

**OKC-SWQ
FORM
IUSC-1**

February 24, 2009



**Oklahoma City Stormwater Quality Management Division (SWQ)
In-Active Or Un-Staffed Site Certification
Associated With INDUSTRIAL ACTIVITIES**

Submission of this notice constitutes that the facility identified in section II of this form is In-Active or Un-Staffed and there are no storm water discharges associated with industrial activity. This form applies to the facilities that: A) are In-Active or Un-Staffed, and B) there are not any discharges of storm water associated with industrial activity to any state waters or municipal separate storm sewer systems (MS4s) under any conditions.

ALL REQUESTED INFORMATION MUST BE PROVIDED ON THIS FORM. SEE INSTRUCTIONS ON BACK OF THIS FORM.

I. FACILITY OWNER/OPERATOR INFORMATION

Name: _____ Phone: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____

II. FACILITY SITE INFORMATION

Name of the Facility: _____ SWQ Permit #: _____
 Address: _____ Local Phone: _____
 City: _____ State: _____ Zip Code: _____ County: _____
 Mailing Address: _____
 City: _____ State: _____ Zip Code: _____
 E-Mail: _____
 Primary SIC Code: _____ Sector _____ Secondary SIC Code: _____ Sector _____

III. REQUIREMENTS

- a) Maintain Storm Water Pollution Prevention Plan.
- b) Perform routine facility inspections per Storm Water Pollution Prevention Plan.
- c) Complete Annual Comprehensive Site Compliance Evaluation Report as required. (ACSCER)
- d) Make sure Best Management Practices are installed and maintained.

IV. CERTIFICATION: All Applicants:

I certify under penalty of law that I have read and understand the eligibility requirements for claiming a condition of an In-Active or Un-Staffed Site pertaining to the City of Oklahoma City's storm water program; and that there is no activity or staff, and there are no discharges of storm water associated with industrial activity from the facility identified in section II of this form.

I understand that I must allow the permitting authority to perform inspections to confirm the condition of In-Active or Un-Staffed Site and to make such inspection reports publicly available upon request. I understand that I must obtain coverage under a storm water permit prior to any discharge of storm water associated with industrial activity from the facility.

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 gathered and evaluated the information submitted. Based upon my inquiry of the person or persons who manage the system, or those persons directly involved in gathering the information, the information submitted is to the best of my knowledge and belief true, accurate and complete. I am aware there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Print Name: _____ Date: _____

Signature: _____ Title: _____



INSTRUCTIONS FOR OKC-SWQ FORM IUSC-1

In-Active Or Un-Staffed Site Certification

ASSOCIATED WITH INDUSTRIAL ACTIVITIES

Who May File an In-Active Or Un-Staffed Site Certification

This form applies to the facilities that: a) are In-Active or Un-Staffed, and b) there are not any discharges of storm water associated with industrial activity to any state waters or Municipal Separate Storm Sewer Systems (MS4s) under any conditions.

Obtaining and Maintaining the In-Active or Un-Staffed Site Certification.

This form is used to certify that there is no activity or no staff at the industrial facility or site described herein. The industrial facility/site must maintain conditions of not having any staff or all industrial processes are in-active in order to remain applicable. If conditions change resulting in industrial storm water discharges into the waters of the State, including the MS4s, the facility operator must contact their Oklahoma City Storm Water Environmental Technician before any discharges occur. Any industrial discharge without notification under any condition would be an unauthorized discharge and would be a violation under the Clean Water Act and subject to enforcement action.

Where to File the In-Active or Un-Staffed Certification

Public Works Department
Storm Water Quality Division
420 W. Main, Suite 700
Oklahoma City, Oklahoma 73102

Completing The Form

You must type or print, using upper-case letters, in the appropriate areas only. If you have any questions on this form, call The City of Oklahoma City at (405) 297-1774.

Section I. Facility Owner/Operator Information

Provide the legal name, mailing address, and telephone number of the person, firm, public organization, or any other entity that either individually or together meet the following two criteria: (1) have operational control over the facility; and (2) have the day-to-day operational control of those activities at the facility necessary to ensure compliance with plan requirements and permit conditions. Do not use a colloquial name.

Section II. Facility Site Information

Enter the Facility's official or legal name, Storm Water Quality (SWQ) permit number, local phone number, and complete street and mailing address, including city, state, ZIP code, and county.

Enter the primary and secondary SIC code.
For industrial activities defined in 40 CFR 122.26(b)(14)(l)-(x) that do not have SIC codes that accurately describes the principal product, use the following two character codes:

HZ = Hazardous waste treatment, storage, or disposal facilities, including those that are operating under interim status or a permit under subtitle C of RCRA (40 CFR 122.26(b)(14)(iv);

SE = Steam electric power generating facilities, including coal handling sites (40 CFR 122.26(b)(14)(vii);

TW = Treatment works treating domestic sewage or any other sewage sludge or wastewater treatment device or system, used in the storage, treatment, recycling, and reclamation of municipal or domestic sewage (40 CFR 122.26(b)(14)(ix);

LF = Landfills and open dumps that receive industrial waste from any facility described in this subsection (40 CFR 122.26(b)(14)(v).

Section III. Requirements

a.) You must maintain your Storm Water Pollution Prevention Plan (SWPPP) as appropriate to indicate if you had any changes in personnel, best management practices (bmp's), or activities.

b.) You must perform your routine facility inspections per your indications in your SWPPP. The inspection forms must be placed into the SWPPP.

c.) You must complete your Annual Comprehensive Site Compliance Evaluation Report (ACSCER), which is to be completed by March 1st of each year. The ACSCER must be placed into the SWPPP.

d.) You must inspect all bmp's in use, to insure they are functioning properly and not in need of repair or replacement.

Section IV. Certification

Federal Statutes provide for severe penalties for submitting false information on this application form. Federal regulations require this application to be signed as follows:

For a corporation: by a responsible corporate officer, which 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, or (ii) the manager of one or more manufacturing, production, or operating facilities employing more than 250 persons or having gross annual sales or expenditures exceeding \$25 million (in second-quarter 1980 dollars), if the authority to sign had been assigned or delegated to the manager in accordance with the corporate procedures;

For a partnership or sole proprietorship: by a general partner of the propietor, or;

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

PLEASE MAKE SURE YOU ACQUIRE A COPY OF THIS CERTIFICATION AND CAREFULLY READ ALL THE TERMS AND CONDITIONS.