

## **APPLICATION FOR THE DISCHARGE OF COOLING WATER TO THE CITY OF FAIRBANKS STORMWATER COLLECTION SYSTEM**

All discharges into the City's stormwater collection system are required to meet the requirements of the City's National Pollutant Discharge Elimination System Discharge Permit and all appropriate laws and regulations. This permit allows connection and discharge into the City's stormwater system but individuals are responsible for any damages, costs for remediation, or fines incurred because of their discharges into the City's system. Discharges of groundwater used as cooling water into the City's system are normally prohibited from October 1 through April 30 because of potential for damage to the stormwater system. Approval of the connection design and City inspection before backfill are required. The one-time Connection Fee is \$200.00.

In addition, the Alaska Department of Environmental Conservation (DEC) requires a state industrial discharge permit to discharge cooling water to land, groundwater, or surface water (either directly or indirectly through a stormwater system). Following are some of DEC's requirements: Discharge temperatures shall be less than 55 degrees f; corrosion inhibitors and pH control chemicals are prohibited; and only flat plate heat exchangers (that develop a visible weep before catastrophic failure) are acceptable. In addition monitoring of the discharge is required. For further information call DEC at 907-451-2106.

**RESPONSIBLE PARTY** (owner, operator, or person responsible for overall management of the project):

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Company Name: \_\_\_\_\_ Fax Number: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
\_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Email Address: \_\_\_\_\_

**ON SITE CONTACT:**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**FACILITY:**

NAICS Code (formerly the Standard Industrial Code (SIC)): \_\_\_\_\_  
Facility Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ Fax Number: \_\_\_\_\_  
\_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Physical Address: \_\_\_\_\_

**CONSULTANT:**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Company Name: \_\_\_\_\_ Fax Number: \_\_\_\_\_

**BEGINNING DATES OF PERMIT** (mm/dd/yy): Permit requires annual renewal and an annual review fee of \$500.00. Discharge for cooling water only allowed from May 1 through September 30.

Beginning Date From: \_\_\_\_\_ Ending Date To: \_\_\_\_\_

Connection Permit (continued)

SOURCE/DISCHARGE:

Source: \_\_\_\_\_  
Well Depth: \_\_\_\_\_ feet  
Well Diameter: \_\_\_\_\_ inches  
Number of wells \_\_\_\_\_  
Discharge Flow Rates:  
Average: \_\_\_\_\_ Gallons Per Day  
Maximum: \_\_\_\_\_ Gallons Per Day  
Estimated Total Discharge Volume: \_\_\_\_\_ Gallons  
Rate of Pumping: \_\_\_\_\_ Gallons Per Minute  
Maximum discharge temperature: \_\_\_\_\_  
Pretreatment/post-treatment proposed: \_\_\_\_\_

GENERAL DESCRIPTION OF THE PROJECT:

Describe where the water to be discharged comes from, what processes will be utilized to extract heat, and where the water will be discharged. Provide method to avoid discharge from October 1 through April 30. How will cooling be provided during this period?

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PLANS OF DISCHARGE POINT, PROCESS, AND DISCHARGE CONNECTION DETAIL:

Submit to the City a map that shows the general location of the facility. Plan sheet shall be provided to show detail of proposed connection to the stormwater system. Also provide plan showing general schematic of cooling process.

PROVIDE COPY OF DEC DISCHARGE APPLICATION (Provide copies of all reports submitted to DEC during the life of this permit.)

OTHER PERTINENT INFORMATION:

Describe unusual circumstances that may aid in permit processing.

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STORMWATER COLLECTION SYSTEM CONNECTION PERMIT APPLICATION

SIGNATURE:

The information given on this application is complete and accurate to the best of my knowledge.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title