


Form <b>2D</b> NPDES		<b>New Sources and New Dischargers Application for Permit to Discharge Process Wastewater</b>
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For each outfall, list the latitude and longitude of its location to the nearest 15 seconds and the name of the receiving water.

Outfall Number ( <i>list</i> )	Latitude			Longitude			Receiving Water ( <i>name</i> )
	Deg.	Min.	Sec.	Deg.	Min.	Sec.	
<b>Outfall 1</b>	<b>44</b>	<b>23</b>	<b>40</b>	<b>68</b>	<b>58</b>	<b>25</b>	<b>Belfast Bay</b>

A reduced volume discharge is anticipated to begin in early 2020, with volume increasing in stages as the development progresses.

A. For each outfall, provide a description of: (1) All operations contributing wastewater to the effluent, including process wastewater, sanitary wastewater, cooling water, and storm water runoff; (2) The average flow contributed by each operation; and (3) The treatment received by the wastewater. Continue on additional sheets if necessary.

[illegible]

C. Except for storm runoff, leaks, or spills, will any of the discharges described in Items III-A be intermittent or seasonal?

☐ NO (go to Section IV)[illegible]

If there is an applicable production-based effluent guideline or NSPS, for each outfall list the estimated level of production (projection of actual production level, not design), expressed in the terms and units used in the applicable effluent guideline or NSPS, for each of the first 3 years of operation. If production is likely to vary, you may also submit alternative estimates (attach a separate sheet). **Not Applicable.**

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CONTINUED FROM THE FRONT		EPA I.D. NUMBER <i>(copy from Item 1 of Form 1)</i>	
C. Use the space below to list any of the pollutants listed in Table 2D-3 of the instructions which you know or have reason to believe will be discharged from any outfall. For every pollutant you list, briefly describe the reasons you believe it will be present.			
1. Pollutant		2. Reason for Discharge	
<b>VI. Engineering Report on Wastewater Treatment</b>			
A. If there is any technical evaluation concerning your wastewater treatment, including engineering reports or pilot plant studies, check the appropriate box below. <input type="checkbox"/> Report Available <input type="checkbox"/> No Report			
B. Provide the name and location of any existing plant(s) which, to the best of your knowledge resembles this production facility with respect to production processes, wastewater constituents, or wastewater treatments.			
Name		Location	

**VII. Other Information (Optional)**

Use the space below to expand upon any of the above questions or to bring to the attention of the reviewer any other information you feel should be considered in establishing permit limitations for the proposed facility. Attach additional sheets if necessary.

**VIII. 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. 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.*

A. Name and Official Title (type or print)

B. Phone No.

C. Signature

D. Date Signed

