

I. Is this facility a proposed **stationary source** which is one of the 28 industrial categories listed in the instructions and which will potentially

Act and may affect or be located in an attainment area? (FORM 5)

emit 100 tons per year of any air pollutant regulated under the Clean Air

For EPD Use Only Assigned Permit No GA0033596

Georgia National Pollutant Discharge Elimination System Application Part 1

		A	pp	licati	on Part 1				
This application includes Information not subject to disclosure under Georgia Law.									
Ple	ease check all of the	e applicable box(s) and ent	er the	e associa	nted information:				
	New discharger	☑ Existing NPDI	ES di	S discharger		Change of Inform	nation		
		Existing NPDI No.	ES Permit		GA0033596				
De	scribe Modification	Requested:							
P(DLLUTANT C	HARACTERISTICS	S						
the for	s" to any questions, yo box in the third columms. You may answer	olete A through J to determine to must submit this form and to if the supplemental form is a 'no' if your activity is exclude initions of bold-faced terms.	he sup attache d fron	oplementa ed. If you	al form listed in the parent answer "no" to each que	othesis f	ollowing the question. ou need not submit an	Mark 'y of the o, Secti	"X" in
Specific Questions				No	Specifi	Specific Questions		Yes	No
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S. ? (FORM 2A)				C	3. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production acility which results in a discharge to waters of the U.S.? (FORM 2B)				Х
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)					D. Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S. ? (FORM 2D)				X
E. Does or will this facility treat, store, or dispose of hazardous wastes ? (FORM 3)				b	Do you or will you inject at this clow the lowermost stratum conta ell bore, underground sources of	ining, with	hin one quarter mile of the		
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)				a	. Do you or will you inject at this mining of sulfur by the Frasch p tu combustion of fossil fuel, or re	rocess, sol	lution mining of minerals, in	h	

J. Is this facility a proposed stationary source which is NOT one of the 28

industrial categories listed in the instructions and which will potentially

emit 250 tons per year of any air pollutant regulated under the Clean Air

Act and may affect or be located in an **attainment area**? (FORM 5)

SECTION I. FAC	CILII	TY INFORMA	ATION	N				
Facility Type of Ownershi Please check the applicat		cipality						
<u>POTW</u>	Non-P	<u>OTW</u>			<u>Federal</u>			
☐ 2A – Municipal Wastewater Discharge Application	Aquati □2C □2D	 Concentrated Anic Animal Production Industrial Wastew New Sources & Notes Industrial Stormw 	on vater Discl Vew Disch	harge Application	2D – New		vater Discharge Application New Dischargers ater	
				nry Wastewater ng Wastewater	2E – Non-Process Wastewater		Sanitary Wastewater Cooling Wastewater	
Permittee Organization Fo	rmal Na	ame: Town of Alap	aha					
Permittee Mailing Address	: PO B	ox 385						
Permittee City: Alapaha		Permittee State: GA		Permittee Zip Code:	31622	Permittee C	County:	
Facility Site Name: ALAF	PAHA, T	TOWN OF (ALAPA	AHA WP	CP)				
Facility Site Address: Hig	hway 82	2 East						
Facility Site City: Alapah	Facility Site State: GA		Facility Site Zip Code: 31622		Facility Site County: Berrien			
Is the facility located on In	dian La	ands? No		Facility Site tribal land indicator: :				
Facility Site Latitude/Long	gitude (e	ex. 34.543, -84.804)	: (31.388	07 , -83.218872)				
Program Facility Name : A WPCP)	LAPAI	HA, TOWN OF (Al	LAPAHA	Program Facility ID : GA0033596				
If there are any NPDES I applicable box(s).	Permits	that are associated	d with thi	is facility provide the	correspondi	ng NPDES	Permit No. and check the	
EPA Major (check one): ☐ yes ☐ no ☐ unkno			Primary Industry (check one): \square <i>yes</i> or \square <i>no</i> \square <i>unknown</i>					
SIC Code(s):				SIC Code Indicator:				
1. 4952			4952					
NAICS Code(s):			NAICS Code Indicator:					
1. 221320				221320				
Total Design Flow (MGD): 0.10				Annual Average Daily Flow (MGD): 0.07				

SECTION II. CONTACT INF	ORMATION					
1. Facility Contact Affiliation Type:						
□ Owner Contact □ Contractor □ Permit Contact □ Engineer ☑ Facility/Project Contact □ Unknown						
Facility Contact First Name John	Facility Contact Last	Name: Reynolds	Facility Contact Title:			
Facility Contact E-mail Address: nashwpcp@	yahoo.com	Facility Contact Phone	: 229-356-2117			
Address Line1:			Address Line2:			
City:	State: GA		Zip:			
Facility Contact Affiliation Type: ☑ Owner Contact ☐ Contractor ☐ Permit Contact ☐ Engineer ☐ Facility/Project Contact ☐ Unknown ☐ Unknown						
Facility Contact First Name Town of Alapaha	Facility Contact Last	Name: Georgia	Facility Contact Title:			
Facility Contact E-mail Address: townofalapa	ha@gmail.com	Facility Contact Phone: (229) 532 7475				
Address Line1:			Address Line2:			
City:	State: GA		Zip:			
SECTION III. OPERATOR II	NFORMATION	N				
Facility Organization Formal Name: Town o	f Alapaha					
Is operator also the owner?: \square yes or \square no						
Status: □ Federal □ State □ Private ☑ Public □ Other						
Operator Contact E-mail Address: nashwpcp@	yahoo.com	Operator Contact Phone: 229-356-2117				
SECTION IV. OTHER ENVIR	RONMENTAL	PERMITS				
Section III. Table No. 1 - Provide the na	ame and permit nos. f	or all permits issued to	this facility			
Name of Permit		Permit No.				
2. Does your facility require any additional peabove? ☐ Yes ☑ No	rmits not listed	2a. If yes, what are they and what is the timeframe to obtain them?				
SECTION V. NATURE OF BUSINESS						
Wastewater Facility for the Town of Alapa	ha					

SECTIO	N VI. OUI	FALL IDENTIFIC	ATION AND	WAIERQU	ALIIY		
Permitted Feature Identifier	Permitted Feature Type	Permitted Feature Latitude/ Longitude	Receiving Waterbody for Permitted Feature	River Basin	Does Discharge enter 305 (b)/303(d) Listed Waters?	Discharge listed in a TMDL?	Name and Year of TMDL
					(Yes or No)	(Yes or No	
001	External Outfall	31.388070/-83.218872	Alapaha River	Suwanee	No	No	
(30 Day) Average I	Flow (MGD) (30	Day) Maximum Flow (MGD) If Reco	eiving Water is Listed, Is the 1. Supporting designat 2. Not supporting design 3.Assessment pend	red use	eiving Water(s) is Not What is	supporting the s it Listed For?	Designated Uses,
0.0	96	0.179	SupportingU	se			
		an be found on EPD's website at <u>http</u> e found on EPD's website at http://e			<u>ents</u>		
SECTIO	N VII. EF	FLUENT LIMITS	AND CONDI	ΓIONS			
		tandard, guideline, or categor where pursuant to 301, 306, 30				ischarge in	40 CFR Part
□ Y	es 🗹 N	o					
		stion No. 1 above, please cone regulation, if applicable, that			viding the name	of the disc	harge categor
If you answ	vered "no" to qu	estion No. 1 above, please pro	oceed to Section No.	VIII.			
Section VII,	Table No. 1						
Part	Part Name		Subpart (Subpart Code Subpart Na		Descrip	otion
2 Ara ony o	ftha annliaghla	offlyont limitations applicable	to the discharge(s)	oversaged in terms	of myoduction?		
2. Are any 0	i tile applicable	effluent limitations applicable	e to the discharge(s)	expressed in terms	or production?		
□ Ye	es 🗹 N	0					
		lete the following table below uction. For new discharges, l					
whether the p	roduction figure	es given are average or maxin enswered "no" to question No	num level.) Express	the production in to	erms and units u		
If you answer	red "no" to ques	tion No. 2 above, please proc	eed to Section VIII.				
Section VII,	Table No. 2 – A	Applicable Effluent Limit G	uidelines				
		1. AVERAGE DAIL	Y PRODUCTION				FECTED FFALLS
a. QUANT	ITY PER DAY	b. UNITS OF MEASURE	c. OPERATION	, PRODUCT, MAT	ERIAL, ETC.		

SF	ECTIO	ON VIII. 40 CFR 122.21(R) COOLING WATER INTAKE STRUCTURES							
Directions:		Answer questions 1 through 4 below for your cooling water intake structure(s) (CWIS). If your answer to any one of these questions is "No", then the requirements of 40 CFR 125.94 through 125.99 do not apply to your facility. However, the State reserves the right to establish BPJ requirements as allowed in 40 CFR 125.90(b) for facilities.							
1.	Do you	own or operate a cooling water intake structure(s)?							
	□ Yes	☑ No							
	If you a	inswered "yes" to question No. 1 above, please proceed to question No. 2 below.							