

PERMIT INFORMATION

IOWA DEPARTMENT OF NATURAL RESOURCES ENVIRONMENTAL SERVICES DIVISION NOTICE OF INTENT FOR NPDES COVERAGE UNDER GENERAL PERMIT

CASHIER'S USE ONLY 0253-542-SW08-0581

Name ,

No. 1 FOR "STORM WATER DISCHARGES ASSOCIATED WITH INDUSTRIAL ACTIVITY"

or

No. 2 FÓR "STORM WATER DISCHARGES ASSOCIATED WITH INDUSTRIAL ACTIVITY FOR CONSTRUCTION ACTIVITIES (

or

No. 3 FOR "STORM WATER DISCHARGE ASSOCIATED WITH INDUSTRIAL ACTIVITY FOR ASPHALT PLANTS, CONCRETE BATCH PLANTS, ROCK CRUSHING PLANTS, AND CONSTRUCTION SAND AND GRAVEL FACILITIES."

Has this storm water discharge been previously permitted? Yes No							
If yes, please list authorization number							
Under what General Permit are you applying for coverage?							
General Permit No. 1 General Permit No. 2 General Permit No. 3 General Permit No. 3							
PERMIT FEE OPTIONS							
For coverage under the NPDES General Permit the following fees apply:							
Annual Permit Fee \$175 (per year) Maximum coverage is one year. 3-year Permit Fee \$350 Maximum coverage is three years. 4-year Permit Fee \$525 Maximum coverage is four years. 5-year Permit Fee \$700 Maximum coverage is five years.							
Checks should be made payable to: Iowa Department of Natural Resources.							
FACILITY OR PROJECT INFORMATION Enter the name and full address/location (not mailing address) of the facility or project for which permit coverage is requested.							
NAME: Spring Creek Apartments COUNTY: Polk							
STREET ADDRESS OF SITE: 6120 NE 12 th AVE							
CITY: Pleasant Hill STATE: IA ZIP CODE: 50327							
CONTACT INFORMATION Given name, mailing address and telephone number of a contact person (Attach additional information on separate pages as needed). This will be the address to which all correspondence will be sent and to which all questions regarding your application and compliance with the permit will be directed.							
NAME: Melinda Whittaker PHONE: 207-774-5101							
COMPANY NAME (if applicable): Spring Creek Housing Associates LP							
STREET ADDRESS: 509 Forest Ave #250							
CITY: Portland STATE: ME ZIP CODE: 04101							
E-mail address (if available): melinda.whittaker@wishrockgroup.com							
Check the appropriate box to indicate the legal status of the operator of the facility.							
☐ Federal ☐ State ☐ Public ☒ Private ☐ Other (specify)							
SIC CODE (General Permit No. 1 & 3 Applicants Only) SIC code refers to Standard Industrial Classification code number used to classify establishments by type of economic activity.							

FACILITY LOCATION OR LOCATION OF CONSTRUCTION SITE

Give the location b	y ¼ section, section,	township, range, (e.g.,	NW, 7, T78N, R3W).			
¼ SECTION	SECTION	TOWNSHIP	RANGE	MAIL TO: STORM WATER COORDINATOR		
SE 1/4	35	79N	23W	IOWA DNR		
				502 E 9 TH ST DES MOINES IA 50319-0034		
OWNER INFORMATE		owner of the facility.				
NAME: Spring Crook Housing Associates LD				DHONE: 207 774 E101 avt 200		

NAME: Spring Creek Housing Associates LP STREET ADDRESS: 509 Forest Ave. Suite 250 CITY: Portland STATE: ME ZIP CODE: 04101 Owner E-mail address (if available): penn.lindsay@wishrockgroup.com **OUTFALL INFORMATION** Discharge start date, i.e., when did/will the site begin operation or 10/1/92, whichever is later: 06/2021 Is any storm water monitoring information available describing the concentration of pollutants in storm water discharges? Yes No **NOTE**: Do not attach any storm water monitoring information with the application. Receiving water(s) to the first uniquely named waterway in Iowa (e.g., road ditch to unnamed tributary to Mud Creek to South Skunk Storm sewer to ditch tributary to Little Fourmile Creek northwest of the site. Compliance With The Following Conditions: Yes No Has the Storm Water Pollution Prevention Plan been developed prior to the submittal of this Notice of Intent and does the plan meet the requirements of the applicable General Permit? (do not submit the SWPPP with the \boxtimes application) Will the Storm Water Pollution Prevention Plan comply with approved State (Section 161A.64, Code of Iowa) or local sediment and erosion plans? (for General Permit 2 only) Has a public notice been published for at least one day, in the newspaper with the largest circulation in the area X where the discharge is located, and is the proof of notice attached? (new applications only)

GENERAL PERMIT NO. 2 AND GENERAL PERMIT NO. 3 APPLICANTS COMPLETE THIS SECTION.						
Description of Project (describe in one sentence what is being constructed):						
Construction of multi-tenant residential building with associated pavement, grading, and utilities.						
For General Permit No. 3 - Is this facility to be moved this year?						
Number of Acres of Disturbed Soil:	2.7					
	(Construction Activities Only)					
Estimated Timetable For Activities / Projects, i.e., approximately when did/will the project begin and end:						
June 2021 begin/end January 2022						

CERTIFICATION – ALL APPLICATIONS MUST BE SIGNED

Only the following individuals may sign the certification: owner of site, principal executive officer of at least the level of vicepresident of the company owning the site, a general partner of the company owning the site, principal executive officer or ranking elected official of the public entity owning the site, any of the above of the general contracting company for construction sites.

I certify under penalty of law that this document was prepared under my direction or supervision in accordance with a system designed to assure that qualified people properly gathered and evaluated 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, this information is to the best of my knowledge and belief, true, accurate, and complete. I further certify that the terms and conditions of the general permit will be met. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Penn Lindsay		VP of Development Wishrock G	VP of Development Wishrock Group		
NAME (print or type)	2 - 2 -	TITLE AND COMPANY NAME OF SIGNATORY			
SIGNATURE:	Jer CC	DATE:	6/3/2021		