Tennessee Department of Environment and Conservation
Division of Water Resources
William R. Snodgrass Tennessee Tower, 312 Rosa L. Parks Avenue, 11th Floor, Nashville, TN 37243
888-891-8332 (TDEC)

Notice of Intent (NOI) of Coverage Under the Pesticide General Permit (PGP)

Submission of this completed NOI constitutes notice that the Operator identified in Section B intends to be authorized to discharge pollutants to waters of the state within the pest management area identified in Section C of the Pesticide General Permit (PGP). Submission of this NOI constitutes notice that the party identified in Section B of this form has read, understands, and meets the eligibility conditions of Part 1 of the permit; agrees to comply with all applicable terms and conditions of the permit; and understands that continued authorization under the permit is contingent on maintaining eligibility for coverage. To be granted coverage, all information required on this form must be completed. Please read and make sure you comply with all permit requirements, including the requirement for large entities to prepare a Pesticide Discharge Management Plan (PDMP) prior to NOI submittal. Refer to the instructions at the end of this form to complete your NOI.

A. Notice of Intent Status

1. Mark whether this is the first time you are requesting coverage under the PGP or if this is a change of information for a discharge already covered under the PGP. If this is a change of information, supply the NPDES permit tracking number for the discharge.

a. ☐ Original NOI Submission

b. ☐ NOI Change of Information: **TNP** (NPDES Permit Tracking Number)

Please note: When selecting A.1.b please fill out Section B (Operator Name and Mailing Address) and the fields of the NOI that need to be modified.

B. Operator Information

1. Operator Name: _____

2. Operator Type (check one):

a. ☐ Federal government

b. ☐ State government

c. ☐ Local government

d. ☐ Mosquito control district (or similar)

e. ☐ Irrigation control district (or similar)

f. ☐ Weed control district (or similar)

g. ☐ Other: If other, provide brief description of type of operator: _____

3. Are you a large entity as defined in Appendix A of the permit? (check one):

☐ Yes ☐ No

Please note: If you answer "Yes" to this question you are required to develop a Pesticide Discharge Management Plan (PDMP) and submit an Annual Report reflecting all pesticide uses for which you are requesting permit coverage under this NOI.

4. Mailing Address:

a. Street: _____

b. City: _____ c. State: ☐☐ d. ZIP Code: _____

e. Telephone: ___ – ___ – ___ Ext ___

f. Fax: ___ – ___ – ___

g. Contact Name: _____

h. E-mail: _____

C. Pest Management Areas: Complete Section C for each Pest Management Area for which coverage under Pesticide General Permit is desired.

Pest Management Area # ____ of # ____

1. Pest Management Area Name: _____

Provide a map of the location of the Pest Management Area (attach map) or describe the location of the Pest Management Area in detail.

_____

_____

_____

2. Are any of your activities (in this pest management area) for which you are requesting coverage under this NOI occurring on areas considered "federal facilities" as defined by the permit? ☐ Yes ☐ No

3. Mailing address and contact information of the pesticide applicator (or check here ☐ if same as provided in Section B):

a. Street: _____

b. City: _____ c. State: ☐☐ d. ZIP Code: _____

e. Telephone: _____ – _____ – _____ Ext f. Fax: _____ – _____ – _____

g. Contact Name: _____

h. E-mail: _____

4. Pesticide Use Patterns to be included in this Pest Management Area (check all that apply):

a. ☐ Mosquito and Other Flying Insect Pest Control c. ☐ Animal Pest Control

b. ☐ Weed and Algae Pest Control d. ☐ Forest Canopy Pest Control

5. Receiving Waters (check one):

a. ☐ Coverage requested for all waters of the state within the Pest Management Area identified above.

b. ☐ Coverage requested specifically for the following waters of the state within the Pest Management Area identified above.

_____

_____

c. ☐ Coverage requested for all waters of the state within the Pest Management Area identified above except for:

_____

_____

6. Outstanding National Resource Waters (ONRWs)

Is coverage requested for discharge to a Outstanding National Resource Water(s) of the United States? ☐Yes ☐ No
If yes, answer a and b:

a. Name of ONRWs: _____

b. Provide rationale for determination that pesticide discharge is necessary to protect water quality, the environment, and/or public health and that any such discharge will not degrade water quality or will degrade water quality only on a short-term or temporary basis:

_____

_____

7. Water Quality Impaired Waters

Operators are not eligible for coverage under this permit for any discharges from a pesticide application to waters of the state if the waters are identified as impaired by a substance which is either an active ingredient of the pesticide designated for use or is a product of degradation of such an active ingredient. See Part 1.1.2.1 of the permit. Check one:

a. ☐ Waters are NOT impaired by any substance which is either an active ingredient of a pesticide to be discharged or a product of degradation of such an active ingredient

b. ☐ Waters are on a current state list as being impaired by a substance which is either an active ingredient of a pesticide to be discharged or a product of degradation of such an active ingredient; however, evidence is attached documenting that the waters are no longer impaired.

D. Certification

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. On the basis of 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. A false statement is subject to the penalties of perjury.

Printed Name: _____

Title: _____

E-Mail: _____

Signature/Responsible Official: _____ Date: ___ / ___ / _____

NOI Preparer (Complete if NOI was prepared by someone other than the certifier)

Preparer Name: _____

Organization: _____

Phone: _____ – _____ – _____ Ext _____ Date: ___ / ___ / _____

E-Mail: _____

Instructions for Completing the Notice of Intent (NOI) for Coverage Under the Pesticide General Permit (PGP) for Discharges from the Application of Pesticides

Who Must File a NOI?

Any Operator, as described in the Part 1.2.2 of the permit and meeting the eligibility requirements identified in Part 1.1 of the permit and Table 1 below must submit a complete and accurate NOI. As required in the permit, only certain Operators that are also Decision-makers must submit NOIs.

Table 1. Decision-Makers Required to Submit NOIs

PGP Part/ Pesticide Use	Which Decision-Makers Must Submit NOIs?	For Which Pesticide Application Activities?
All four use patterns identified in Part 1.1.1	Any Decision-maker with an eligible discharge to Outstanding National Resource Waters consistent with Part 1.1.2.2	Activities resulting in a discharge to a Outstanding National Resource Waters
1.1.1(a) - Mosquito and Other Flying Insect Pest Control	Any Agency for which pest management for land resource stewardship is an integral part of the organization's operations.	All mosquito and other flying insect pest control activities resulting in a discharge to waters of the state
	Mosquito control districts, or similar pest control districts	All mosquito and other flying insect pest control activities resulting in a discharge to waters of the state
	Local governments or other entities that exceed the annual treatment area threshold identified here	Adulticide treatment if more than 6,400 acres during a calendar year
1.1.1(b) - Weed and Algae Pest Control	Any Agency for which pest management for land resource stewardship is an integral part of the organization's operations.	All weed and algae pest control activities resulting in a discharge to waters of the state
	Irrigation and weed control districts, or similar pest control districts	All weed and algae pest control activities resulting in a discharge to waters of the state
	Local governments or other entities that exceed the annual treatment area threshold identified here	Treatment during a calendar year if more than either: 20 linear miles OR 80 acres of water (i.e., surface area)
1.1.1(c) - Animal Pest Control	Any Agency for which pest management for land resource stewardship is an integral part of the organization's operations.	All animal pest control activities resulting in a discharge to waters of the state
	Local governments or other entities that exceed the annual treatment area threshold identified here	Treatment during a calendar year if more than either: 20 linear miles OR 80 acres of water (i.e., surface area)
1.1.1.(d) - Forest Canopy Pest Control	Any Agency for which pest management for land resource stewardship is an integral part of the organization's operations.	All forest canopy pest control activities resulting in a discharge to waters of the state
	Local governments or other entities that exceed the annual treatment area threshold identified here	Treatment if more than 6,400 acres during a calendar year

One NOI can be submitted for multiple pest management areas for which you are seeking permit coverage.

When to File the NOI Form?

Do not file your NOI until you have obtained and thoroughly read a copy of the permit. A copy of the permit is on the division's website http://tn.gov/environment/permits/.The permit describes procedures to ensure your eligibility, prepare your Pesticide Discharge Management Plan (PDMP), and complete the NOI form questions—all of which must be done before you sign the NOI certification statement attesting to the accuracy and completeness of your NOI. You will also need a copy of the permit once you have obtained coverage so that you can comply with the implementation requirements of the permit. Note: PDMP is not required for any application made in response to a Declared Pest Emergency Situation, as defined in Appendix A of the permit.

All eligible discharges are authorized for permit coverage through September 1, 2012, without submission of an NOI. For any discharges after September 1, 2012, Decision-makers meeting the eligibility requirements identified in the Part 1.1of the permit and Table 1 must submit a complete and accurate NOI according to Tables 2, and 3 and consistent with the requirements of the Part 1.2 of the permit. For example, for discharges occurring on or before September 1, 2012, but continuing after September 1, 2012, NOIs are due no later than August 21, 2012, to ensure uninterrupted coverage.

Table 2. NOI Submittal Deadlines and Discharge Authorization Dates for Discharges from the Application of Pesticides

After September 1, 2012, any eligible discharge for which an NOI is required must submit an NOI consistent with the earliest due date identified below. NOI due dates for any discharges occurring on or after September 1, 2012 are as follows:

Operator Type	NOI Submission Deadline	Discharge Authorization Date[1]
Any Decision-maker with a discharge in response to a Declared Pest Emergency for which that activity triggers the NOI requirement identified in Part 1.2.2	Not later than 30 days after beginning discharge.	Immediately upon beginning to discharge for activities conducted in response to a Declared Pest Emergency Situation.
Any Decision-maker that exceeds any annual treatment area threshold.	At least 10 days before exceeding an annual treatment area threshold.	No earlier than 10 days after the division posts on the Internet receipt of a complete and accurate NOI.
Any Decision-maker otherwise required to submit an NOI as identified in Table 1-1.	At least 10 days before any discharge for which an NOI is required.	No earlier than 10 days after the division posts on the Internet receipt of a complete and accurate NOI.

[1] On the basis of a review of an NOI or other information, the division may delay authorization to discharge beyond any timeframe identified in Table 1-2, determine that additional technology-based and/or water quality-based effluent limitations or other conditions are necessary, or deny coverage under this permit and require submission of an application for an individual NPDES permit, as detailed in Part 1.3 of the permit.

Table 3. NOI Change of Information Submittal Deadlines and Discharge Authorization Dates

Operator Type	NOI Submission Deadline	Discharge Authorization Date
Any Decision-maker requiring permit coverage for a pest management area not identified on a previously submitted NOI for this permit, except for discharges to any Outstanding National Resource Waters. Except for such waters, changes other than identification of a new pest management area or a new pesticide use pattern do not require a revised NOI submittal.	At least 10 days before beginning to discharge in that newly identified area unless discharges are in response to a Declared Pest Emergency Situation in which case not later than 30 days after beginning discharge.	No earlier than 10 days after the division posts on the Internet the receipt of a complete and accurate NOI unless discharges are in response to a Declared Pest Emergency Situation in which case coverage is available immediately upon beginning to discharge from activities conducted in response to Declared Pest Emergency Situation. (continued on next page)
Any Decision-maker discharging to a Outstanding National Resource Waters water not identified by name on a previously submitted NOI for this permit.	At least 10 days before beginning to discharge in that newly identified Outstanding National Resource Waters unless discharges are in response to a Declared Pest Emergency Situation in which case not later than 30 days after beginning discharge.	No earlier than 10 days after the division posts on the Internet receipt of a complete and accurate NOI unless discharges are in response to a Declared Pest Emergency Situation in which case coverage is available immediately upon beginning to discharge from activities conducted in response to Declared Pest Emergency Situation.

Where to File the NOI Form

The applicant shall submit the NOI to the division's Nashville Central Office at the following address:

Division of Water Resources
Attn: Pesticide General Permit
William R. Snodgrass Tennessee Tower
312 Rosa L. Parks Avenue, 11th Floor
Nashville, TN 37243

Completing the NOI Form

To complete this form, type or print in uppercase letters in the appropriate areas only. Please make sure you complete all questions. Make sure you make a photocopy for your records before you send the completed original form to the address above.

Section A. NOI Status

1. Indicate if this is the first time you are requesting coverage under the permit or if this is a change of information.

a. Check this box if this is the first time you are requesting coverage under the permit for these discharges. If this is the first time you are requesting coverage, refer to Table 2 for NOI submittal deadlines and discharge authorization dates. Note: All eligible discharges are authorized for permit coverage through September 1, 2012, without submission of an NOI.

b. Check this box if this is a change of information for a discharge already covered under the permit. If this is a change of information, supply the NPDES permit tracking number that you received in your confirmation letter or e-mail from the division. For additional details regarding a change of information, see Table 3. Also fill out Section B of this form (Operator Name and Mailing Address) and the associated fields of information that need to be modified on the NOI.

Section B. Operator Information

1. Provide the legal name of the person, firm, public organization or any other public entity that is the Decision-maker for the pesticides applications described in this notice. A Decision-maker is an Operator who has control over the decision to perform pesticide applications including the ability to modify those decisions that result in a discharge to waters of the state.
2. Indicate the type of Operator: federal government, state government, local government, mosquito control district (or similar), irrigation control district (or similar), weed control district (or similar), or other. If other, provide brief description of type of Operator in the space provided.
3. Indicate whether or not you are a "large entity" as defined in Appendix A of the permit. Note that if you are a large entity, you are required to develop a Pesticide Discharge Management Plan (PDMP) and submit future Annual Reports reflecting all pesticide uses for which you are requesting permit coverage under this NOI.
4. Provide the Decision-maker's mailing address, telephone number, fax number (optional), name, and e-mail address. Correspondence will be sent to this address.

Section C. Pest Management Area: Information for each Pest Management Area for which coverage under EPA's Pesticide General Permit is desired.

1. Indicate whether you are submitting an NOI for multiple pest management areas. A pest management area is the area of land, including any water, for which you have responsibility and are authorized to conduct pest management activities as covered by this permit (e.g., if you are a mosquito control district, your pest management area is the total area of the district). You must complete a Section C for each pest management area. If you are submitting an NOI for only one area, enter "1" of "1." If you are submitting NOIs for multiple pest management areas, enter the number for the NOI for which you are requesting coverage followed by the total number of pest management areas for which you are requesting coverage. Enter the name of the pest management area. Attach a map of the pest management area or describe the location of the pest management area in the space provided.
2. Indicate whether pesticide application will occur on a Federal Facility, as defined in Appendix A of the permit.
3. Enter the mailing address of the contact person for the pest management area. If this address is the same as the Decision-maker's mailing address, indicate that by checking the box. If it is a different address, enter the mailing address, telephone number, fax number (optional), contact name, and e-mail address.
4. Indicate the pesticide use patterns for the pest management area for which the NOI is required. For additional information regarding pesticide use patterns, see Part 1.1.1 of the permit. Check all the use patterns that apply to the pest management area.
5. Indicate if permit coverage is being requested for all waters of the state within the pest management area or if permit coverage is being requested to specific waters of the state within the pest management area. If specific waters are being requested, write the names of the waterbodies. If permit coverage is being requested for all waters of the state within the pest management area except for specific waterbodies, name those specific waterbodies in the space provided.
6. Indicate if permit coverage is being requested to discharge to a Outstanding National Resource Waters. If yes, write the name(s) of the water(s) in the space provided. Describe and demonstrate why it is necessary to apply the pesticide discharge to protect the water quality, environment, and/or public health and that any such discharge will not degrade water quality or will degrade water quality only on a short-term or temporary basis.
7. Verify that waters within the pest management area are either not impaired by substances which are either active ingredients in the pesticide planned for use or products of degradation of such active ingredients, OR that evidence shows that the target waters in question are no longer impaired. See Part 1.1.2.1 of the permit for more information on discharges to water quality impaired waters.

Section D. Certification

Enter the certifier's printed name and title. Sign and date the form. For more information about the certification statement and signature, see Appendix B of the permit. (CAUTION: An unsigned or undated form will not be accepted.) State statutes provide for severe penalties for submitting false information. Federal regulations require this application to be signed as follows:

For a corporation: by a responsible corporate officer, means:

(i) president, secretary, treasurer, or vice-president of the corporation in charge of a principal business function, or any other person who performs similar policy or decision-making functions for the corporation, or

(ii) the manager of one or more manufacturing, production, or operating facilities, provided the manager is authorized to make management decisions that govern the operation of the regulated activity 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;

For a partnership or sole proprietorship: by a general partner or the proprietor; or

For a municipal, state, federal, or other public facility: by either a principal executive or ranking elected official.

If the NOI was prepared by someone other than the certifier (for example, if the NOI was prepared by the PDMP contact or a consultant for the certifier's signature), include the name, organization, phone number and e-mail address of the NOI preparer.