

FACILITY NAME:

STORM WATER POLLUTION PREVENTION PLAN (SWPPP)

Department of Environmental Quality (DEQ)
Water Resources Division (WRD)
Storm Water Pollution Prevention Plan (SWPPP) Template
Template Revision Date: 3/12/2015

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1.0 GENERAL FACILITY INFORMATION

Facility Information:

- Name of Facility:
- Facility Address:
- County:
- Standard Industrial Classification (SIC) Code:
- Owner or Authorized Representative:

Facility Contact Information:

- Name:
- Title:
- Telephone:
- Email Address:
- Mailing Address:

Facility Contact information to be aware of:

The "Facility Contact" was specified in the application. The permittee may replace the facility contact at any time, and shall notify the Department in writing within 10 days after replacement (including the name, address, email address, if available, and telephone number of the new facility contact).

- a) The facility contact shall be (or a duly authorized representative of this person):
 - for a corporation, a principal executive officer of at least the level of vice president, or a designated representative, if the representative is responsible for the overall operation of the facility from which the discharge described in the permit application or other NPDES form originates,
 - for a partnership, a general partner,
 - for a sole proprietorship, the proprietor, or
 - for a municipal, state, or other public facility, either a principal executive officer, the mayor, village president, city or village manager, or other duly authorized employee.
- b) A person is a duly authorized representative only if:
 - the authorization is made in writing to the Department by a person described in paragraph a. of this section; and
 - the authorization specifies either an individual or a position having responsibility for the overall operation of the regulated facility or activity such as the position of plant manager, operator of a well or a well field, superintendent, position of equivalent responsibility, or an individual or position having overall responsibility for environmental matters for the facility (a duly authorized representative may thus be either a named individual or any individual occupying a named position).

Certified Storm Water Operator Information:

- Name:
- Certification Number & Expiration Date:
- Telephone:
- Email Address:
- Is the Certified Operator an employee at the facility: Yes No
 - If the answer to the above question is "No" then include the Certified Operator's business name and mailing address:

Permit Information:

- General Permit Number:
- Certificate of Coverage (COC) or Individual Permit Number:
- COC or Individual Permit Effective Date of Coverage:
- Receiving Waters:
- Required Monitoring: Yes No
- Identify the Total Daily Maximum Load (TMDL) listed on COC:

Brief Industrial Activity Description:

If this facility is a seasonal facility describe the seasonal operation and what months the facility will be operating:

2.0 STORM WATER POLLUTION PREVENTION TEAM

The storm water pollution prevention team is responsible for developing, implementing, maintaining, and revising this SWPPP. The members of the team and their primary responsibilities (i.e. implementing, maintaining, record keeping, submitting reports, conducting inspections, employee training, conducting the annual compliance evaluation, testing for non-storm water discharges, signing the required certifications) are as follows:

Name & Title	Responsibility
<u>Space to list additional members and their responsibility if necessary:</u>	

3.0 SITE MAP

Preparing a site map or sketch is the first step in assessing the facility. See the DEQ Industrial Storm Water Certified Operator Training Manual for additional information.

The facility's site map includes all applicable items listed in the permit, which include:

- 1) Buildings and other permanent structures
- 2) Storage or disposal areas for significant materials
- 3) Secondary containment structures and descriptions of what they contain in the primary containment structures
- 4) Storm water discharge points (which include outfalls and points of discharge), numbered or otherwise labeled for reference
- 5) Location of storm water and non-storm water inlets (numbered or otherwise labeled for reference) contributing to each discharge point
- 6) Location of NPDES permitted discharges other than storm water
- 7) Outlines of the drainage areas contributing to each discharge point
- 8) Structural runoff controls or storm water treatment facilities
- 9) Areas of vegetation (with brief description such as lawn, old field, marsh, wooded, etc.)
- 10) Areas of exposed and/or erodible soils and gravel lots
- 11) Impervious surfaces (roofs, asphalt, concrete, etc.)
- 12) Name and location of receiving waters
- 13) Areas of known or suspected impacts on surface waters as designated under Par 201 (Environmental Response) of the NREPA.

SEE FIGURE 1 FOR FACILITY SITE MAP

4.0 SIGNIFICANT MATERIALS

Definition: Significant materials are any material which could degrade or impair water quality, including but not limited to:

- ✓ Raw Materials
- ✓ Fuels
- ✓ Solvents
- ✓ Detergents
- ✓ Plastic pellets
- ✓ Finished materials (i.e. metallic products)

- ✓ Hazardous Substances designated under section 101(14) of Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA), see 40 CFR 372.65
- ✓ Any chemical the facility is required to report pursuant to section 313 of the Emergency Planning and Community Right-to-Know Act (EPCRA)
- ✓ Polluting Materials – Oil and any material, in solid or liquid form, identified as polluting material under the Part 5 Rules (Rules 324.2001 through 324.2009 of the Michigan Administrative Code)
- ✓ Hazardous Wastes as defined in Part 111 of the Michigan Act
- ✓ Fertilizers
- ✓ Pesticides
- ✓ Waste Products (i.e. ashes, slag, sludge, plant waste, animal waste)

During the significant materials identification phase, all sources of potential storm water contamination need to be identified. Both the inside and outside of the facility must be inventoried to determine the materials and practices that may be sources of contamination to storm water runoff. Note the identification phase must address residual contaminants which may be found on items stored outside.

4.1 Inventory of Exposed Significant Materials

The permit requires a general inventory of significant materials that could enter storm water. For each material listed the SWPPP shall include the ways in which each type of material has been or has reasonable potential to become exposed to storm water (e.g. spillage during handling; leaks from pipes, pumps, or vessels; contact with storage piles, contaminated materials or soils; waste handling and disposal; deposits from dust or overspray; etc.). In addition, the SWPPP must identify the inlet(s) spilled significant materials may enter and the discharge point(s) through which the spilled significant material may be discharged.

SEE TABLE 1 FOR SIGNIFICANT MATERIAL INVENTORY

4.2 Description of Industrial Activities & Significant Material Storage Areas

The permit requires industrial facilities to evaluate the reasonable potential for contribution of significant materials to storm water runoff from at least the following areas or activities:

- 1) Loading, unloading, and other material handling operations
- 2) Outdoor storage including secondary containment structures
- 3) Outdoor manufacturing or processing activities
- 4) Significant dust or particulate generating processes
- 5) Discharge from vents, stacks, and air emission controls
- 6) On-site waste disposal practices
- 7) Maintenance and cleaning of vehicles, machines, and equipment
- 8) Areas of exposed and/or erodible soils
- 9) Sites of Environmental Contamination listed under Part 201 (Environmental Response) of the NREPA
- 10) Areas of significant material residues
- 11) Areas where animals congregate (wild or domestic) and deposit wastes
- 12) Other areas where storm water may contact significant materials

For each applicable item, the permit requires a written description of the specific activity or storage area. Along with the written description of the activities or storage areas, a description of the significant materials associated with those items must be included.

SEE TABLE 1 FOR INDUSTRIAL ACTIVITY AND SIGNIFICANT MATERIAL STORAGE AREA DESCRIPTIONS

4.3 List of Significant Spills

The permit requires a list of significant spills and significant leaks of polluting materials that occurred at areas that are exposed to precipitation or that otherwise discharge to a point source at the facility. The listing shall include spills that occurred over the three years prior to the effective date of a certificate of coverage

authorizing discharge under the General Permit. The listing shall include the date, volume, exact location of release, and actions taken to clean up the material and/or prevent exposure to storm water runoff or contamination of surface waters of the state. Any release that occurs after the SWPPP has been developed shall be controlled in accordance with the SWPPP and is cause for the SWPPP to be updated as appropriate within 14 calendar days of obtaining knowledge of the spill or loss. If there have been no spills of polluting materials, state that in this section.

Question: Have there been any significant spills or significant leaks of polluting materials in the last 3 years?

Yes No

- If the answer above is “Yes” then input the applicable information in the table below:

Significant Spills and Significant Leaks of Polluting Materials Table		
Location & Date	Material & Volume	Corrective Actions Taken

4.4 Summary of Sampling Data

The permit requires a summary of existing storm water discharge sampling data (if available) describing pollutants in storm water discharges associated with industrial activity at the facility. The summary shall be accompanied by a description of the suspected sources of the pollutants detected. (If there is no storm water discharge sampling data, state that in this section.)

Question: Is there any storm water discharge sampling data available? Yes No

- If the answer to the above question is “Yes” then summarize the information below and maintain the data with the SWPPP file.

Summary of Sampling Information:

4.5 Actions Taken to Investigate Illicit Connections

The permit requires that the SWPPP include a description of the actions taken to identify and eliminate illicit connections to the storm sewer system. All illicit connections to Municipal Separate Storm Sewer Systems (MS4s) or waters of the state should be permanently plugged or re-routed to the sanitary sewer system, in accordance with the authorization from the local Wastewater Treatment Plant. Any discharge from an illicit connection is a violation of the conditions of this permit.

Actions taken to investigate and eliminate any illicit connections to the storm sewer system:

5.0 NON-STRUCTURAL CONTROLS

Non-structural controls are practices that are relatively simple, fairly inexpensive, and applicable to a wide variety of industries or activities. Non-structural controls are intended to reduce the amount of pollution getting into the surface waters of the state and are generally implemented to address the problem at the source. They do not require any structural changes to the facility. These are typically everyday types of activities undertaken by employees at the facility. Many facilities may already have nonstructural controls in place for other reasons. The permit requires that the SWPPP shall, at a minimum, include each of the following non-structural controls:

5.1 Preventative Maintenance Program (Routine Inspection Program)

The permit requires written procedures and a schedule for routine preventive maintenance which includes inspection and maintenance of storm water management and control devices (e.g. cleaning of oil/water separators and catch basins) as well as inspecting and testing plant equipment and systems to uncover conditions that could cause breakdowns or failures resulting in discharges of pollutants to surface waters. Generally the focus of this permit requirement is on exterior items. A written report of the inspection and corrective actions shall be maintained on file and shall be retained for three years. See the DEQ Industrial Storm Water Certified Operator Training Manual for additional information.

The Routine Inspection Form is in Section 16.0.

If this requirement is addressed in other facility procedures, reference those procedures here:

5.2 Housekeeping Procedures (Routine Inspection Program)

The permit requires that the SWPPP include written procedures and a schedule to implement routine good housekeeping inspections to maintain a clean, orderly facility. Good housekeeping inspections are intended to reduce the potential for significant materials to come in contact with storm water. The routine good housekeeping inspections should be combined with the routine inspection for the preventative maintenance program. Generally the focus of this permit requirement is on exterior areas. A written report of the inspection and corrective actions shall be maintained on file and shall be retained for three years. See the DEQ Industrial Storm Water Certified Operator Training Manual for additional information.

The Routine Inspection Form is in Section 16.0.

If this requirement is addressed in other facility procedures, reference those procedures here:

The table below describes the Routine Inspection Program Procedures:

Routine Inspection Program Procedures Table		
Description of Area or Equipment Inspected	Tasks Performed During Inspection	Frequency of Inspection

5.3 Comprehensive Site Inspection & Visual Assessments of Storm Water Discharges

The permit requires written procedures and a schedule for comprehensive site inspection. The inspections shall include but not be limited to, the areas and equipment identified in the preventive maintenance program and good housekeeping procedures. The inspection shall also include a review of the routine preventive maintenance reports, good housekeeping inspections reports, and any other paperwork associated with the SWPPP. The comprehensive site inspection shall be conducted by the Industrial Storm Water Certified Operator quarterly. At a minimum one inspection shall be performed within each of the following quarters: January – March, April – June, July – September, and October – December.

The permittee may request Department approval of an alternate schedule for comprehensive site inspections. Such a request may be made if the permittee meets the following criteria: the permittee is in full compliance

with the permit, the permittee has an acceptable SWPPP, the permittee has installed and/or implemented adequate structural controls at the facility, the permittee has all required inspection reports available at the facility, and the permittee has an Industrial Storm Water Certified Operator at the facility.

A report of the comprehensive site inspection results shall be prepared and retained for three years. The report shall include the following information:

- ✓ Date of the inspection
- ✓ Name(s), title(s), and certification number(s) of the personnel conducting the inspection
- ✓ Precipitation information (i.e. a description of recent rainfall or snow met events)
- ✓ All observations relating to the implementation of control measures
- ✓ Any required revisions to the SWPPP resulting from the inspection
- ✓ A certification stating the facility is in compliance with this permit and the SWPPP, or, if there are instances of noncompliance, they are identified

The Comprehensive Site Inspection Form is in Section 17.0.

Comprehensive site inspection schedule:

Comprehensive site inspection written procedures:

The Industrial Storm Water Certified Operator will perform the comprehensive site inspections. All areas and items identified in Routine Inspection Procedures Table are included in the comprehensive site inspections. In addition all paper work associated with the routine inspections will be reviewed. The comprehensive site inspection report form will include a compliance certification statement. List any additional details (if necessary) related to the comprehensive site inspection procedures here:

Visual Assessments of Storm Water Discharges
****CHECK YOUR GENERAL PERMIT FOR APPLICABILITY****

The permit requires written procedures and a schedule for quarterly visual assessments of storm water discharges. The visual assessments shall be conducted by the Industrial Storm Water Certified Operator. At a minimum one visual assessment shall be performed within each of the following quarters: January – March, April – June, July – September, and October – December. If the Department has approved an alternate schedule for the comprehensive site inspection, the visual assessment may likewise be conducted in accordance with the same approved alternate schedule.

Visual assessment training/informational tutorials are available on the DEQ, WRD Industrial Storm Water webpage or by clicking on the following links:

- Part 1: https://www.youtube.com/watch?v=rhXbA1R_VZk&feature=youtu.be
- Part 2: https://www.youtube.com/watch?v=AdGziksz_g&feature=youtu.be
- Part 3: <https://www.youtube.com/watch?v=ZiajZM6AvIq&feature=youtu.be>

The Visual Assessment Report Form is in Section 18.0.

Visual Assessment schedule:

SEE SECTION 14.0 FOR THE VISUAL ASSESSMENT PROCEDURES

5.4 Material Handling & Spill Prevention / Clean-Up Procedures

The permit requires a description of material handling procedures and storage requirements for significant materials. Equipment and procedures for cleaning up spills shall be identified in the SWPPP and made

available to the appropriate personnel. The procedures shall identify measures to prevent spilled materials or material residues on the outside of the containers from being discharged into storm water.

The SWPPP may include, by reference, requirements of either a Pollution Incident Prevention Plan (PIPP) prepared in accordance with the Part 5 Rules (Rules 324.2001 through 324.2009 of the Michigan Administrative Code); a Hazardous Waste Contingency Plan (HWCP) prepared in accordance with 40 CFR 264 and 265 Subpart D, as required by Part 111 of the Michigan Act; or a Spill Prevention Control and Countermeasure (SPCC) plan prepared in accordance with 40 CFR 112.

Question: Does the facility have any additional material handling & spill / clean-up procedures on file in addition to the SWPPP? No Yes

- If the answer is “No” complete the table below
- If the answer is “Yes” then reference the procedures and where they are located here and complete the table below as necessary:

Spills and leaks together are the largest industrial source of storm water pollution. Thus, this SWPPP specifies material handling procedures and storage requirements for significant materials. Equipment and procedures necessary for cleaning up spills and preventing the spilled materials from being discharged have also been identified. All employees have been made aware of the proper procedures. See the DEQ Industrial Storm Water Certified Operator Training Manual for additional information.

The DEQ, WRD Industrial Storm Water program spill report compliance assistance document should be kept with the SWPPP. Download the document from the DEQ, WRD Industrial Storm Water webpage or by clicking on the following link: http://www.michigan.gov/documents/deq/wrd-isw-permit_info-spill-reporting_398791_7.pdf

If material handling and spill prevention / clean-up procedures are not addressed in other facility documents (referenced above) then the table below needs to be completed:

Material Handling & Spill Prevention / Clean-up Procedures Table		
Potential Spill Area	Material Handling & Storage Procedures	Spill Response Procedures & Equipment

SEE TABLE 2 FOR SPILL KIT INVENTORY

5.5 Soil Erosion & Sedimentation Control Measures

The permit requires the identification of areas which, due to topography, activities, or other factors, have a high potential for significant soil erosion. Areas commonly prone to soil erosion are: gravel lots, bare earth or gravel at material handling areas around storm water inlets, areas with concentrated storm water runoff into streams or ditches, and access roads over open streams or ditches. Control measures must be implemented in areas prone to soil erosion and sedimentation. More information on soil erosion and sedimentation control may be obtained from the DEQ, Water Resources Division District Office.

Question: Is dust suppression material used on site? Yes No

- If “Yes” then describe the actions implemented to prevent an unauthorized discharge to the storm sewer system or surface waters of the state:

Question: Are there areas of the site that are prone to soil erosion and/or sedimentation? Yes No

- If “Yes” then complete the table below:

Soil Erosion & Sedimentation Control Measures Table	
Areas Prone to Soil Erosion or Sedimentation	Control Measures Implemented
Space to list additional areas of concerns and control measures if necessary:	

5.6 Employee Training Program

The permit requires a description of employee training programs have been implemented to inform appropriate personnel at all levels of responsibility of the components and goals of the SWPPP. Recent modifications to the General Permits have included a requirement for annual employee training. An employee training video is available at the DEQ, WRD, Industrial Storm Water webpage or by clicking on the following link:

<https://www.youtube.com/watch?v=IGqvsztguRA&feature=youtu.be>

Employee training will be a major component in ensuring the success of the facility's SWPPP. The more knowledgeable all employees are about the facility's SWPPP and what is expected of them, the greater the chance that the plan will be effective. The following is a description of the employee training programs to be implemented to inform appropriate personnel at all levels of responsibility of the components and goals of the SWPPP (i.e. good housekeeping practices, spill prevention and response procedures, waste minimization practices, informing customers of facility policies, etc.).

The Employee Training Form is in Section 19.0.

Employee Training Frequency:

Employee Training Program Description:

5.7 TMDL Requirements

The permit requires that if there is a Total Maximum Daily Load (TMDL) established by the Department for the receiving water, which restricts the discharge of any of the identified significant materials or constituents of those materials, then the SWPPP shall identify the level of control for those materials necessary to comply with the TMDL.

The TMDL means the amount of pollutant load a water body, such as a lake or stream, can assimilate and still meet water quality standards. If a receiving water body does not meet the water quality standards for a specific pollutant, the DEQ will establish the appropriate daily maximum load for that pollutant to allow the water body to again meet water quality standards. If a permitted facility is expected to discharge that specific pollutant in its storm water to that water body, the General Permit requires the facility to list actions it will take to meet that TMDL requirement.

The applicable TMDLs will be identified on the Certificate of Coverage (COC).

See the DEQ, WRD, Industrial Storm Water Webpage for additional TMDL information or click this link for the TMDL compliance assistance document: http://www.michigan.gov/documents/deq/wrd-isw-permit-info-tmdl_398790_7.pdf

Question: Is there a TMDL Requirement listed on the COC? Yes No

- If the answer to the above question is “Yes” then complete the table below:

TMDL Pollutant:	Best Management Practices Implemented to reduce the discharge of the TMDL pollutant:
Space to list additional TMDL pollutants and BMPs implemented onsite if necessary:	

5.8 List of Significant Materials Still Present

The permit requires the identification of significant materials expected to be present in storm water discharges following implementation of non-structural preventative measures and source controls. Non-structural controls are used to reduce pollutants at the source before they can get into the storm water runoff. In some cases, these types of controls will not be enough. A list of significant materials expected to be present in storm water discharges after implementation of nonstructural controls must be included in the SWPPP. The materials listed below will be addressed through the use of structural controls. (If there will be no significant materials present after the implementation of non-structural controls, state that in this section.)

Significant Material	Location and Control Measure:	Impacted Inlet(s):	Impacted Discharge Point(s):
Space available to add addition information if necessary:			

6.0 STRUCTURAL CONTROLS

The permit requires that where implementation of non-structural controls does not control storm water discharges in accordance with water quality standards, the SWPPP shall provide a description of the location, function, and design criteria of structural controls for prevention and treatment.

Structural controls may be necessary:

- 1) To prevent uncontaminated storm water from contacting or being contacted by significant materials; or
- 2) If preventive measures are not feasible or are inadequate to keep significant materials at the site from contaminating storm water. Structural controls shall be used to treat, divert, isolate, recycle, reuse, or otherwise manage storm water in a manner that reduces the level of significant materials in the storm water and provides compliance with the Water Quality Standards

Examples of structural controls include the following:

- | | |
|-------------------------------------|---------------------------------|
| ✓ Signs and Labels | ✓ Paving |
| ✓ Safety Posts | ✓ Curbing |
| ✓ Fences | ✓ Drip Pans |
| ✓ Security Systems | ✓ Secondary Containment |
| ✓ Temporary and Permanent Coverings | ✓ Catch Basin Inserts |
| ✓ Storm Water Conveyances | ✓ Detention and Retention Ponds |
| ✓ Diversion Dikes | ✓ Vegetative Filters |
| ✓ Grading | ✓ Oil/Water Separators |

These types of controls are physical features that control and prevent storm water pollution. They can range from preventive measures to collection structures to treatment systems. Structural controls will typically require construction of a physical feature or barrier. Below is a description of the structural controls used at the facility. See the DEQ Industrial Storm Water Operator Training Manual for additional details on structural controls.

Question: Are structural control measures used at the facility? No Yes

- If answer above is “Yes” then complete the appropriate information in the table below.

Structural Controls Used at the Facility		
Description of structural control(s)	Location of structural control(s)	Significant Materials intended to be managed by the structural control(s)

7.0 NON-STORM WATER DISCHARGES

The permit requires that all discharge locations be evaluated for the presence of non-storm water discharges. Any unauthorized storm water discharges must be eliminated, or covered under another NPDES permit.

Storm water shall be defined to include all of the following non-storm water discharges provided pollution prevention controls for the non-storm water component are identified in the SWPPP.

Question: Is any of the 10 non-storm water discharges listed below applicable to the facility? No Yes

- If the answer is “Yes” then complete the appropriate sections of the table below:

Check the Applicable Non Storm Water Discharges at the Facility:	Pollution Prevention Controls Implemented:	Impacted Inlet(s):	Impacted Discharge Point(s):
<input type="checkbox"/> 1. Discharges from fire hydrant flushing			
<input type="checkbox"/> 2. Potable water sources including water line flushing			
<input type="checkbox"/> 3. Water from fire system testing and fire fighting training without burned materials or chemical fire suppressants			
<input type="checkbox"/> 4. Irrigation drainage			
<input type="checkbox"/> 5. Lawn watering			
<input type="checkbox"/> 6. Routine building wash-down that does not use detergents or other compounds			
<input type="checkbox"/> 7. Pavement wash waters where contamination by toxic or hazardous materials has			

	not occurred (unless all contamination by toxic or hazardous materials has been removed) and where detergents are not used			
<input type="checkbox"/>	8. Uncontaminated condensate from air conditioners, coolers, and other compressors and from the outside storage of refrigerated gases or liquids			
<input type="checkbox"/>	9. Uncontaminated ground water			
<input type="checkbox"/>	10. Foundation or footing drains where flows are not contaminated with process materials such as solvents			

Discharges from fire fighting activities are authorized by the permit, but are exempted from the requirement to be identified in the SWPPP.

8.0 ANNUAL REVIEW

The permit requires that the permittee shall review the SWPPP annually after it is developed and maintain written summaries of the reviews. Based on the review, the permittee shall amend the SWPPP as needed to ensure continued compliance with the terms and conditions of the permit. The annual review is to be retained on site for three years and depending on the general permit is required to be submitted to the DEQ district office on or before January 10th of each year.

The Annual Review Report Form is in Section 20.0.

Specify the month the Annual SWPPP Review will be performed:

9.0 INDUSTRIAL STORM WATER CERTIFIED OPERATOR UPDATE

The permit requires that if the Industrial Storm Water Certified Operator is changed or an additional Industrial Storm Water Certified Operator is added, the permittee shall provide the name and certification number of the new Industrial Storm Water Certified Operator to the Department. If a facility has multiple Industrial Storm Water Certified Operators, the name and certification number of the Industrial Storm Water Certified Operators shall be included in the SWPPP.

10.0 RECORD KEEPING

The permit requires that the permittee shall maintain records of all SWPPP related inspection and maintenance activities. Records shall also be kept describing incidents such as spills or other discharges that can affect the quality of storm water runoff. All such records shall be retained for three years. The following records are required by the permit:

- ✓ Routine preventive maintenance inspection reports
- ✓ Routine good housekeeping inspection reports
- ✓ Comprehensive site inspection reports
- ✓ Documentation of visual assessments
- ✓ Employee training records
- ✓ Written summaries of the annual SWPPP review

✓ Short Term Storm Water Characterization Study data

11.0 SWPPP CERTIFICATION

The permit requires that the SWPPP shall be reviewed and signed by the Certified Storm Water Operator(s) and by either the permittee or an authorized representative in accordance with 40 CFR 122.22. The SWPPP shall be retained on-site at the facility which generates the storm water discharge.

I certify under penalty of law that the storm water drainage system in this SWPPP has been tested or evaluated for the presence of non-storm water discharges either by me, or under my direction and supervision. I certify under penalty of law that this SWPPP has been developed in accordance with the General Permit and with good engineering practices. To the best of my knowledge and belief, the information submitted is true, accurate, and complete. At the time this plan was completed no unauthorized discharges were present. I am aware that there are significant penalties for submitting false information, including the possibility of fine or imprisonment for knowing violations.

Permittee or Authorized Representative
Printed Name & Title:
Signature & Date:

Industrial Storm Water Certified Operator
Printed Name & Certification Number:
Signature & Date:

Space to list additional Industrial Storm Water Certified Operators if Necessary	
Printed Name & Certification Number	Signature & Date

12.0 FIGURE 1 – FACILITY SITE MAP (Use separate sheet if necessary)

13.0 TABLE 1 – SIGNIFICANT MATERIAL INVENTORY AND DESCRIPTION OF INDUSTRIAL ACTIVITY OR SIGNIFICANT MATERIAL STORAGE AREAS

Instructions - Fill out the applicable areas or activities in the corresponding sections. Add more lines as needed. Once you have described the area or activity, list the significant materials that are associated with the areas or activities, the exposure methods, and evaluate the level of exposure. Once that is completed indicate the inlet(s) and discharge point(s) that would be impacted if significant materials were discharged from the areas or activities described.

Section Listed in General Permit	Storage Areas / Activity Areas	Significant Materials	Exposure Method	Reasonable Potential Evaluation (high,medium,low)	Inlet(s)	Discharge Point(s)
1) Loading, unloading, and other material handling operations						
2) Outdoor storage including secondary containment structures						
3) Outdoor manufacturing or processing activities						
4) Significant dust or particulate generating processes						
5) Discharge from vents, stacks, and air emission controls						
6) On-site waste disposal practices						

13.0 TABLE 1 CONTINUED

Section Listed in General Permit	Storage Areas / Activity Areas	Significant Materials	Exposure Method	Reasonable Potential Evaluation (high,medium,low)	Inlet(s)	Discharge Point(s)
7) Maintenance and cleaning of vehicles, machines and equipment						
8) Areas of exposed and/or erodible soils						
9) Sites of Environmental Contamination listed under Part 201						
10) Areas of significant material residues						
11) Areas where animals congregate (wild or domestic) and deposit wastes						
12) Other areas where storm water may contact significant materials						

14.0 VISUAL ASSESSMENT PROCEDURES

1. List the discharge point(s) (as indicated on the SWPPP map):
 - a) Is there substantially identical discharge points? Yes No
If "Yes" then complete a) and b) below, if "No" go to Number 2.
 - b) Describe the justification for the substantially identical discharge points determination?
 - c) List the schedule for alternating the substantially identical discharge points:
2. Describe the monitoring (sampling) location for each discharge point:
3. List the Qualified Personnel that will collect the water sample:
4. Training for the Qualified Personnel includes viewing the Visual Assessment Webinar and/or the 3 Visual Assessment Tutorials on the DEQ, WRD Industrial Storm Water webpage. Check the appropriate box below:
 - Yes
 - No, however a copy of the training materials used are included with this procedure.
5. List the sampling equipment used for the collecting the water sample(s):
6. Complete a) through c) below to describe the storm event information.
 - a) Describe how qualifying storm events are determined (including nature of the event):
 - b) Describe how each discharge point was evaluated to determine when a discharge would begin:
 - c) Describe what would constitute an adverse weather condition that would prevent sample collection:
7. Describe how the samples will be collected (Determine the timing sequence for water sample collection from the discharge points):
8. Describe the water sampling instructions that the Qualified Personnel will follow:
9. Describe how observations made by the Qualified Personnel will be documented during the discharge (include nature of the event):
10. Describe the sample storage procedures if applicable:
11. Describe the procedures the Industrial Storm Water Certified Operator will follow to perform the visual assessment(s) of the water sample(s):

12. List the name(s) of the Industrial Storm Water Certified Operator that will be performing the water sample visual assessment(s):
13. The DEQ, WRD Visual Assessment Report form should be used to document each water sample visual assessment. Check the appropriate box below:
- Yes, the DEQ, WRD Visual Assessment Report form is used.
- No, the DEQ, WRD Visual Assessment Report form is not used however the form being used to meet this requirement is included with this procedure.
14. Colored Photos shall be used to record the visual assessment(s). If other methods of recording observations will be used describe those methods:
15. All visual assessment documentation should be kept with the SWPPP file. If documentation will be kept at an alternate location state that location:
16. Describe the follow-up actions that will be taken if unusual characteristics are observed during the visual assessment(s):

15.0 TABLE 2 – SPILL KIT INVENTORY

List the spill response equipment that will be maintained in each location or locker (refer to MSDSs to determine recommended clean-up methods and supplies):

Person responsible for maintaining this inventory:

Locker number or location	Absorbents (pads, booms, kitty litter, etc.)	Tools (shovels, brooms, squeegees, etc.)	Personal Protective Equipment (rubber gloves, boots, masks, etc.)	Other Supplies (warning tape, labels, markers, MSDSs, etc.)

Label each spill kit with the words “SPILL KIT” and the necessary emergency telephone number(s) or pager number(s) of persons to be contacted in case of a spill or leak that is beyond the training and equipment available on or near each spill locker:

Facility Responsible Person/Phone Number:

Spill Response Contractor (if any)/Phone Number:

DEQ District Office Phone Number:

DEQ 24-Hour Emergency Spill Reporting Hot-Line: 1-800-292-4706 (PEAS Number)

Stencil the following warning on each spill kit:

**“WARNING: NEVER HOSE DOWN A SPILL!
CLEAN IT UP PROMPTLY AND DISPOSE OF THE WASTE PROPERLY.”**

18.0 VISUAL ASSESSMENT REPORT FORM

Visual Assessment Sample Information		
Facility Name:	COC No. <u>or</u> NPDES Permit No:	
Industrial Storm Water Certified Operator Name:		
Name / Title of person collecting sample if other than Cert. Operator:		
Date of Comprehensive Inspection:	Is this a substitute sample? <input type="checkbox"/> No <input type="checkbox"/> Yes Explain:	
Discharge Point # / Name:	Substantially Identical Discharge Point? <input type="checkbox"/> No <input type="checkbox"/> Yes List:	
Description of sample collection location:		
Date / Time Discharge Began:	Date / Time Sample Collected:	Date / Time Sample Examined:
For rain events - if sample was collected > 30 minutes from start of discharge, provide explanation:		
Snowmelt <input type="checkbox"/>	Rainfall <input type="checkbox"/> Inches:	If rain event - previous storm ended > 72 hours prior to start of this event? <input type="checkbox"/> No <input type="checkbox"/> Yes

Observations	
Color: <input type="checkbox"/> None <input type="checkbox"/> Yes (describe):	Floating Solids: <input type="checkbox"/> No <input type="checkbox"/> Yes (describe):
Oil Films / Sheens: <input type="checkbox"/> None <input type="checkbox"/> Flecks <input type="checkbox"/> Globs <input type="checkbox"/> Sheen <input type="checkbox"/> Other Describe appearance of film/sheen:	
Foam (gently shake sample): <input type="checkbox"/> No <input type="checkbox"/> Yes	Suspended Solids: <input type="checkbox"/> No <input type="checkbox"/> Yes (describe):
Settleable Solids: <input type="checkbox"/> No <input type="checkbox"/> Yes (describe):	
Odor: <input type="checkbox"/> None <input type="checkbox"/> Musty <input type="checkbox"/> Sewage <input type="checkbox"/> Sulfur <input type="checkbox"/> Sour <input type="checkbox"/> Hydrocarbons <input type="checkbox"/> Chemical <input type="checkbox"/> Other (describe):	
Turbidity/Clarity: <input type="checkbox"/> Clear <input type="checkbox"/> Slightly Cloudy <input type="checkbox"/> Cloudy <input type="checkbox"/> Milky <input type="checkbox"/> Other (describe):	
Picture of sample taken (required): <input type="checkbox"/> No <input type="checkbox"/> Yes Storage location:	
Receiving waters observed? <input type="checkbox"/> N/A <input type="checkbox"/> No <input type="checkbox"/> Yes (describe):	

Follow-up:
Based on the visual observation, are there unnatural characteristics in the discharge (cloudiness, color, sheen, etc.)? <input type="checkbox"/> No <input type="checkbox"/> Yes
Potential sources of observed unnatural characteristics <input type="checkbox"/> N/A <u>or</u> describe:
Implemented / recommended corrective action(s) <input type="checkbox"/> N/A <u>or</u> describe: Scheduled date for correction:

I certify that the above information is correct	
Certified Operator Signature	Date

RETAIN THIS FORM FOR A MINIMUM OF 3 YEARS

20.0 ANNUAL SWPPP REVIEW REPORT FORM

Facility Information	
Designated Name:	Certificate of Coverage No. <u>or</u> Individual Permit No.:
Facility Address:	County:
Facility Contact Information	
Name:	Telephone No.:
Email Address:	Certification No.:
Backup Facility Contact Information	
Name:	Telephone No.:
Email Address:	Certification No.:
Industrial Storm Water Certified Operator Information	
Name:	Telephone No.:
Email Address:	Certification No.:
Space to list additional operators if applicable:	

The SWPPP Checklist on the DEQ, WRD Industrial Storm Water webpage should be used to review the facility's SWPPP and before the following 10 questions are completed.

1. Facility general information is current and accurate	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
2. Site map is current and accurate	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
3. Significant material inventory is current and accurate	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
4. New exposures, processes and related controls have been documented appropriately in the SWPPP	Yes <input type="checkbox"/>	No <input type="checkbox"/>	NA <input type="checkbox"/>
5. Spills have been recorded and reported as appropriate	Yes <input type="checkbox"/>	No <input type="checkbox"/>	NA <input type="checkbox"/>
6. Employee SWPPP training was conducted and documented	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
7. Records of routine preventative maintenance and housekeeping inspections are available in the SWPPP file	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
8. Comprehensive site inspections have been completed, certified and filed in the SWPPP file	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
9. Visual Assessments have been completed and the reports have been filed in the SWPPP file	Yes <input type="checkbox"/>	No <input type="checkbox"/>	NA <input type="checkbox"/>
10. Corrective actions noted in the inspection reports have been completed	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
11. The SWPPP is compliant with the permit and has been reviewed and signed by the Certified Storm Water Operator and the permittee or designated representative	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Additional Comments:			

I certify that the above information is correct:	
Name:	Signature / Date:

SUBMIT THIS FORM TO THE DEQ, WRD DISTRICT OFFICE IDENTIFIED ON YOUR CERTIFICATE OF COVERAGE ON OR BEFORE **JANUARY 10TH** OF EACH YEAR

21.0 DEQ SPILL OR RELEASE REPORT



MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY

SPILL OR RELEASE REPORT

NOTE: Some regulations require a specific form to use and procedures to follow when reporting a release. Those forms and procedures **MUST** be used and followed if reporting under those regulations. This report form is to aid persons reporting releases under regulations that do not require a specific form. This report form is not required to be used. **To report a release, some regulations require a facility to call the PEAS Hotline at 800-292-4706, or DEQ District Office that oversees the county where it occurred, and other regulating agencies and provide the following information. A follow-up written report may be required. Keep a copy of this report as documentation that the release was reported. If you prefer to submit this report electronically by FAX or e-mail, contact the regulating agency for the correct telephone number or e-mail address. See the DEQ website on [Spill/Release Reporting](#) for more reporting information.**

Please print or type all information.

NAME AND TITLE OF PERSON SUBMITTING WRITTEN REPORT			TELEPHONE NUMBER (provide area code)			
NAME OF BUSINESS		RELEASE LOCATION (provide address if different than business, if known, and give directions to the spill location. Include nearest highway, town, road intersection, etc.)				
STREET ADDRESS		_____				
CITY	STATE					ZIP CODE
BUSINESS TELEPHONE NUMBER (provide area code)						
SITE IDENTIFICATION NUMBER AND OTHER IDENTIFYING NUMBERS (if applicable)		COUNTY	TOWNSHIP	TIER/RANGE/SECTION (if known)		
RELEASE DATA. Complete all applicable categories. Check all the boxes that apply to the release. Provide the best available information regarding the release and its impacts. Attach additional pages if necessary.						
DATE & TIME OF RELEASE (if known) ____/____/____ _____am/pm	DATE & TIME OF DISCOVERY ____/____/____ _____am/pm	DURATION OF RELEASE (if known) _____ days _____ hours _____ minutes		TYPE OF INCIDENT <input type="checkbox"/> Explosion <input type="checkbox"/> Fire <input type="checkbox"/> Leaking container <input type="checkbox"/> Loading/unloading release <input type="checkbox"/> Pipe/valve leak or rupture <input type="checkbox"/> Vehicle accident <input type="checkbox"/> Other _____		
MATERIAL RELEASED (Chemical or trade name) <input type="checkbox"/> CHECK HERE IF ADDITIONAL MATERIALS LISTED ON ATTACHED PAGE.		CAS NUMBER or HAZARDOUS WASTE CODE	ESTIMATED QUANTITY RELEASED (indicate unit e.g. lbs, gals, cu ft or yds)	PHYSICAL STATE RELEASED (indicate if solid, liquid, or gas)		
FACTORS CONTRIBUTING TO RELEASE <input type="checkbox"/> Equipment failure <input type="checkbox"/> Operator error <input type="checkbox"/> Faulty process design <input type="checkbox"/> Training deficiencies <input type="checkbox"/> Unusual weather conditions <input type="checkbox"/> Other _____		SOURCE OF LOSS <input type="checkbox"/> Container <input type="checkbox"/> Railroad car <input type="checkbox"/> Pipeline <input type="checkbox"/> Ship <input type="checkbox"/> Tank <input type="checkbox"/> Tanker <input type="checkbox"/> Truck <input type="checkbox"/> Other _____				
TYPE OF MATERIAL RELEASED <input type="checkbox"/> Agricultural: manure, pesticide, fertilizer <input type="checkbox"/> Chemicals <input type="checkbox"/> Flammable or combustible liquid <input type="checkbox"/> Hazardous waste <input type="checkbox"/> Liquid industrial waste <input type="checkbox"/> Oil/petroleum products or waste <input type="checkbox"/> Salt <input type="checkbox"/> Sewage <input type="checkbox"/> Other _____ <input type="checkbox"/> Unknown		MATERIAL LISTED ON or DEFINED BY <input type="checkbox"/> CAA Section 112(r) list (40 CFR Part 68) <input type="checkbox"/> CERCLA Table 302.4 (40 CFR Part 302) <input type="checkbox"/> EPCRA Extremely Hazardous Substance (40 CFR Part 355) <input type="checkbox"/> Michigan Critical Materials Register or permit <input type="checkbox"/> NREPA Part 31, Part 5 Rules polluting material <input type="checkbox"/> NREPA Part 111 or RCRA hazardous waste <input type="checkbox"/> NREPA Part 121 liquid industrial waste <input type="checkbox"/> Other list _____ <input type="checkbox"/> Unknown		IMMEDIATE ACTIONS TAKEN <input type="checkbox"/> Containment <input type="checkbox"/> Dilution <input type="checkbox"/> Evacuation <input type="checkbox"/> Hazard removal <input type="checkbox"/> Neutralization <input type="checkbox"/> System shut down <input type="checkbox"/> Diversion of release to treatment <input type="checkbox"/> Decontamination of persons or equipment <input type="checkbox"/> Monitoring <input type="checkbox"/> Other _____		
RELEASE REACHED						
<input type="checkbox"/> Surface waters (include name of river, lake, drain involved) _____			Distance from spill location to surface water, in feet _____			
<input type="checkbox"/> Drain connected to sanitary sewer (include name of wastewater treatment plant and/or street drain, if known) _____						
<input type="checkbox"/> Drain connected to storm sewer (include name of drain or water body it discharges into, if known) _____						
<input type="checkbox"/> Groundwater (indicate if it is a known or suspected drinking water source and include name of aquifer, if known) _____						
<input type="checkbox"/> Soils (include type e.g. clay, sand, loam, etc.) _____						
<input type="checkbox"/> Ambient Air						
<input type="checkbox"/> Spill contained on impervious surface						

EXTENT OF INJURIES, IF ANY <hr/>	WAS ANYONE HOSPITALIZED? <input type="checkbox"/> Yes NUMBER _____ HOSPITALIZED: _____ <input type="checkbox"/> No	TOTAL NUMBER OF INJURIES TREATED ON-SITE: <hr/>																																																																											
DESCRIBE THE INCIDENT, THE TYPE OF EQUIPMENT INVOLVED IN THE RELEASE, HOW THE VOLUME OF LOSS WAS DETERMINED, ALONG WITH ANY RESULTING ENVIRONMENTAL DAMAGE CAUSED BY THE RELEASE. IDENTIFY WHO IMMEDIATELY RESPONDED TO THE INCIDENT (own employees or contractor — include cleanup company name, contact person, and telephone number). ALSO IDENTIFY WHO DID FURTHER CLEANUP ACTIVITIES, IF PERFORMED OR KNOWN WHEN REPORT SUBMITTED <input type="checkbox"/> CHECK HERE IF DESCRIPTION OR ADDITIONAL COMMENTS ARE INCLUDED ON ATTACHED PAGE <hr/> <hr/> <hr/> <hr/>																																																																													
ESTIMATED QUANTITY OF ANY RECOVERED MATERIALS AND A DESCRIPTION OF HOW THOSE MATERIALS WERE MANAGED (include disposal method if applicable) <input type="checkbox"/> CHECK HERE IF DESCRIPTION OR ADDITIONAL COMMENTS ARE INCLUDED ON ATTACHED PAGE <hr/>																																																																													
ASSESSMENT OF ACTUAL OR POTENTIAL HAZARDS TO HUMAN HEALTH (include known acute or immediate and chronic or delayed effects, and where appropriate, advice regarding medical attention necessary for exposed individuals.) <input type="checkbox"/> CHECK HERE IF DESCRIPTION OR ADDITIONAL COMMENTS ARE INCLUDED ON ATTACHED PAGE <hr/>																																																																													
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY NOTIFIED: INITIAL CONTACT BY: <input type="checkbox"/> Telephone <input type="checkbox"/> Fax <input type="checkbox"/> Email <input type="checkbox"/> Other DATE/TIME INITIAL CONTACT: _____ <input type="checkbox"/> PEAS: 800-292-4706 Log Number Assigned _____ <input type="checkbox"/> DEQ District or Field Office Divisions or Offices Contacted: <table style="width:100%; border: none;"> <tr> <td><input type="checkbox"/> Baraga</td> <td><input type="checkbox"/> Gwinn</td> <td><input type="checkbox"/> Air Quality</td> </tr> <tr> <td><input type="checkbox"/> Bay City</td> <td><input type="checkbox"/> Jackson</td> <td><input type="checkbox"/> Land & Water Management</td> </tr> <tr> <td><input type="checkbox"/> Cadillac</td> <td><input type="checkbox"/> Kalamazoo</td> <td><input type="checkbox"/> Office Geological Survey</td> </tr> <tr> <td><input type="checkbox"/> Crystal Falls</td> <td><input type="checkbox"/> Lansing</td> <td><input type="checkbox"/> Remediation and Redevelopment</td> </tr> <tr> <td><input type="checkbox"/> Detroit</td> <td><input type="checkbox"/> Newberry</td> <td><input type="checkbox"/> Waste and Hazardous Materials</td> </tr> <tr> <td><input type="checkbox"/> Gaylord</td> <td><input type="checkbox"/> Warren</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Grand Rapids</td> <td><input type="checkbox"/> Wyoming</td> <td><input type="checkbox"/> Water Bureau</td> </tr> </table> DEQ Office locations are subject to change	<input type="checkbox"/> Baraga	<input type="checkbox"/> Gwinn	<input type="checkbox"/> Air Quality	<input type="checkbox"/> Bay City	<input type="checkbox"/> Jackson	<input type="checkbox"/> Land & Water Management	<input type="checkbox"/> Cadillac	<input type="checkbox"/> Kalamazoo	<input type="checkbox"/> Office Geological Survey	<input type="checkbox"/> Crystal Falls	<input type="checkbox"/> Lansing	<input type="checkbox"/> Remediation and Redevelopment	<input type="checkbox"/> Detroit	<input type="checkbox"/> Newberry	<input type="checkbox"/> Waste and Hazardous Materials	<input type="checkbox"/> Gaylord	<input type="checkbox"/> Warren		<input type="checkbox"/> Grand Rapids	<input type="checkbox"/> Wyoming	<input type="checkbox"/> Water Bureau	OTHER ENTITIES NOTIFIED: <table style="width:100%; border: none;"> <thead> <tr> <th style="width:80%;"></th> <th style="width:10%;">Date:</th> <th style="width:10%;">Time:</th> </tr> </thead> <tbody> <tr><td><input type="checkbox"/> National Response Center (NRC): 800-424-8802</td><td>_____</td><td>_____</td></tr> <tr><td><input type="checkbox"/> US Coast Guard Office:</td><td>_____</td><td>_____</td></tr> <tr><td style="padding-left: 20px;"><input type="checkbox"/> Detroit <input type="checkbox"/> Grand Haven <input type="checkbox"/> Sault Ste. 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