


<p><u>DEQ USE ONLY</u></p> <p>File #: _____</p> <p>Application #: _____</p> <p>DOC Conf.: _____</p> <p>Notes: _____</p>	<div data-bbox="422 92 508 121">  </div> <p>State of Oregon Department of Environmental Quality 700 NE Multnomah Street, Suite 600 Portland, Oregon 97232</p> <p>Application For NPDES General Permit 2000-J (see pages 4 - 5 for instructions)</p>	<p><u>DEQ USE ONLY</u></p> <p>Date Received: _____</p> <p>Total Amt. Received: _____</p> <p>Add. Amt. Due (if any): _____</p> <p>Check #: _____</p> <p>Deposit #: _____</p> <p>Receipt #: _____</p>
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A. Reference Information

1. Legal Name:
4. Common Name (if different than legal name):
3. Legal Status of Operator: <input type="checkbox"/> Federal <input type="checkbox"/> State <input type="checkbox"/> Public <input type="checkbox"/> Private <input type="checkbox"/> Other, specify:
4. Facility SIC code: _____ or NAICS code: _____
5. Transferring from an individual permit? If Yes, provide the Assigned Permit Number: _____
6. Transferring from a 2300A general permit? If Yes, provide the Assigned Permit Number: _____
7. <input type="checkbox"/> New Applicant <input type="checkbox"/> Or updating information (Provide Assigned Permit Number_____)

B. Contact Information

1. Responsible Official: Mailing Address: Email Address:	Telephone #: City, State, Zip Code:
2. Facility Contact: Facility Mailing Address: Email Address:	Telephone #: City, State, Zip Code:
3. Invoice to: Billing Address: Email Address:	Telephone #: City, State, Zip Code:

C. Irrigation District Information

1. Physical Street Address (office location):	
City, State, Zip Code:	County:
2. Total miles of distribution system:	3. Total acreage for irrigation:
4. Total miles of open canals/ditches:	5. Total miles of pipeline:
6. Attach a map of the distribution system (e.g. canals, ditches or other constructed conveyances owned and controlled by district) include natural water, indicate location of gates nearest to natural water, indicate points of connection to natural water, include township, range, section on the map and delineate irrigation system boundaries.	

Legal Name of Applicant: <fill in>

-
- 35S-13W-21
- ←Green Flag
- 35S-13W-28
- 42.525916 -124.254686 Degrees
- ↑
- The "Button"

The picture on the left shows Latitude and Longitude for the location at the green flag (Lat 42.525916; Long -124.254686). This mapping tool provides decimal degrees to six (6) decimal places in World Geodetic System 1984 or WGS84 (standard coordinate system for hand-held GPS units and Internet map tools).

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Application for 2000-J NPDES General Permit

Oregon Department of Environmental Quality

Legal Name of Applicant: <fill in>

D. Land Use Compatibility Statement

1. Attach a complete Land Use Compatibility Statement (LUCS) signed by the local land use authority. The application will not be processed without evidence that the proposal is approved by the local land use authority and meets statewide planning goals.

E. Operating Information

1. ☐ YES A Pesticide Discharge Management Plan is complete and up to date.
2. ☐ YES An alternative method of pest control or pesticide will be used so that a discharge will not occur to any stream segment listed as water quality limited 303(d) list for that pesticide or its degradates.
3. Please provide a list of pesticides that may be used by brand name, active ingredient, EPA registration number, method of application, and type of adjuvant that may be used:

Brand Name	Active Ingredients	EPA Registration Number:	Types of Adjuvant

F. Fee

- ☐ Fee payable to the Department of Environmental Quality is enclosed. Please see Table 70G <https://www.oregon.gov/deq/Rulemaking%20Docs/340-045-0075WQFeeTables.pdf> for application fees.
- ☐ No fee is due with application. Transferring registration to this general permit from the 2300A pesticide general permit.

H. Signature of Legally Authorized Representative

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 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. In addition, I agree to pay the annual compliance determination fee invoiced annually by DEQ and all other fees required by Oregon Administrative Rules, Chapter 340, Division 045.

Name of Legally Authorized Representative (Type or Print)_____
Title_____
Signature of Legally Authorized Representative_____
Date

Please answer all questions and submit the required application fees.
An incomplete application or application with incorrect fees will not be processed.
If the information requested is not applicable, please indicate as such.

A. Reference Information

1. Enter the legal name of the applicant. This will be the legal Oregon business name (i.e., Acme Products, Inc.) or the legal representative of the company if it operates under an assumed business name (i.e., John Smith, dba Acme Products), or district name. The permit will be issued to this entity
2. Enter the common name of the facility or operation if different from the legal name of the applicant.
3. Provide the legal status of the applicant. Indicate "public" for a facility solely owned by local government. Other can be used to designate
4. Enter the Standard Industrial Classification (SIC) four-digit code or North American Industry Classification System five or six-digit code (NAICS) for the facility. These codes are used to describe the primary activity at the facility and may be found on fire marshal reports, insurance papers, or tax forms. The NAICS codes replaced the SIC system in 1997, however, it is usually easy to convert between the two systems so either code is acceptable. SIC or NAICS information is also available from the U.S. Census Bureau at 1-888-756-2427 or at <http://www.naics.com/search.htm>.
5. Provide a DEQ assigned Permit Number if transferring from an individual permit.
6. Provide a DEQ assigned Permit Number if transferring from a 2300A general permit.
7. Check if it is a new application for this 2000J permit or if updating information provided in the 2000J application.

B. Contact Information

1. Enter the name, telephone number, mailing address and email address of the Responsible Official. The Responsible Official is the person that receives official correspondence from DEQ, such as renewal notices or notices of noncompliance, and may be contacted if there are questions about this application.
2. Enter the name, telephone number, mailing address and email address of the Facility Contact if different from the Responsible Official. The Facility Contact is the person located at the facility that has specific knowledge of the facility or operation under permit (e.g., operations manager), and may be contacted if there are specific questions about this application.
3. Enter invoicing information for billing purposes if different from the Responsible Official (e.g., "Invoice To: Business Office - Accounts Payable").

C. Irrigation District Information

1. Enter the physical location of the facility (street address, not mailing address), including city, state, zip code, and county.
2. Provide information on total miles of the distribution system.
3. Provide information on total acreage for irrigation.
4. Provide information on total miles of open canals/ditched used to distribute irrigation water.
5. Provide information on total miles of pipeline used to distribute irrigation water.
6. Attach a map with features as indicated.
7. Use DEQ's interactive mapping tool to provide information on each gate/control structure nearest to natural water and points of connection to natural water. Provide information on BLM copper region.

D. Land Use Compatibility Statement

1. A completed Land Use Compatibility Statement (LUCS) signed by the local land use authority must be submitted with this application. The application will not be processed without evidence that the proposal is approved by the local land use authority and meets statewide planning goals. A LUCS form is enclosed with this application.

APPLICATION FOR 2000-J NPDES GENERAL PERMIT
Oregon Department of Environmental Quality
Legal Name of Applicant: < fill in>

E. Operating Information

1. The Pesticide Discharge Management Plan must be developed by the time the application for registration is submitted to DEQ.
2. An alternative method of pest control or pesticide must be used so that a discharge will not occur to any stream segment listed as water quality limited. DEQ's interactive mapping tool can be used to identify 303(d) water quality limited streams.
3. List of pesticide(s) that may be applied. Identify pesticide by brand name, active ingredient, EPA registration number, types of adjuvants, (e.g. surfactant, water conditioner or other type that may be on a pesticide label)

F. Fee

Please see Table 70G <https://www.oregon.gov/deq/Rulemaking%20Docs/340-045-0075WQFeeTables.pdf> for application fees. Or call the appropriate regional office below for fee information and to determine where to send this application. Send this form and fee to the regional office. New permit application must include both the new permit application fee and first year's annual fee. DEQ will not require a new registration fee when transferring registration to this general permit from the 2300A pesticide general permit. Make your check payable to the Department of Environmental Quality.

G. Signature of Legally Authorized Representative

The signature of a legally authorized representative must be provided in order to process this application. See the table below for more information.

Definition of Legally Authorized Representative:

Please also provide the information requested in brackets []

- ♦ **Corporation** — president, secretary, treasurer, vice-president, or any person who performs principal business functions; or a manager of one or more facilities that is authorized in accordance to corporate procedure to sign such documents
- ♦ **Partnership** — General partner *[list of general partners, their addresses and telephone numbers]*
- ♦ **Sole Proprietorship** — Owner(s) *[each owner must sign the application]*
- ♦ **City, County, State, Federal, or other Public Facility** — Principal executive officer or ranking elected official
- ♦ **Limited Liability Company** — Member *[articles of organization]*
- ♦ **Trusts** — Acting trustee *[list of trustees, their addresses and telephone numbers]*

Note: Local Service Districts follow signature authority under local government.

SUBMIT THIS APPLICATION TO THE APPROPRIATE REGIONAL OFFICE:

DEQ Northwest Region 700 NE Multnomah Street, Suite 600 Portland, OR 97232 (503) 229-5696 or 1-800-452-4011		DEQ Western Region 4026 Fairview Industrial Drive, SE Salem, OR 97302 (503) 378-8240 or 1-800-349-7677		DEQ Eastern Region 800 SE Emigrant, Suite 330 Pendleton, OR 97801 (541) 276-4063 or 1-800-304-3513	
Clackamas	Benton	Lane	Baker	Hood River	Sherman
Clatsop	Coos	Lincoln	Crook	Jefferson	Umatilla
Columbia	Curry	Linn	Deschutes	Klamath	Union
Multnomah	Douglas	Marion	Gilliam	Lake	Wallowa
Tillamook	Jackson	Polk	Grant	Malheur	Wasco
Washington	Josephine	Yamhill	Harney	Morrow	Wheeler