Nome Offshore Operator—Supplemental Information

Supply this information to your mineral property holder for submission to DNR.

Mineral Property Owner (s):_____ APMA #: _ _ _ _

Lease Tract or Mining Claim Number (s):_____

Operator Name:_____

Operator Summer Mailing Address:

_____

_____

City:_____ State: ____ Zip: _____

Summer Phone #:_____

Email:_____

Operator Winter Mailing Address:

_____

_____

City:_____ State: ____ Zip: _____

Winter Phone #:_____

Name and Phone Numbers of Other Operators to work on dredge (if more than one):

Name: _____ Phone Number:_____

Name: _____ Phone Number:_____

Name: _____ Phone Number:_____

Location of Operator Housing While in Nome:_____

List All Equipment to be Permitted:

	Dredge 1	Dredge 2	Dredge 3
Vessel ID (Name or Number)			
Vessel Dimensions			
Vessel Registration # and State	#: State:	#: State:	#: State:
DEC APDES Permit	#:	#:	#:
Suction Dredge Intake Nozzle Diameter / Pump Size	Inches: HP:	Inches: HP:	Inches: HP:
Mech. Dredge Bucket Volume	Cubic Yards:	Cubic Yards:	Cubic Yards:
Processing Rate	Yds.^{3}/Hr:	Yds.^{3}/Hr:	Yds.^{3}/Hr:
Wastewater Discharge Rate	GPM:	GPM:	GPM:
Maximum Water Depth	Feet:	Feet:	Feet:
Average Daily Operating Hours			
Operation on Sea Ice	☐ Yes / ☐ No	☐ Yes / ☐ No	☐ Yes / ☐ No

***Operations using equipment with a nozzle intake of 6" or less, 23 HP or less and solely operating in open waters are not required to have an APDES number. ***

Authorization for this Operator Valid from _____/_____/_____ to _____/_____/_____.

Mineral Property Owner Signature:_____ Date: _____

Mineral Property Owner Printed Name: _____

Nome Offshore Operator—Supplemental Information

DEC Alaska Pollutant Discharge Elimination System (APDES) Application

Mineral Property Owner (s):_____ APMA #: _ _ _ _

Lease Tract or Mining Claim Number (s):_____

Operator Name:_____

WASTEWATER DISCHARGE PERMIT APPLICATION

All suction dredge and mechanical dredge operations that discharge to a water of the U.S. require an Alaska Pollutant Discharge Elimination System (APDES) permit from DEC.

Do you want this supplement to act as an application or renewal for the following APDES general permit (GPs):

Small-Size Suction Dredge GP (nozzle diameter of 6” or less): Yes ☐ / ☐ No

Medium-Size Suction Dredge GP (nozzle diameter greater than 6” to 10”): Yes ☐ / ☐ No

Norton Sound Large Dredge GP (nozzle diameter greater than 10” or mechanical dredge): Yes ☐ ☐ No

Waterbody the discharge flows directly into:_____

Approximate coordinates of mine site:

Latitude: _____ Longitude: _____

Source (e.g., DNR - Alaska Mapper): _____ Datum: _____

****Please attach a drawing of the operation.****

Certification Statement – Applicable Only to Information Required for DEC Authorizations

(required for all DEC permit or mixing zone applicants)

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 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 for knowing violations.

Signature of Responsible Party (Operator/Vessel Owner): _____

Responsible Party Name (First Last, Position) - Printed: _____

Business Name (if applicable) - Printed: _____

Nome Offshore Operator—Supplemental Information

Operation Sketch

Mineral Property Owner (s):_____ APMA #: _ _ _ _

Lease Tract or Mining Claim Number (s):_____

Operator Name:_____