Printed Name

DHEC 0435 (10/2012)

## FORM B

## **MAJOR MODIFICATIONS**

# **Under South Carolina NPDES General Permit** For Stormwater Discharges From Construction Activities SCR100000 (Maintain As Part of On-Site SWPPP)

South Carolina Department of Health and Environmental Control	
Date:	
Project/Site Name: (as identified on prior approved NOI):	•
File Number or NPDES Permit (Coverage) Number: (as identified of	n prior approved NOI):
Fee Schedule C, and applicable sections of Form 2617 (Notice of Innote that each modification request requires review of Section V (	ction 3.1.7 of the Construction General Permit. Complete this Form, atent for Coverage(s) of Primary Permittees) as defined below. Please Waterbody Information) of the prior approved NOI to determine and ale C (page 2), a Narrative describing proposed modifications, and ajor modification request.
SECTION V (WATERBODY INFORMATION REVIEW: approved Notice of Intent (NOI) application. Identify if the initial the applicable certification statement below.  Has any of this information changed since the property of Intent (Form 2617) and attach it to this form with the other Information" on the new form and initial the applicable certification below.  Section V Certification (Please initial applicable state)  ——"I hereby certify that I have reviewed the prior approved thanges are required."  ——"I hereby certify that I have reviewed the prior approved thanges are as identified on the attached NOI (Form 26).  SECTION IV.F (MODIFICATION TO DISTURBED ARE a result of this modification. If the disturbed area decreases.	Review Section V (Waterbody Information) of your most recent waterbody information has changed since the last approval and ior approval?  Yes No ons I.A, I.B (if MS4), III (as applicable), IV.F, V, and VI of the Notice modification request documents. Identify Section V as "Change of ification below. If no change is required to this section, initial the ment)  Med Waterbody Information (Section V) for this project/site and no increases tenth of an acre): Review the change to disturbed area as or remains the same, a copy of the most recent prior approved NOI increases changes, complete Sections I.A, I.B (if MS4), III (as this form.
C. NARRATIVE: Attach a detailed Narrative description of p	ollution Prevention Plan documentation supporting the proposed
modification(s) (i.e., project plans, calculations, justification	
reports are herewith submitted and made a part of this a documents submitted signifying that I accept responsibility knowledge and belief that the design is consistent with the rec	IN BLACK INK! Read the Certifications below (in entirety). Provide C-SWPPP, all specifications and supporting calculations, forms, and opplication. I have placed my signature and seal on the design for the design of the system. Further, I certify to the best of my uirements of Title 48, Chapter 14 of the Code of Laws of SC, 1976 as 1, and in accordance with the terms and conditions of SCR100000."
Printed Name Signature	Date Signed
penalty of law that this document and all attachments were system designed to assure that qualified personnel properly gathe person or persons who manage the system, or those perso submitted is, to the best of my knowledge and belief, true, accordingly.	d its contractors and agents), as the case may be, certify under prepared under my direction or supervision in accordance with a ther and evaluate the information submitted. Based on my inquiry of as directly responsible for gathering the information, the information curate, and complete. I understand that DHEC enforcement actions e not met and I am aware that there are significant penalties for imprisonment for knowing violations."

Signature

Date Signed

### NPDES CGP FEE SCHEDULE C

(This schedule should <u>ONLY</u> be used Major Modification Reviews and may be used for ALL counties)
This schedule should <u>not</u> be used for projects reviewed by a delegated entity or MS4 operator.

See Section 3.1.7 (Modifications) of the Construction General Permit (CGP) for additional information and guidance. Modification requests are approved by the Department on a case-by-case basis. The BOW reserves the right to require a modification request be treated as a new project, where appropriate. You may consult the SCDHEC Stormwater Division at 803-898-4300 prior to submittal to determine if your proposed changes may be processed as a modification or will require a new project submittal.

The schedule should be attached to DHEC Form 2617. Do not send payment in window envelope. <u>DO NOT MAIL CASH</u>. DHEC will notify the Project Owner/ Operator if the submitted check or credit card payment cannot be processed or if fee requirements are different than indicated on this schedule. A \$100 NPDES plan review fee and \$100 per disturbed acre increase fee (not to exceed \$2000 for the entire project/site) is required with each modification request for projects NOT exempt from this fee per 72-300 et. Seq.

1. Identify the Major Modification(s) and Required Modification Fee

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See Section 3.1.7 of the CGP and page 3 of this form for additional information and a list of Department allowed major modifications.			Fee Fee	
If the modification is allowed under SCR100000, enter \$100.0 in the right-hand column). Proceed to Item 2.			00	
2. Determine the Additional Project Review Fees (Review fees cannot exceed \$2000 for a profile (Identify any additional disturbed area (nearest tenth of an acre) required for this modification in the cere \$100/disturbed acre) in the right-hand column). Proceed to Item 2.a below.	<del></del>	eview fees (b	ased or	
a. Prior (Current) Disturbed Area = (nearest tenth of an acre)  1. Enter the current total disturbed area for this project (prior to this modification). Proceed to It				
<b>2.</b> If the total entered in Item 2.a is <u>equal to or greater than 20.0 acres</u> , <u>no Review Fees are required</u> If the total is <u>less than 20.0 acres</u> , proceed to Item 2.b.	ed. Proceed to Item	1 2.d.		
b. Increase in Disturbed Area = (nearest tenth of an acre)  1. If the disturbed area for this project will increase with this modification application, enter the area (Item IV.F). If no increase, enter 0.0 acres. Proceed to Item 2.c. (NOTE: Additional disturbed greater than 1-2 acres. Requests for more than this amount must be accompanied with a detail increase amount.	ed area should ty	pically be	10	
c. Total Disturbed Area = (nearest tenth of an acre)  Add the disturbed areas in Items 2.a. and 2.b. Complete either 2.c.1 below or 2.c.2 below.	Disturbed Area (Nearest tenth of an acre)	Additio Disturbeo Fees	d Area	
<b>1.</b> If the <u>Total (Item 2.c) is less than or equal to 20.0 acres</u> , enter the <u>increase</u> in disturbed area (Item 2.b) in the center column. <u>Multiply the increase</u> by \$100/disturbed area and enter this fee in the right-hand column). <u>Proceed to Item 2.d.</u>	(Increase)	\$	00	
2. If the Total (Item 2.c) is greater than 20.0 acres, subtract the current disturbed area entered in Item 2.a from 20.0 acres and enter ONLY the (absolute numeric) difference in the center column. Difference: (20.0 acres (Item 2.a) acres = (nearest tenth of an acre) Multiply this difference by \$100/disturbed area and enter this fee in the right-hand column. Proceed to Item 2.d.	(Difference) (2.b.2)	\$	00	
d. Total Required Fees (Modification Project)  If Item 2.a is equal to or greater than 20.0 acres, enter fee from Item 1 in the right-hand column add the values in the right-hand columns of Items 1 and Item 2.c.1 or 2.c.2 and enter this sum is hand column. (The Department will not review this project until all required fees are received). Proceed	n the right-	\$	00	
3. Identify the Method of Payment:  Payment by Check:  Attach a signed and dated check payable to S.C. DHEC to the front of this Fee Please note that all checks must be less than 30 days old and must be for the en Payment by Credit Card: (Check here if you wish to pay via credit card using the The Department will contact you to obtain the credit card's information.  Please provide an e-mail address where the invoice number may be sent:	ntire required f			
r official use only: Invoice Number				