Attachment E – Notice of Intent

WATER QUALITY ORDER NO. 2013-0002-DWQ GENERAL PERMIT NO. CAG990005

STATEWIDE GENERAL NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) PERMIT FOR RESIDUAL AQUATIC PESTICIDE DISCHARGES TO WATERS OF THE UNITED STATES FROM ALGAE AND AQUATIC WEED CONTROL APPLICATIONS

I. NOTICE OF INTENT STATUS (see		C WEED CONTROL A	APPLICATIONS	
Mark only one item A. X New Applicator B. Change of Information: WDID#				
C. ☐ Change of ownership or responsibility: WDID#				
II. DISCHARGER INFORMATION				
A. Name San Joaquin Area Flood Control Agency				
B. Mailing Address 22 E. Weber Avenue, # 301				
C. City Stockton	D. County San Joaquin	E. State CA	F. Zip 95202	
G. Contact Person Marlo Duncan	H. E-mail address marlo.duncan @stocktonca.gov	I. Title Project Manager	J. Phone 209-937-7900	
III. BILLING ADDRESS (Enter Inform	ation <u>only</u> if different from	section II above)		
A. Name				
B. Mailing Address				
C. City	D. County	E. State	F. Zip	
G. E-mail address	H. Title	I. Phone		
<u> </u>	<u>I</u>	<u> </u>		

IV. RECEIVING WATER INFORMATION

A. Algaecide and aquatic herbicides are used to treat (check all that apply):				
I. VX Canals, ditches, or other constructed conveyance facilities owned and controlled by Discharger.				
Name of the conveyance system: Five Mile Slough				
2. Canals, ditches, or other constructed conveyance facilities owned and controlled by an entity other				
than the Discharger.				
Owner's name:				
Name of the conveyance system:				
3. Directly to river, lake, creek, stream, bay, ocean, etc.				
Name of water body:				
Name of water body.				
B. Regional Water Quality Control Board(s) where treatment areas are located				
(REGION 1, 2, 3, 4, 5, 6, 7, 8, or 9): Region <u>Region 5</u>				
(List all regions where algaecide and aquatic herbicide application is proposed.)				
V. ALGAECIDE AND AQUATIC HERBICIDE APPLICATION INFORMATION				
A Target Organisms:	$\overline{}$			
water flyacifiti, Egeria, Eurasian wateriillioli, Azolia, Duckweed, and				
Water primrose species, and algae nuisances				
B. Algaecide and Aquatic Herbicide Used: List Name and Active ingredients				
Products registered in California for aquatic use for the specific site that contain the				
following ingredients:				
2,4-D, flumioxazin, copper complexes, diquat dibromide, endothall, fluridone, glyphosate,				
hydrogen peroxides, imazamox, imazapyr, penoxsulam, and triclopyr based products.				
45.0040				
C. Period of Application: Start Date June 15, 2019 End Date Life of permit	_			
D. Types of Adjuvants Used: Non-ionic surfactant, as needed.				
Non-ionic sunaciant, as needed.				
VI. AQUATIC PESTICIDE APPLICATION PLAN				
VI. AQUATIOT EUTIOIDE ALT EIGATIONT EAN				
Has an Aquatic Pesticide Application Plan been prepared and is the applicator familiar with its contents?				
XXYes				
If not, when will it be prepared?				
<u> </u>				
VII. NOTIFICATION				
Have potentially affected public and governmental agencies been notified? ☐ No				
VIII. FEE				
Have you included payment of the filing fee (for first-time enrollees only) with this submittal?				
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XX YES □ NO □ NA				

GENERAL NPDES PERMIT FOR RESIDUAL AQUATIC PESTICIDE DISCHARGES FROM ALGAE AND AQUATIC WEED CONTROL APPLICATIONS

ORDER NO. 2013-0002-DWQ NPDES NO. CAG990005

IX. CERTIFICATION

"I certify under penalty of law that this document and all attachments were prepared under my direction and supervision			
in accordance with a system designed to ensure 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 or imprisonment. Additionally, I certify that the provisions of the General Permit, including developing			
and implementing a monitoring program, will be complied with."			
The state of the s			
A. Printed Name: Chris Elias			
B. Signature: Date: 0/11/19			
C. Title: Executive Director			

XI. FOR STATE WATER BOARD STAFF USE ONLY

WDID:	Date NOI Received:	Date NOI Processed:
Case Handler's Initial:	Fee Amount Received:	Check #:
☐ Lyris List Notification of Posting of APAP	Date	Confirmation Sent