its decision to include your facility for coverage under the general permit in accordance with the requirements of 327 IAC 5-3-14. It should also be noted that any appeal must be filed under procedures outlined in IC 13-15-6, IC 4-21.5, and the enclosed Public Notice. The appeal must be initiated by filing a petition for administrative review with the Office of Environmental Adjudication (OEA) within fifteen (15) days of the emailing of an electronic copy of this letter or within eighteen (18) days of the mailing of this letter. Addresses are as follows:

Director
Office of Environmental Adjudication
Indiana Government Center North
Room N103
100 North Senate Avenue
Indianapolis, IN 46204

Commissioner
Indiana Department of Environmental Management
Indiana Government Center North
Room 1301
100 North Senate Avenue
Indianapolis, IN 46204

The Office of Environmental Adjudication will provide parties who request review of this acceptance for coverage with notice of prehearing conferences, preliminary hearings, hearing, and stays or orders disposing of all proceedings. Nonparties may receive such notices without intervening and formally becoming parties in the proceeding by requesting copies of such notices from the Office of Environmental Adjudication.

Questions regarding this letter may be directed to Ms. C. Anne Burget of our staff at (317) 234-8745 or owqwwper@idem.IN.gov.

Sincerely,



Catherine Hess, Chief
Permits Administration Section
Office of Water Quality

Enclosure
cc: Tippecanoe County Health Department

ATTACHMENT 1

REA MAGNET WIRE COMPANY

GENERAL PERMIT APPROVAL NUMBER ING250111

EFFECTIVE DATE: OCTOBER 1, 2020

EXPIRATION DATE : OCTOBER 31, 2020

OUTFALLS PERMITTED

OUTFALL	LATITUDE	LONGITUDE	RECEIVING WATER
001	40°, 23', 14"	-86°, 51', 38"	ALCOA TILE TO ELLIOTT DITCH TO WEA CREEK TO WABASH RIVER

ATTACHMENT 2

**EFFLUENT LIMITATIONS AND MONITORING REQUIREMENTS
 REA MAGNET WIRE COMPANY
 EFFECTIVE DATE: OCTOBER 1, 2020**

Table 1

Parameter	Quantity or Loading			Quality or Concentration			Monitoring Requirements	
	Monthly average	Daily maximum	Units	Monthly average	Daily maximum	Units	Measurement frequency	Sample type
Flow[1][2]	Report	Report	MGD				Daily	24 Hr. Total
Total Monthly Flow [2]		Report	Mgal/month				1 x monthly	Recorded total
Total Residual Chlorine[2][6][7]					0.02	mg/l	2 x weekly	Grab
Temperature [2][3]				Report	See Table 3 Below	°F	2 x monthly	Grab
Oil and Grease[2][5]				Nondetect	Nondetect	mg/l	2 x monthly	Grab

Table 2

Parameter	Quality or Concentration			Monitoring Requirements	
	Daily minimum	Daily maximum	Units	Measurement frequency	Sample type
pH [2]	6.0	9.0	s.u.	2 x monthly	Grab

Table 3 (For all discharges except those to the Ohio River Main Stream)

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
Maximum Temperatures for Discharge (in degrees Fahrenheit (°F)) [3]	50	50	60	70	80	90	90	90	90	78	70	57

[1] Measurement of flow is required per 327 IAC 5-2-13(a)(2).

[2] Samples and measurements taken as required in this section shall be representative of the volume and nature of the monitored discharge. Temperature samples shall be representative of the highest temperature of the discharge. Samples taken in compliance with the monitoring requirements in this section shall be taken at a point representative of the discharge but prior to entry into surface waters of the state.

[3] Temperature requirements in Table 3 shall apply to all permittees except for those whose discharges are to the Ohio River main stream.

[4] Temperature requirements in Table 4 shall apply to only those permittees whose discharges are to the Ohio River main stream. (Table 4 omitted since it is not applicable for this discharge.)

[5] Grab samples shall be taken of the discharge water as it leaves the noncontact cooling water system or, if applicable, after receiving treatment. The permittee is required to investigate and eliminate the source of any detectable concentration of oil and grease (quantities in excess of 5 mg/l).

[6] The daily maximum water quality based effluent limit (WQBEL) for chlorine is greater than or equal to the limit of detection (LOD) but less than the limit of quantitation (LOQ) as defined below which is specified in the permit. Compliance with the daily maximum limit will be demonstrated if the observed effluent concentrations are less than the LOQ.

<u>Parameter</u>	<u>Test Method</u>	<u>LOD</u>	<u>LOQ</u>
Chlorine	4500-CI-D	0.02 mg/l	0.06 mg/l
Chlorine	4500-CI-E	0.02 mg/l	0.06 mg/l
Chlorine	4500-CI-G	0.02 mg/l	0.06 mg/l

Case-Specific LOD/LOQ

The permittee may determine a case-specific LOD or LOQ using the analytical method specified above, or any other test method which is approved by IDEM prior to use. The LOD shall be derived by the procedure specified for method detection limits contained in 40 CFR Part 136, and the LOQ shall be equal to 3.18 times the LOD. Other methods may be used if first approved by IDEM.

[7] The effluent limitation for TRC shall apply whenever chlorinated source water is used for noncontact cooling. For any months in which chlorinated intake water is not used, the permittee shall be allowed to report "N/A" on the monthly Discharge Monitoring Report for this parameter.

**STATE OF INDIANA
DEPARTMENT OF ENVIRONMENTAL MANAGEMENT**

PUBLIC NOTICE NO. 2020 -9D -GP

DATE OF NOTICE: September 30, 2020

The Office of Water Quality approves the following NPDES GENERAL PERMIT action:

NEW

REA MAGNET WIRE CO, General NPDES Permit No. ING250111, 2800 Concord Rd, Lafayette, IN (TIPPECANOE COUNTY). IDEM is approving this facility's general NPDES permit coverage under ING250000, which regulates discharges of once-through noncontact cooling water to surface waters of the state. This facility is requesting discharge authorization under this general permit ING250000 for a short-term project with a discharge to ALCOA tile . to Elliott Ditch to Wea Creek to the Wabash River. The effective date for the coverage is October 1, 2020. For more information regarding this General NPDES Permit coverage please contact Ms. C. Anne Burget at (317) 234-8745 or via e-mail at cburget@idem.IN.gov.

Notice of Right to Administrative Review

If you wish to challenge this permit, you must file a Petition for Administrative Review with the Office of Environmental Adjudication (OEA), and serve a copy of the petition upon IDEM. The requirements for filing a Petition for Administrative Review are found in IC 4-21.5-3-7, IC 13-15-6-1 and 315 IAC 1-3-2. A summary of the requirements of these laws is provided below.

A Petition for Administrative Review must be filed with the Office of Environmental Adjudication (OEA) within fifteen (15) days of the issuance of this notice (eighteen (18) days if you received this notice by U.S. Mail), and a copy must be served upon IDEM. Addresses are:

Director
Office of Environmental Adjudication
Indiana Government Center North
Room N103
100 North Senate Avenue
Indianapolis, Indiana 46204

Commissioner
Indiana Department of Environmental Management
Indiana Government Center North
Room 1301
100 North Senate Avenue
Indianapolis, Indiana 46204

The petition must contain the following information:

1. The name, address and telephone number of each petitioner.
2. A description of each petitioner's interest in the permit.
3. A statement of facts demonstrating that each petitioner is:
 - a. a person to whom the order is directed;
 - b. aggrieved or adversely affected by the permit; or
 - c. entitled to administrative review under any law.
4. The reasons for the request for administrative review.
5. The particular legal issues proposed for review.
6. The alleged environmental concerns or technical deficiencies of the permit.
7. The permit terms and conditions that the petitioner believes would be appropriate and would comply with the law.
8. The identity of any persons represented by the petitioner.
9. The identity of the person against whom administrative review is sought.
10. A copy of the permit that is the basis of the petition.
11. A statement identifying petitioner's attorney or other representative, if any.

Failure to meet the requirements of the law with respect to a Petition for Administrative Review may result in a waiver of your right to seek administrative review of the permit. Examples are:

1. Failure to file a Petition by the applicable deadline;
2. Failure to serve a copy of the Petition upon IDEM when it is filed; or
3. Failure to include the information required by law.

If you seek to have a permit stayed during the administrative review, you may need to file a Petition for a Stay of Effectiveness. The specific requirements for such a Petition can be found in 315 IAC 1-3-2 and 315 IAC 1-3-2.1.

Pursuant to IC 4-21.5-3-17, OEA will provide all parties with notice of any pre-hearing conferences, preliminary hearings, hearings, stays, or orders disposing of the review of this action. If you are entitled to notice under IC 4-21.5-3-5(b) and would like to obtain notices of any pre-hearing conferences, preliminary hearings, hearings, stays, or orders disposing of the review of this action without intervening in the proceeding you must submit a written request to OEA at the address above.

If you have procedural or scheduling questions regarding your Petition for Administrative Review please refer to OEA's website at <http://www.in.gov/oea>.



**NOTICE OF INTENT (NOI) LETTER
FOR ING250000 ONCE THROUGH
NONCONTACT COOLING WATER
GENERAL NPDES PERMIT**

State Form 55916 (10-15)
Approved by State Board of Accounts, 2015
INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

Mail this form and required attachments to:

INDIANA DEPARTMENT OF ENVIRONMENTAL
MANAGEMENT
Office of Water Quality, NPDES General Permits
100 North Senate Avenue, IGCN Room 1255
Indianapolis, IN 46204-2251

INSTRUCTIONS

- This form must be used to apply for coverage under the General NPDES Permit for wastewater from once through noncontact cooling water operations pursuant to NPDES Permit No. ING250000.
- Please type or print in ink. Do not use white-out to correct errors. Strike-through and initial any corrections.
- Further item-specific instructions are provided in Appendix A at the end of this form.

For questions regarding this form, the required attachments, and permit requirements, contact DEM General NPDES Permits at (317) 232-8704 or (800) 451-6027, ext. 28704 (with) in Indiana.

ELIGIBILITY REQUIREMENTS

This general permit covers discharges comprised solely of once through noncontact cooling water to surface waters of the state, except as excluded below. "Once through noncontact cooling water" is defined as "cooling water that:
(a) is used for the sole purpose of removing unwanted heat from a process;
(b) only makes one (1) pass through a unit that exchanges heat between the process and the cooling water (generally a heat exchanger); and
(c) does not come into contact with any raw material or manufactured product.
In the context of this general permit, the term excludes discharges from steam electric power generation facilities defined under 40 CFR 423."

The following discharges are NOT authorized by this permit:

- 1) direct discharges into waters that are designated as an Outstanding National Resource Water (ONRW) defined at IC 13-11-2-149.5 or an Outstanding State Resource Water (OSRW) defined at IC 13-11-2-149.6 and listed at 327 IAC 2-1.3-3(d);
- 2) discharges to a receiving stream when the discharge results in an increase in the ambient concentration of a pollutant which contributes to the impairment of the receiving stream for that pollutant as identified on the 303(d) list of impaired waters;
- 3) discharges containing water treatment additives (WTAs) which have not received prior written approval from DEM for the specific additive, use, and dosage at the particular facility for which the Notice of Intent (NOI) is submitted;
- 4) discharges from a facility that is not in compliance with section 316(b) of the Clean Water Act. 5) discharges to salmonid waters (as defined in 327 IAC 2-1.5-5(a)(3)) or to the St. Joseph River (tributary to Lake Michigan) upstream of the Twiti Branch Dam;
- 6) discharges from steam electric power generation facilities, as defined under 40 CFR 423; and
- 7) new discharges of once through noncontact cooling water where the discharge would be greater than 1/10 of the stream flow of the receiving water body. A minimum dilution ratio of 10:1 (ten parts stream water to one part effluent) must exist at the discharge location.

Any facility which obtains cooling water from a surface water intake source must satisfy the following conditions to be eligible for coverage under this general permit:

- 1) There shall be no impingement and entrainment of fish when drawing water from a surface water intake source.
- 2) the surface water intake source where the cooling water is obtained may not include threatened or endangered species in the vicinity of the cooling water intake structure;
- 3) the design intake flow must be less than 5 percent of the mean annual flow of the surface water intake source;
- 4) the design intake velocity must be less than 0.5 feet per second; and
- 5) source water withdrawals from surface waters cannot exceed 2 million gallons per day (MGD) under any circumstances.

By checking this box I certify that this project is exempt from the requirements of section 316(b) of the Clean Water Act, and meets all of the eligibility requirements for this general permit.

APPLICATION TYPE	PERMIT NUMBER IF APPLICABLE	OTHER PERMIT NUMBER(S) APPLICABLE TO SITE	DESCRIPTION OF PROPOSED MODIFICATION IF APPLICABLE
NEW <input checked="" type="checkbox"/>			
RENEW <input type="checkbox"/>			
MODIFICATION <input type="checkbox"/>			

PART A: GENERAL INFORMATION FOR FACILITY						
1. FACILITY NAME						
Rea Magnet Wire Company						
2. FACILITY MAILING ADDRESS (See Appendix A)				3. FACILITY PHYSICAL LOCATION (See Appendix A)		
STREET ADDRESS (number and street) 2800 Concord Rd.				STREET ADDRESS (number and street) 2800 Concord Rd		
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE	
Lafayette	IN	47909	Lafayette	IN	47909	
4. OWNER'S COMPLETE MAILING ADDRESS			5. FACILITY SIC CODE (See Appendix A)		6. FACILITY COUNTY	
COMPANY NAME Rea Magnet Wire			3357		Tippecanoe	
STREET ADDRESS (number and street) 3400 East Coliseum Blvd. ST # 200			7. LATITUDE AND LONGITUDE OF CENTER OF FACILITY SITE (See Appendix A)			
			LATITUDE		LONGITUDE	
			DEGREE	MINUTE	SECOND	DEGREE
CITY	STATE	ZIP CODE				
Fort Wayne	IN	46805	40	23	14	86
						51
						38
8. What is the nature of the primary business conducted at the facility or site? (Example: Food production facility)						
Rea Magnet Wire manufactures heavy magnet wire products including film coated copper and aluminum.						
9. Provide a brief description of the facility operations that result in the discharge. (Example: Once through non-contact cooling water cools production equipment)						
Once through non-contact cooling water for process equipment. This is anticipated to be only a 4 day discharge while existing cooling tower is replaced.						

PART B: CONTACT INFORMATION FOR RESPONSIBLE OFFICIAL (AUTHORIZED NOI SIGNATORY)	
Provide information regarding the responsible official who has the authorization to sign this NOI in accordance with 40 CFR 122.22. If the responsible official wishes to delegate signatory authority for reports and other correspondence related to this NOI, that delegation must be made in writing to IDEM. The delegation of authority may occur either via this NOI or via a letter (signed and dated by the responsible official) which shall be submitted to the address on the last page of this NOI form. (See Appendix A.)	
10. NAME OF RESPONSIBLE OFFICIAL	11. DELEGATED SIGNATORY PERSON (OR POSITION) TO SIGN REPORTS AND FILE ADDITIONAL NOI CONTENT REQUIREMENTS
Roger Marshall	Rick Hoebel
RESPONSIBLE OFFICIAL'S TITLE	DELEGATED SIGNATORY PERSON'S TITLE OR POSITION
Plant Manager	Safety & Environmental Pro
RESPONSIBLE OFFICIAL'S TELEPHONE NUMBER	DELEGATED SIGNATORY PERSON'S TELEPHONE NUMBER
765-477-8078	765-477-8022
RESPONSIBLE OFFICIAL'S FACSIMILE NUMBER	DELEGATED SIGNATORY FACSIMILE NUMBER
765-477-8113	765-477-8113
RESPONSIBLE OFFICIAL'S PERSON'S EMAIL ADDRESS	DELEGATED SIGNATORY PERSON'S EMAIL ADDRESS
rmarshall@reawire.com	rhoebel@reawire.com

PART C: OTHER CONTACT INFORMATION			
12. DISCHARGE MONITORING REPORTS CONTACT AND MAILING INFORMATION		CONTACT PERSON AND COMPANY NAME	
		Ricky Hoebel Rea Magnet Wire	
CONTACT TELEPHONE NUMBER		STREET ADDRESS (number and street)	
765-477-8022		2800 Concord Rd	
CONTACT EMAIL ADDRESS		CITY	STATE
rhoebel@reawire.com		Lafayette	IN
			ZIP CODE
			47909

13. ANNUAL FEE AND FINANCIAL CONTACT AND BILLING ADDRESS	CONTACT PERSON AND COMPANY NAME Same as Above		
CONTACT TELEPHONE NUMBER	STREET ADDRESS (number and street)		
CONTACT EMAIL ADDRESS	CITY	STATE	ZIP CODE
14. OPERATOR/OTHER CONTACT AND MAILING INFORMATION (IF APPLICABLE)	CONTACT PERSON AND COMPANY NAME Lew Tutton Rea Magnet Wire		
CONTACT TELEPHONE NUMBER 260-421-7440	STREET ADDRESS (number and street) 3400 East Coliseum Blvd. # 200		
CONTACT EMAIL ADDRESS ltutton@reawire.com	CITY Fort Wayne	STATE IN.	ZIP CODE 46805

PART D: SOURCE WATER INFORMATION			
Please provide information regarding the volume of water, in millions of gallons per day (MGD), which you propose to withdraw on a daily basis from each of the following sources for use for the once-through noncontact cooling water to be covered by this general permit. If you plan to use a surface water intake, you will also need to determine if you are eligible for general permit coverage due to restrictions of Section 316(b) of the Clean Water Act.			
WELL WATER	SURFACE WATER	PUBLIC WATER SUPPLY	UNITS
		Lafayette Renew 0.10	MGD

PART E: OUTFALL INFORMATION:									
Provide the following information for all outfalls/discharges to be covered by this general permit. You may attach additional sheets if necessary.									
15. OUTFALL NUMBER	16. LATITUDE			16. LONGITUDE			17. RECEIVING WATER (See Appendix A)	18. FOR ANY DISCHARGE INTO A STORM SEWER, IDENTIFY THE STORM SEWER OWNER. (See Appendix A)	19. ANTICIPATED DAILY VOLUME OF DISCHARGE in MGD AND METHOD OF DETERMINATION OF VOLUME
	deg	min	sec	deg	Min	sec			
#001	40	23	14	86	51	38	Alcoa tile to Elliott Ditch to Wea Creek to Wabash River		0.10 via flowmeter

PART F: EFFLUENT CHARACTERISTICS						
Provide the following information for all outfalls/discharges to be covered by this permit. You may attach additional sheets if necessary.						
A. Existing Sources - Provide measurements for the parameters listed in the left hand column, unless waived by the permitting authority. (See Appendix A)						
B. New Dischargers- Provide estimates for the parameters listed in the left-hand column below, unless waived by the permitting authority. Instead of the number of measurements taken, provide the source of estimated value. (See Appendix A.)						
	(1) Maximum Daily Value (include units)		(2) Average Daily Value (last year) (include units)		(3) Number of Measurements Taken (last year)	(4) Source of Estimate (if new discharger)
	Mass	Concentration	Mass	Concentration		
Biochemical Oxygen Demand (BOD)						
Total Suspended Solids (TSS)						
Fecal coliform (if present or believed present; units in count/100 ml)						
Total Residual Chlorine (if chlorine or chlorinated water is used)						
Oil and Grease						
Chemical Oxygen Demand (COD)						

Total Organic Carbon (TOC)					
Ammonia (as N)					
Discharge Flow	VALUE in MGD	0.10	VALUE in MGD		
Temperature (Winter)	VALUE in DEGREES FAHRENHEIT		VALUE in DEGREES FAHRENHEIT		
Temperature (Summer)	VALUE in DEGREES FAHRENHEIT	74 degrees F	VALUE in DEGREES FAHRENHEIT	96 degrees F	
pH (S.U.)	MINIMUM	7.81	MAXIMUM	8.56	

PART G: WATER TREATMENT ADDITIVES:

Please fill out the following additional information about the discharge from each outfall. Note that the only additives that may be used under this permit are those that have been previously approved for use at this site by the Indiana Department of Environmental Management and that are already in use at the time of this submittal. You may attach additional sheets if necessary. (See Appendix A.)

OUTFALL NUMBER	WATER TREATMENT ADDITIVES (WTAs) TO BE USED (ATTACH A COPY OF IDEM APPROVAL LETTER FOR EACH WTA TO BE USED.)
	N/A

PART H: ADDITIONAL REQUIRED ATTACHMENTS

23. PROOF OF PUBLICATION

The NOI letter must also contain proof of publication of the following statement in a newspaper of largest circulation in the area of the discharge:

(Supply your facility name, address, address of the location of the discharging facility) "is submitting a Notice of Intent to notify the Indiana Department of Environmental Management of our intent to comply with the requirements under National Pollutant Discharge Elimination System (NPDES) general permit ING250000 to discharge non-process wastewater from a once through non-contact cooling water operation. Discharge will be to (supply the names of the streams or water bodies receiving the discharge(s))"

"Any person wishing further information about this discharge may contact (supply your facility contact person's name and telephone or email information). The decision to issue coverage under this NPDES general permit for this discharge is appealable as per IC 13-15-6. Any person who wants to be informed of IDEM's decision regarding granting or denying coverage to this facility under this NPDES permit, and who wants to be informed of procedures to appeal the decision, may contact IDEM's offices at OWQWWPER@idem.IN.gov to be placed on a mailing list to receive notification of IDEM's decision."

This publication must be in the newspaper for a minimum of one day. Be advised that notices without the proper information will not be sufficient, and IDEM will require that a new public notice be placed in the newspaper. If the proof of publication is not available a legible photocopy of the article that contains the name of the newspaper and the date the article was run is also acceptable. Please attach proof of publication of this statement from the newspaper to the NOI.

24. REQUIRED MAPS

- A topographical map must be submitted with this NOI. The map must include the following items:
 - the location of the operation shown clearly and identified by name and by mark;
 - the location of each numbered outfall shown clearly and identified by number and by mark;
 - the receiving streams that each outfall discharges to shown clearly and identified by name;
 - any existing permanent structures or roads in the area shown clearly and identified by name; and
 - the location of any surface water intake structures
- A site map must be submitted. The site map must show and identify the significant structures, including all piping, all outfall and sampling locations, any surface water intake structures, and any flow paths from piping to outfall on the property.
- A flow schematic diagram for each outfall that is to be permitted must be submitted with this NOI. This diagram should show the path that the once through cooling water travels through the facility to the point where it is discharged. If multiple outfalls will follow essentially the same path, these outfalls may be included on one diagram. This diagram may be part of the site map.

PART I: IDENTIFICATION OF POTENTIALLY AFFECTED PERSONS

25. Pursuant to IC 4-21.5-3-5 and IC 13-15-3-1 each applicant for general permit coverage is required to provide a listing of all persons who are potentially affected by the discharge(s) to be covered under the general permit. PLEASE NOTE THAT MAILING LABELS ARE ALSO REQUIRED WITH THIS SUBMITTAL. (See Instructions in Appendix A.)

Please list here any and all persons whom you have reason to believe have a substantial or proprietary interest in this matter, or could otherwise be considered to be potentially affected under the law. Failure to notify any person who is later determined to be potentially affected could result in voiding our decision on procedural grounds. To ensure conformance with AOPA and to avoid reversal of a decision, please list all such parties. Attach additional names and addresses on a separate sheet of paper, as needed.

Name:	Name:
Street address (number and street):	Street address (number and street):
City/State/ZIP code:	City/State/ZIP code:
Name:	Name:
Street address (number and street):	Street address (number and street):
City/State/ZIP code:	City/State/ZIP code:
Name:	Name:
Street address (number and street):	Street address (number and street):
City/State/ZIP code:	City/State/ZIP code:
Name:	Name:
Street address (number and street):	Street address (number and street):
City/State/ZIP code:	City/State/ZIP code:
Name:	Name:
Street address (number and street):	Street address (number and street):
City/State/ZIP code:	City/State/ZIP code:
Name:	Name:
Street address (number and street):	Street address (number and street):
City/State/ZIP code:	City/State/ZIP code:
Name:	Name:
Street address (number and street):	Street address (number and street):
City/State/ZIP code:	City/State/ZIP code:
Name:	Name:
Street address (number and street):	Street address (number and street):
City/State/ZIP code:	City/State/ZIP code:
Name:	Name:
Street address (number and street):	Street address (number and street):
City/State/ZIP code:	City/State/ZIP code:

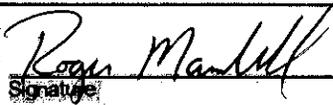
PART J: APPLICATION FEE

26. A \$50 fee is required to be submitted with this NOI in accordance with IC 13-18-20-12. The \$50 fee is applicable for each new permit, renewal, and modification. (Updates to information in Parts Band C shall not be subject to the \$50 fee for modifications.) Checks or money orders should be made payable to IDEM.

PART K: SIGNATORY CERTIFICATION STATEMENT

27. The NOI must be signed by the Responsible Official (as identified in Part B, Item 10. Also see Appendix A):

"I certify under penalty of law that this document and all its 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 knowing violations."

Roger Marshall Printed or Typed Name of Responsible Official	Plant Manager Title
 Signature	9/8/2020 Date signed (month, day, year)

PART L: 28. Please use the address at the top of page 1 of the NOI form to submit completed NOI form, attachments, and fee.

APPENDIX A: SUPPLEMENTAL INSTRUCTIONS

APPLICATION TYPE: For the purposes of this form, a modification would consist of removing an existing outfall, adding an outfall in a new location, updating the quantity of discharge anticipated, or updating the wastewater characterization if it is determined that an actual value differs significantly from what was stated on a previous submittal. Please note that outfall locations are considered, for the purposes of this permit, to be discrete points. If you relocate an outfall, you must apply for a modification to remove the outfall at the previous location, and add a new outfall, with a new outfall number, to the permit.

Changes in contact information must be reported, but you may do so with a letter signed by the signatory (Part B, Item 10) or delegated signatory authority (Part B Item 11). An NOI modification submittal is not required if simply changing contact information.

ELIGIBILITY REQUIREMENTS Item 3: Prior written approval from IDEM is required for any substance that is to be added to the water that is to be discharged. A copy of this approval must be submitted with your NOI form. To obtain this approval, see State Form 50000 (found on IDEM's website "Forms" page).

Part A, Item 1: Enter the name of the specific site location that is to be permitted. This will be a unique name to identify this single site.

Part A, Items 2 and 3: If the physical location is the same as the mailing address of the site to be permitted, then both of these sections will be the same. In this case you may fill in the first and fill in "same" in the second. However if the mailing address is not sufficient to allow a person who wishes to visit the site to find it, then section 3 should be a description of where the site itself is located. You may attach additional sheets if the boxes provided do not offer sufficient space to provide a proper location description.

Part A, Item 4: Enter the name and mailing address of the company that owns the site. This may be the name of the site itself but does not have to be. For example if "ABC Stone company" owns quarries at several locations, one of which this permit is being applied for, then "ABC Stone company" and location of ABC Stone Company's signatory (see Part B, item, 10, below) would be listed here.

Part A, Item 5: Enter the four digit Standard Industrial Classification (SIC) code which identifies the facility's primary activity. SIC codes can be obtained from the Standard Industrial Classification Manual, 1987, by accessing the Occupational Safety and Health Administration (OSHA) website or by contacting the Indiana Department of Workforce Development.

Part A, Item 7: The latitude and longitude of the approximate center of the facility site must be provided in the degrees/minutes/seconds format. Longitude and latitude can be obtained from United States Geological Survey (USGS) quadrangle or topographic map, by calling (888) 275-8747, or by accessing a locational website at <http://www.geocode.com> and conducting a search based on the facility's street address. This information may also be obtained with the use of a handheld GPS unit.

Longitude and Latitude in decimal degrees may be converted to degrees/minutes/seconds as follows:

Convert decimal latitude 45.1234567 to degrees/minutes/seconds

1. The numbers to the left of the decimal point is the degree(s) value: 45 degrees
2. To obtain minutes, multiply the first four numbers to the right of the decimal point by 0.006: $1234 \times 0.006 = 7.404$
3. The numbers to the left of the decimal point in the result obtained in Step 2 is the minute(s) value: 7 minutes
4. To obtain seconds, multiply the remaining three numbers to the right of the decimal from the result obtained in Step 2 by 0.06: $404 \times 0.06 = 24.24$.
5. The numbers to the right of the decimal point in Step 4 are not used; the number(s) to the left of the decimal point equal the second(s) value: 24 seconds.
6. The conversion for 45.1234567 is 45° (degrees), 7' (minutes), and 24" (seconds).

Part B, item 10: The Responsible Official must meet one of the following requirements:

- a) For a corporation, the official must be a responsible corporate officer, which means either of the following:
 - (1) A president, secretary, treasurer, any vice president of the corporation in charge of a principal business function, or any other person who performs similar policymaking or decision making functions for the corporation.
 - (2) The manager of one (1) or more manufacturing, production, or operating facilities, provided the manager is authorized to make management decisions which govern the operation of the regulated facility including having the explicit or implicit duty of making major capital investment recommendations, and initiating and directing other comprehensive measures to assure long term environmental compliance with environmental laws and regulations; the manager can ensure that the necessary systems are established or actions taken to gather complete and accurate information for permit application requirements; and where authority to sign documents has been assigned or delegated to the manager in accordance with corporate procedures.
- b) For a partnership or sole proprietorship, the official must be a general partner or the proprietor, respectively.
- c) For a municipality, state, federal, or other public agency or political subdivision thereof, the official must be either a principal executive officer or ranking elected official. For purposes of this section, a principal executive officer of a Federal agency is:
 - (1) The chief executive officer of the agency, or
 - (2) A senior executive officer having responsibility for the overall operations of a principal geographic unit of the agency (e.g., Regional Administrator of U.S. EPA).

Part E, Item 15: Enter a three number designation for each point where you will discharge, for example, 001, 002, 003, etc.

Part E, Item 16, see the instructions for Part A, Item 7, above.

Part E, Item 17: Enter the name of the waters of the state into which the discharges from each outfall will occur, as either the body of water itself, if the discharge is direct, or taking into account tributaries, if applicable. EXAMPLE: "Stone Creek", or "Connor Ditch to Stone Creek"; or "unnamed tributary to Connor Ditch to Stone Creek". Please label all water bodies on site map as well.

Part E, Item 18: If the discharge first enters a storm sewer prior, which then carries it to waters of the state, then please provide the name of the owner of the storm sewer. EXAMPLE: "City of Muncie Department of Public Works" or "LaPorte Municipal Storm Sewer System to Connor Ditch".

Part F, items 20 and 21: All pollutant levels must be reported as concentration and as total mass (except for discharge flow, pH, and temperature). Total mass is the total weight of pollutants discharged over a day. Use the following abbreviations for units:

Concentration	Mass
ppm.....parts per million	lbs.....pounds
mg/l.....milligrams per liter	ton.....tons (English tons)
ppb.....parts per billion	mg.....milligrams
ug/l.....micrograms per liter	g.....grams
kg.....kilograms	T.....tonnes (metric tons)
ng/l.....nanograms per liter	

A. Existing Sources

You are required to provide at least one analysis for each pollutant or parameter listed that is known or believed to be present by filling in the requested information under the applicable column. Data reported must be representative of the facility's current operation (average daily value over the previous 365 days should be reported). Parameters not present should be marked N/A.

The pollutants or parameters listed include average flow, biochemical oxygen demand (BOD), total suspended solids (TSS), fecal coliform (if believed present or if sanitary waste is discharged), pH, total residual chlorine (if chlorine is used), temperature (winter and summer), oil and grease, chemical oxygen demand (COD), total organic carbon (TOC), and ammonia (as N). The analysis of these pollutants or parameters must be done in accordance with procedures promulgated in 40 CFR Part 136. Grab samples must be used for pH, temperature, residual chlorine, oil and grease, and fecal coliform. For all other pollutants, 24-hour composite samples must be used. Any questions on sampling or analysis should be directed to (317) 232-8704 or OWQWWPER@idem.IN.gov.

The Commissioner may request that you do additional testing, if appropriate, on a case-by-case basis under Section 308 of the Clean Water Act (CWA). If you expect a pollutant to be present solely as a result of its presence in your intake water, provide this information on a separate piece of paper attached to the NOI form.

B. New Dischargers

An estimated maximum daily and average daily value for each pollutant or parameter (exceptions noted on the form) must be provided. Sampling and analyses are not required at the time of initial submittal. If, however, data from such analyses are available, then such data should be reported. The source of the estimates should be provided in the second column of item 22. Base the determination of whether a pollutant will present in the discharge on knowledge of the proposed facility's use of maintenance chemicals, and any analyses of the effluent or of any similar effluent. Estimates may also be provided based on available in-house or contractor's engineering reports or any other studies performed on the proposed facility. If a pollutant or parameter is expected to be present solely as a result of its presence in the intake water, add this information on a separate piece of paper attached to the NOI form. In providing the estimates, using the following codes to indicate the source of such information.

Engineering study Code

Actual data pilot plants	1
Estimates from other engineering studies	2
Data from other similar plants	3
Best professional estimates	4
Others	specify on the form

C. Testing Waivers

To request a waiver from reporting any of these pollutants or parameters, the applicant (whether a new or existing discharger) must submit to the permitting authority a written request specifying which pollutants or parameters should be waived and the reasons for requesting a waiver. This request should be submitted to the permitting authority either before submitting the NOI, or with the NOI. The permitting authority may waive the requirements for information about any pollutant or parameter if he determines that less stringent reporting requirements are adequate to support approval of discharge permit coverage. No extensive documentation of the request will normally be needed, but the applicant should contact the permitting authority if he or she wishes to receive instructions on what particular requests should contain.

Part G: Water Treatment Additives may only be used at outfalls to be covered by this general permit if the applicant has received prior approval from IDEM, as denoted in the Eligibility Requirements on Page 1 of the NOI form. For more information, please contact us at (317) 232-8704 or OWQWWPER@idem.IN.gov.

Part I, Item 25: Identification of Potentially Affected Persons

The Administrative Orders and Procedures Act (AOPA) IC 4-21.5-3-5(b), requires that the Indiana Department of Environmental Management (IDEM) give notice of its decision on your Notice of Intent to the following persons:

- 1) Each person to whom the decision is specifically directed;
- 2) Each person to whom a law requires notice to be given;
- 3) Each competitor who has applied to the IDEM for a mutually exclusive license, if issuance is the subject of the decision and the competitor's application has not been denied in an order for which all rights to judicial review have been waived or exhausted;
- 4) Each person who has provided the IDEM with a written request for notification of the decision;
- 5) Each person who has a substantial and direct proprietary interest in the issuance of the (permit/variance);
- 6) Each person whose absence as a party in the proceeding concerning the (permit) decision would deny another party complete relief in the proceeding or who claims an interest related to the issuance of the (permit) and is so situated that the disposition of the matter, in the person's absence may:
 - a) As a practical matter impair or impede the person's ability to protect that interest, or
 - b) Leave any other person who is a party to a proceeding concerning the permit subject to a substantial risk of incurring multiple or otherwise an inconsistent obligation by reason of the person's claimed interest.

IC 4-21.5-3-5(f) provides that we may request your assistance in identifying these people.

Additionally, IC 13-15-3-1 requires IDEM to send notice that the permit application has been received by the department to the following:

- a) The board of county commissioners of a county affected by the permit application and
- b) The mayor of a city that is affected by the permit application, or
- c) The president of a town council of a town affected by the permit application.

Please provide on the following form the names of those persons affected by these statutes, and **include mailing labels with your NOI**. These mailing labels should have the names and addresses of the affected parties along with our mailing code (65-42 PS) listed above each affected party listing.

Example: 65-42PS
John Doe
111 Circle Drive
City, State, Zip Code

Part K: See the instructions for Part B, item 10, above.

FIGURE 3 – EAST PAD AERIAL VIEW

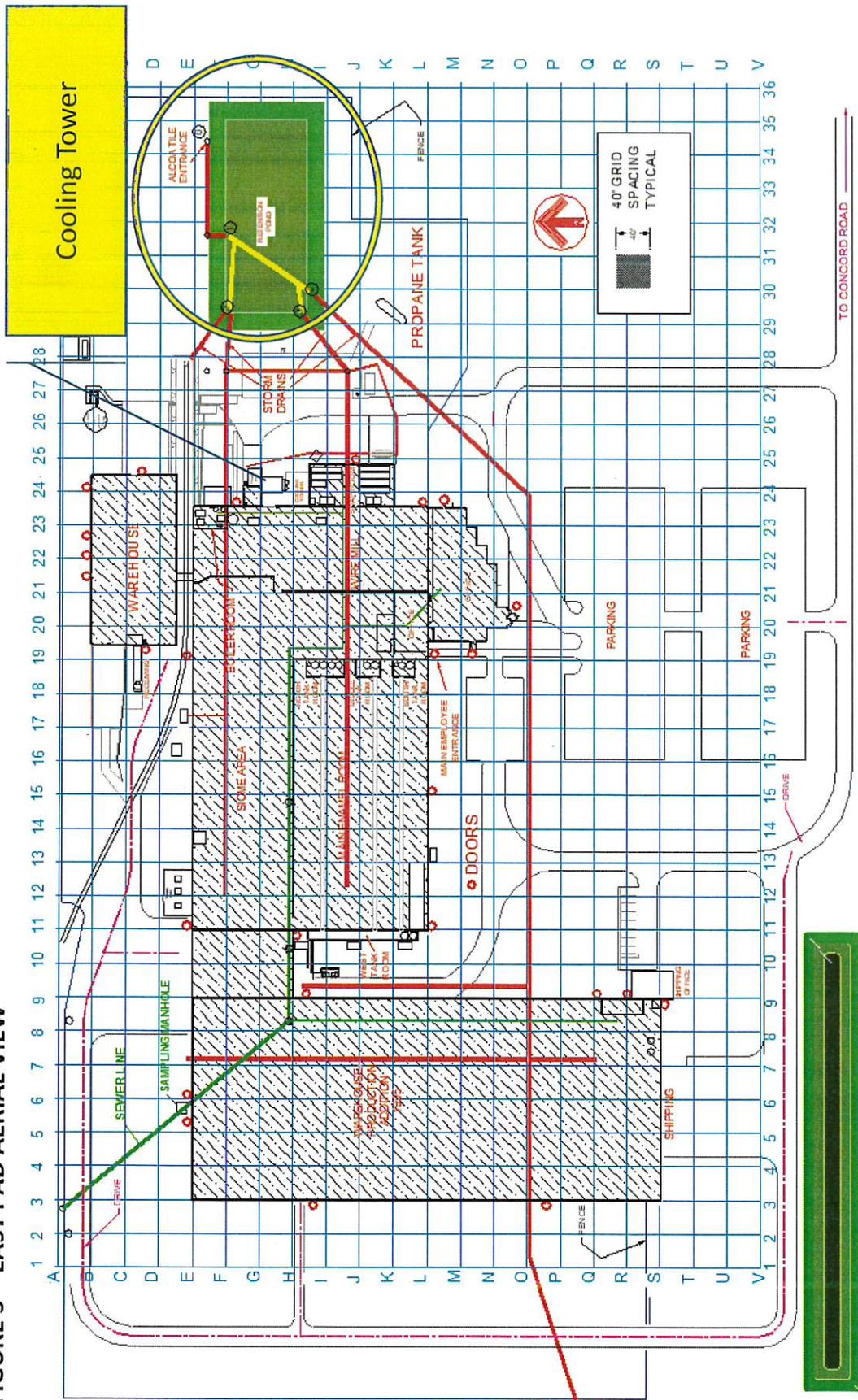


FIGURE 2 – SEWER AND STORM WATER FLOW DIAGRAM

