Division of Water and Waste Management

ANNUAL CERTIFICATION

WV/NPDES NUMBER WV0111457 MULTI-SECTOR PERMIT ASSOCIATED WITH INDUSTRIAL ACTIVITY

General Permit Registration No. _______________ Coverage Date ___________ 20 ________

1. Name of Facility __________________________________________________________

2. Location _________________________________________________________________
   Street or Highway                                                City                                         County

3. Responsible Authority ______________________________________________________

4. Official Title _________________________ Telephone No. (____) __________________
   Street or Highway                                   City                                                Zip Code

5. Mailing Address

6. Certification (Please mark one (1) of the following boxes)

☐ Low Concentration Monitoring Waiver Certification in accordance with Condition B.4. of the Storm Water General Permit
   * A review of all Discharge Monitoring Reports and other analyses is enclosed for your consideration. There is no indication that the assigned benchmark values listed below were exceeded during the four(4) latest samples submitted.

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☐ Annual Low Concentration Monitoring Waiver Certification in accordance with Condition B.4. of the Storm Water General Permit
   * There has not been a significant change in the industrial activity or the pollution prevention measures in the area of facility that drains to the outlet for which sampling was waived.
☐ Annual Alternative Certification in accordance with Condition B.4. of the Storm Water General Permit.

* Material handling equipment or activities, raw materials, intermediate products, final products, waste materials, by-products, industrial, machinery or operations, or significant materials from past industrial activity, that are located in areas of the facility within the drainage area of the outfall are not presently exposed to storm water and are not expected to be exposed to storm water for the certification period.

_I certify under penalty of law that I have personally examined and am familiar with the information required on this form and including:_

☐ Storm Water Pollution Prevention Plan (SWPPP) is currently updated and open for inspection at the facility.

☐ Groundwater Protection Plan is currently updated and open for inspection at the facility.

☐ A complete review and inspection will be conducted on an annual basis to update the SWPPP and the GPP and Best Management Practices will be considered to lessen any storm water contamination at this site.

Based upon my inquiry of those individuals responsible for obtaining 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.

OFFICIAL SIGNATURE __________________________  DATE _______________________

Please make additional blank copies of this report for each year of the life of the permit.

_We will process your personal information (email address, mailing address and/or telephone number) in accordance with the State of West Virginia’s Privacy Policy for appropriate and customary business purposes. Your personal information may be disclosed to other State agencies or third parties in the normal course of business or as needed to comply with statutory or regulatory requirements, including Freedom of Information Act requests. The Division of Water and Waste Management will appropriately secure your personal information. If you have any questions about our use of your personal information, please contact the DEP’s Chief Privacy officer at depprivacyofficer@wv.gov._