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Yavapai County Development Services

Environmental Unit

1120 Commerce Dr., Prescott AZ 86305

Phone 928-771-3214

10 S. 6th Street, Cottonwood AZ 86326  
Phone 928-639-8151

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## NOTICE OF INTENT TO DISCHARGE FOR A SEWAGE COLLECTION SYSTEM TYPE 4.01 GENERAL AQUIFER PROTECTION PERMIT

### GENERAL INFORMATION:

1. Project Name: \_\_\_\_\_

2. Assessor's Parcel Number (Every property has a parcel number, even streets): \_\_\_\_\_

3. Narrative Project Description: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Design Summary

Population Served by Proposed System \_\_\_\_\_ Number of manholes \_\_\_\_\_

Number of Service Connections \_\_\_\_\_ Number of lift stations \_\_\_\_\_

Total length of gravity sewer lines \_\_\_\_\_ Feet

Total length of force mains \_\_\_\_\_ Feet

Design flow of system at downstream point \_\_\_\_\_ Gallons per day

5. Existing ADEQ Permits for the Wastewater Treatment Plant

Name: \_\_\_\_\_ Physical Address for Treatment Plant: \_\_\_\_\_

APP (Aquifer Protection Permit) Number: P \_\_\_\_\_

AZPDES Permit Number: \_\_\_\_\_

Telephone No. \_\_\_\_\_ Fax No. \_\_\_\_\_

Email Address \_\_\_\_\_

6. Site Information

City \_\_\_\_\_

Location of downstream end of proposed system Township \_\_\_\_\_ Range \_\_\_\_\_ Section \_\_\_\_\_,

Latitude \_\_\_\_\_ ° \_\_\_\_\_ ' \_\_\_\_\_ " N      Longitude \_\_\_\_\_ ° \_\_\_\_\_ ' \_\_\_\_\_ " W

Project Location Description: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. Project Applicant (check one)     Owner     Operator

Name \_\_\_\_\_ Phone \_\_\_\_\_

Title/Firm \_\_\_\_\_ Email Address \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

8. Project Contact Person/Agent     Engineer     Consultant     Contractor     Attorney     Other

Name \_\_\_\_\_ Phone \_\_\_\_\_

Title/Firm \_\_\_\_\_ Email Address \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**9. Owner/Operator of Wastewater Collection System (person responsible for overall compliance)**

Name \_\_\_\_\_ Phone \_\_\_\_\_

Title/Firm \_\_\_\_\_ Email Address \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**10. Owner/Operator of Wastewater Treatment Facility (person responsible for overall compliance)**

Name \_\_\_\_\_ Phone \_\_\_\_\_

Title/Firm \_\_\_\_\_ Email Address \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**SUPPLEMENTAL INFORMATION:**

**11. Sewage Treatment Facility Capacity Assurance (Check Box if Complete)**

I have attached a completed Sewage Treatment Facility Capacity Assurance form.

**12. Capacity Assurance for a Sewage Collection System (Check One)**

I have attached a completed Sewage Collection System Capacity Assurance form.

The proposed sewage collection system does not deliver wastewater to a downstream collection system.

**13. Site Plan and Fee (Check Box if Complete)**

I have provided a general site plan showing the boundaries and key aspects of the project.

I have provided the appropriate fee.

**14. Construction Quality Drawings-3 Sets (Check Box if Complete)**

a. The plans and profiles for all sewer lines, manholes, force mains, depressed sewers, and lift stations with sufficient detail to allow Department verification of design and performance characteristics;

b. Relevant cross sections showing construction details and elevations of key components of the sewage collection system to allow Department verification of design and performance characteristics, including the slope of each gravity sewer segment stated as a percentage;

c. Drainage features and controls, and erosion protection as applicable, for the components of the project; and

d. Horizontal and vertical location of utilities within the area affected by the sewer line construction.

I have provided all the information listed in a through d above.

**15. Sewage Collection System Design Flows (Check Box if Complete)**

I have attached documentation of design flows for significant components of the sewage collection system and the basis for calculating the design flows.

**16. Operation and Maintenance Plan (Check One)**

I have attached an operation and maintenance (O & M) manual. The manual contains the 24-hour emergency number of the owner and operator of the sewage collection system and the address the manual can be inspected.

A current O & M plan is already on file with ADEQ. The specific file number of the project is \_\_\_\_\_

**17. Design Documents-2 Copies (Check Box if Complete)**

I have included design documents, including plans, specifications, drawings, reports, and calculations that are signed, dated, and sealed by an Arizona-registered professional engineer. The designer shall use good engineering judgment following engineering standards of practice, and rely on appropriate engineering methods, calculations, and guidance.

**18. Certification Statement (To be completed by the applicant in item 7 above)**

I, \_\_\_\_\_, certify that this Notice of Intent to Discharge and all attachments were prepared under my direction or authorization and all information is true, accurate and complete. I also certify that the sewage collection system described in this form is or will be designed and constructed in accordance with terms and conditions of the Type 4.01 General Aquifer Protection Permit (A.A.C. R18-9-E301) and applicable requirements of Arizona Revised Statutes Title 49, Chapter 2, and Arizona Administrative Code Title 18, Chapter 9 regarding aquifer protection permits. I am aware that there are significant penalties for submitting false information including permit revocation as well as the possibility of fine and imprisonment for knowing violations.

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Signature

Date