



RULE 6 STORM WATER POLLUTION PREVENTION PLAN (SWP3) CERTIFICATION CHECKLIST

State Form 51287 (R5 / 1-09)

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

For questions regarding this form, contact:

IDEM – Rule 6 Coordinator
 100 North Senate Avenue, Rm 1255
 Mail Code 65-42
 Indianapolis, IN 46204
 Phone: (317) 233-0202 or
 (800) 451-6027, ext. 30202 (within Indiana)

Web Access:
<http://www.in.gov/idem/4901.htm>

- NOTE:**
- This form must be used, completed, and submitted within one (1) year after an NOI letter is received by IDEM for permit coverage under a general NPDES permit pursuant to 327 IAC 15-6.
 - Return this form by mail to the IDEM Rule 6 Coordinator at the address listed in the box on the upper-right.

PART A: GENERAL INFORMATION FOR FACILITY

1. Facility name		
2. Facility general NPDES Industrial Storm Water Permit Number		INR-
Number and street		
3. Facility location address		
City	ZIP code	County

PART B: RULE 6 CHECKLIST

► Please check the appropriate box when the requirements for each numbered item have been met, or check NA if an item is “not applicable.” For some of the numbered items, the requirements must be met and “not applicable” is not provided as an option.

✓	NA	ITEM
<input type="checkbox"/>		1. Plan identifies individuals and their corresponding responsibilities for the facility Storm Water Pollution Prevention Team
<input type="checkbox"/>		2. Plan contains a copy of the complete NOI letter, which contains:
<input type="checkbox"/>		i) Facility contact information
<input type="checkbox"/>		ii) SIC Code(s)
<input type="checkbox"/>		iii) Facility longitude and latitude
<input type="checkbox"/>		iv) Receiving water(s)
<input type="checkbox"/>	<input type="checkbox"/>	v) The identification of past and present NPDES permits
<input type="checkbox"/>	<input type="checkbox"/>	vi) The identification of the MS4 receiving the storm water discharge(s)
<input type="checkbox"/>		vii) Narrative description of industrial processes at facility
<input type="checkbox"/>		viii) Responsible Individual contact information
<input type="checkbox"/>	<input type="checkbox"/>	ix) Registered Agent contact information
<input type="checkbox"/>		x) Outfall description, which identifies substantially similar outfall discharges and monitoring points
<input type="checkbox"/>		xi) Proof of publication
<input type="checkbox"/>	<input type="checkbox"/>	3. Plan contains a soils map, which indicates the types of soils found on the facility property. The boundaries of the facility property have been outlined, in a contrasting color. If a facility’s property only has impervious surfaces, the soils map requirement can be omitted.
<input type="checkbox"/>		4. Graphical representation which indicates ¹ :
<input type="checkbox"/>		i) On-site drainage and discharge conveyances
<input type="checkbox"/>		ii) Adjacent property drainage and discharge conveyances
<input type="checkbox"/>	<input type="checkbox"/>	iii) On-site and adjacent property water bodies
<input type="checkbox"/>		iv) Outline of the drainage area for each storm water outfall
<input type="checkbox"/>		v) Outline of the facility property indicating directional flows of surface drainage patterns
<input type="checkbox"/>		vi) Outline of the impervious surfaces, with estimate of impervious and pervious surfaces square footage for each drainage area
<input type="checkbox"/>	<input type="checkbox"/>	vii) On-site injection wells
<input type="checkbox"/>	<input type="checkbox"/>	viii) On-site wells used as potable water sources
<input type="checkbox"/>	<input type="checkbox"/>	ix) Existing structural control measures
<input type="checkbox"/>	<input type="checkbox"/>	x) Existing and/or historical underground and aboveground storage tank locations ²
<input type="checkbox"/>	<input type="checkbox"/>	xi) Permanently designated plowed and/or dumped snow storage locations ²
<input type="checkbox"/>	<input type="checkbox"/>	xii) Loading and unloading areas for solid and/or liquid bulk materials ²
<input type="checkbox"/>	<input type="checkbox"/>	xiii) Existing and/or historical outdoor storage areas for raw materials, intermediary products, final products, or waste materials ²
<input type="checkbox"/>	<input type="checkbox"/>	xiv) Existing and/or historical outdoor storage areas for fuels, processing equipment, and other containerized materials ²
<input type="checkbox"/>	<input type="checkbox"/>	xv) Outdoor processing areas ²
<input type="checkbox"/>	<input type="checkbox"/>	xvi) Dust or particulate generating process areas ²
<input type="checkbox"/>	<input type="checkbox"/>	xvii) Outdoor waste storage and/or disposal areas ²
<input type="checkbox"/>	<input type="checkbox"/>	xviii) Pesticide and/or herbicide application areas ²
<input type="checkbox"/>	<input type="checkbox"/>	xix) Vehicular access roads ²
<input type="checkbox"/>		5. Area map which indicates:
<input type="checkbox"/>		i) Topographic relief or similar elevations
<input type="checkbox"/>		ii) Facility outlined in contrasting color
<input type="checkbox"/>		iii) Receiving water(s)
<input type="checkbox"/>	<input type="checkbox"/>	iv) Drinking water wells within a ¼-mile radius

(Continued on page 2)

¹ The on-site mapping of items listed in (x) through (xix) is required only in those areas that generate storm water discharges exposed to industrial activity and have a reasonable potential for storm water exposure to pollutants.

² The mapping of historical locations is only required if the historical locations have a reasonable potential for storm water exposure to historical pollutants.

PART B: RULE 6 CHECKLIST

► Please check the appropriate box when the requirements for each numbered item have been met, or check NA if an item is “not applicable.” For some of the numbered items, the requirements must be met and “not applicable” is not provided as an option.

✓	NA	ITEM
<input type="checkbox"/>		6. Plan contains a narrative description of potential pollutant source areas ³
<input type="checkbox"/>		a) Descriptions have been created for all existing and/or historical areas identified as being a potential source of storm water exposure to pollutants.
<input type="checkbox"/>		b) The descriptions for EACH area includes:
<input type="checkbox"/>		i) Type and typical quantity of materials present in the area
<input type="checkbox"/>		ii) Methods of storage, including presence of any secondary containment measures
<input type="checkbox"/>	<input type="checkbox"/>	iii) Remedial actions undertaken in the area to eliminate pollutant sources or exposure of storm water to those sources
<input type="checkbox"/>	<input type="checkbox"/>	iv) Spill or leak history in the area ³
<input type="checkbox"/>	<input type="checkbox"/>	(1) Date and type of material released
<input type="checkbox"/>	<input type="checkbox"/>	(2) Estimated volume released
<input type="checkbox"/>	<input type="checkbox"/>	(3) Description of remedial actions undertaken
<input type="checkbox"/>		c) Where the chemical or material can be exposed to storm water, area contains a risk identification analysis of chemicals or materials stored or used within the area, which includes:
<input type="checkbox"/>		i) Toxicity data of chemicals and/or materials used within the area, referencing appropriate MSDS locations
<input type="checkbox"/>		ii) Frequency and typical quantity of chemicals and/or materials stored in the area
<input type="checkbox"/>		iii) Potential ways storm water discharges may be exposed to chemicals and/or materials
<input type="checkbox"/>		iv) Likelihood of the chemicals and/or materials to come into contact with storm water
<input type="checkbox"/>		7. Plan contains a narrative description of existing and planned management practices and measures to improve the quality of, or eliminate, storm water run-off leaving the facility property
<input type="checkbox"/>	<input type="checkbox"/>	a) Descriptions have been created for all existing and/or historical areas identified as being a potential source of storm water exposure to pollutants, including those areas listed in the graphical representation required by the SWP3. The description includes:
<input type="checkbox"/>	<input type="checkbox"/>	i) Existing and planned structural and nonstructural control practices and measures for EACH area
<input type="checkbox"/>	<input type="checkbox"/>	ii) Any treatment the storm water receives prior to leaving the facility property or entering a water of the state
<input type="checkbox"/>	<input type="checkbox"/>	iii) Ultimate disposal of any solid or fluid wastes collected in structural control measures
<input type="checkbox"/>	<input type="checkbox"/>	b) Specific control practices and measures are utilized, and include:
<input type="checkbox"/>	<input type="checkbox"/>	i) Identification of areas which have a high potential for significant soil erosion, including implementation of erosion control measures
<input type="checkbox"/>	<input type="checkbox"/>	ii) Plan created to reduce exposure of storm water to storage piles of sand, salt, or other commercial/industrial materials
<input type="checkbox"/>	<input type="checkbox"/>	iii) Storage piles of sand, salt, or other commercial/industrial materials are stored in a manner to reduce the potential for polluted storm water run-off
<input type="checkbox"/>		c) The facility has a written preventative maintenance program
<input type="checkbox"/>		i) Implementation of good housekeeping practices to reduce the potential for storm water contact with pollutants
<input type="checkbox"/>	<input type="checkbox"/>	ii) Documentation of storm water control measure maintenance
<input type="checkbox"/>	<input type="checkbox"/>	iii) Documentation of the inspection and testing of facility equipment and systems that have potential exposure to storm water
<input type="checkbox"/>		iv) Documentation of quarterly storm water control measure inspections
<input type="checkbox"/>		v) Documentation of quarterly storm water run-off conveyances inspections
<input type="checkbox"/>		vi) Documentation of annual training for all employees that have the potential to engage in industrial activities that impact storm water quality
<input type="checkbox"/>	<input type="checkbox"/>	d) The facility has a written spill response program
<input type="checkbox"/>	<input type="checkbox"/>	i) Location, description, and quantity of all response materials and equipment
<input type="checkbox"/>	<input type="checkbox"/>	ii) Response procedures for facility personnel
<input type="checkbox"/>	<input type="checkbox"/>	iii) Contact information for reporting spills, both for facility staff and external emergency response entities
<input type="checkbox"/>		e) The facility has a written nonstorm water assessment program
<input type="checkbox"/>		i) Certification letter stating that storm water discharges from the facility property or entering a water of the state have been evaluated for the presence of illicit discharges and non-storm water contributions
<input type="checkbox"/>	<input type="checkbox"/>	ii) Detergent or solvent-based washing of equipment or vehicles that would allow washwater additives to enter any storm drainage system or receiving water shall not be allowed at the facility, and the corrective action is documented in the written nonstorm water assessment program
<input type="checkbox"/>	<input type="checkbox"/>	iii) Maintenance area floor drains with the potential for maintenance fluids or other materials to enter storm sewers are sealed, connected to a sanitary sewer with prior authorization, or the discharge is permitted under an appropriate NPDES wastewater permit, and the corrective action is documented in the written nonstorm water assessment program
<input type="checkbox"/>	<input type="checkbox"/>	iv) For conducting the nonstorm water assessment, a description of the method used, the date of any testing, and the on-site drainage points that were directly observed during a test
<input type="checkbox"/>		8. Plan contains the analytical results of run-off monitoring
<input type="checkbox"/>		a) Monitoring data includes field data sheets, chain-of-custody forms, and laboratory results
<input type="checkbox"/>	<input type="checkbox"/>	b) Comparison created after the results of two sample monitoring events is available
<input type="checkbox"/>	<input type="checkbox"/>	i) Pollutant investigated when reductions are not indicated in the comparison, where appropriate
<input type="checkbox"/>	<input type="checkbox"/>	ii) Practices and/or measures implemented as a result of the investigation are documented
<input type="checkbox"/>	<input type="checkbox"/>	9. If applicable, plan references other facility pertinent plans (e.g. Operations and Maintenance, Spill Prevention Control and Countermeasures, or Risk Contingency Plans)
<input type="checkbox"/>		10. Plan has been certified by a qualified professional
<input type="checkbox"/>		11. Plan is retained and available at the facility
<input type="checkbox"/>		12. Plan has been completed and implemented 365 days after submission of a timely-submitted NOI letter, or prior to initiation of operations at the facility

³ Spill or leak history shall date back for a period of three (3) years from the date of the NOI letter, in the identified area, for materials spilled outside of secondary containment structures and impervious surfaces in excess of their reportable quantity. In subsequent permit terms, the history shall date back for a period of five (5) years from the date of the NOI letter.

PART C: GENERAL INFORMATION REGARDING THE SWP3

- The SWP3 must be reviewed periodically for changes and improvements at the facility. As a minimum, this review should be conducted annually.
 - The dates of all SWP3 reviews should be documented in the SWP3.
 - As changes and improvements to the original SWP3 are made, the SWP3 must be updated, and retained and available at the facility.
- The SWP3 checklist shall be completed and submitted to IDEM:
 - Within 365 days after submission of an initial, renewal, or amended NOI letter; or
 - Upon the written or verbal request of an IDEM representative.

PART D: CERTIFICATION AND SIGNATURE

- Make sure you have completed all appropriate sections of this SWP3 checklist. Sign and date the bottom of this form and return it to the address shown on page one (1) of this SWP3 checklist.
- All information requested in this SWP3 checklist is MANDATORY, unless noted otherwise, for the administration and processing of your permit pursuant to 327 IAC 15-6. All data received will be regarded as a public record.

► The person referenced in PART A, Item #10 of this form (Qualified Professional) must sign the following certification statement:

“By signing this SWP3 checklist, I hereby 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.”

Type or print Qualified Professional Name: _____

Signature of Qualified Professional: _____

Date: _____ (mm/dd/year)

Type or print Responsible Individual Name: _____

Signature of Responsible Individual: _____

Date: _____ (mm/dd/year)