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DEPARTMENT OF ENVIRONMENTAL PROTECTION

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF CLEAN WATER

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGES OF STORMWATER ASSOCIATED WITH INDUSTRIAL ACTIVITY ANNUAL REPORT

FOR THE PERIOD JANUARY 1, [FORMTEXT] TO DECEMBER 31, [FORMTEXT]

GENERAL INFORMATION

Permittee Name:	**Marcus Hook Energy LP**	Permit No.:	**PA0244449**
Permittee Address:	**100 Green Street**	Permit Issuance Date:	**[FORMTEXT]**
Permittee City, State, Zip:	**Marcus Hook, PA 19061**	Permittee Phone:	**[FORMTEXT]**

Has the permittee's PPC Plan been reviewed and if necessary updated during the reporting period? [Yes [No
FORMCHECKBOX] FORMCHECKBOX]

Has employee training been provided during the reporting period? [Yes [No Date: **[FORMTEXT]**
FORMCHECKBOX] FORMCHECKBOX]

INSPECTION INFORMATION

1. Document all visual inspections conducted by the permittee during the reporting period below.

Inspection No.	Inspection Date	Inspector Name	Inspector Title	Stormwater Discharge During Inspection?
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2. Check the appropriate boxes to indicate areas, activities and practices evaluated during the inspections:

[FORMCHECKBOX] Areas where industrial materials or activities are exposed to stormwater.

[FORMCHECKBOX] Areas identified in the PPC Plan as potential pollutant sources.

[FORMCHECKBOX] Areas where spills or leaks have occurred in the past three years.

[FORMCHECKBOX] Stormwater outfalls and locations where authorized non-stormwater discharges may commingle.

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[FORMCHECKBOX] Physical BMPs used to comply with this permit.

3. For each inspection, answer the following questions concerning inspection results (check box if answer is "Yes").

Inspection No.	Were raw materials, products or wastes observed that may have or could come into contact with stormwater?	Were leaks or spills from equipment, drums, tanks or other containers observed?	Was off-site tracking of industrial or waste materials or sediment where vehicles enter or exit the site observed?	Was tracking or blowing of raw, final or waste materials from exposed areas to areas of no exposure observed?	Were control measures or BMPs needing replacement, maintenance or repair observed?	Was the presence of authorized non-stormwater discharges not identified in the NOI or unauthorized non-stormwater discharges observed?
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4. For any boxes checked above (i.e., for any "Yes" responses), indicate the corrective measures taken or are planned by the permittee.

[FORMTEXT]

5. Were all BMPs required by Part C and the applicable Appendix implemented by the permittee during the reporting period? [FORMCHECKBOX] Yes [FORMCHECKBOX] No

If No, identify which BMPs were not implemented and efforts being undertaken to begin or resume implementation.

[FORMTEXT]

STORMWATER OUTFALL INFORMATION

1. List all stormwater outfalls at the permitted site and provide the information requested below (see instructions). Use additional pages as necessary.

Outfall No.	No Exp.?	Non-SW?	Sampling?	Rep. Outfall	DA (sf)	% Imp.	Description of Materials/Activities in Drainage Area Exposed to Precipitation	Description of BMPs in Drainage Area to Control Pollutants in Stormwater
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2. Do any of the outfalls identified above discharge to municipal separate storm sewer system (MS4)? [FORMCHECKBOX] Yes [FORMCHECKBOX] No

   Name of MS4 owner/operator: **[FORMTEXT]** Outfalls discharging to MS4: [FORMTEXT]

3. Have any changes occurred during the calendar year reporting period compared to the previous calendar year? [FORMCHECKBOX] Yes [FORMCHECKBOX] No

   If Yes, describe the changes:
   [FORMTEXT]

STORMWATER SAMPLING EVENT INFORMATION

1. For each stormwater sampling event conducted during the reporting period, provide the information in the table below.

Outfall No. Sampled	Sample Date	Duration of Storm Event (hrs)	Sample Collected within First 30 Minutes?	Precipitation Amount (in)	Duration Between Storm Event Sampled and Previous Measurable Storm Event (hrs)	Were Results Reported on DMR?	Were Benchmark Value(s) in Permit Exceeded?	Parameter(s) Exceeding Benchmark Value(s)
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2. Was the need to develop and submit a corrective action plan triggered during the reporting period? [FORMCHECKBOX] Yes [FORMCHECKBOX] No

   If Yes, date of corrective action plan submission: **[FORMTEXT]** Date by which corrective measures will be in place: **[FORMTEXT]**

3. If samples were not collected within the first 30 minutes for any stormwater sampling event, provide an explanation below as to why this could not be done.

   [FORMTEXT]

CERTIFICATION

I certify under penalty of law that this report was prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel 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, 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. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

[FORMTEXT]
Name (type or print legibly)

[FORMTEXT]
Official Title

Signature

[FORMTEXT]
Date Signed

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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGES OF STORMWATER ASSOCIATED WITH INDUSTRIAL ACTIVITY ANNUAL REPORT INSTRUCTIONS

The submission of this Annual Report each year is a requirement under the individual permit for ongoing coverage under the individual permit.

Enter the reporting period (calendar year) at the top of the report (e.g., January 1, 2016 to December 31, 2016).

General Information

Identify the permittee name (as it appears on the first page of the permit issued by DEP), the permittee address and phone number, the permit number, and the permit issuance date (i.e., latest new or reissued approval issued by DEP). Check the appropriate box to indicate whether the permittee's Preparedness, Prevention and Contingency (PPC) Plan has been reviewed and if necessary updated during the calendar year reporting period. Check the appropriate box to indicate whether annual employee training required by the permit has been provided during the reporting period and list the date(s) training occurred.

Inspection Information

1. The permit requires visual inspections at least semiannually (once every calendar semiannual period). A table is provided to summarize all inspections conducted during the calendar year. Assign each inspection event a number, chronologically, and report the number in the table. Report the date of the inspection and the name and title of the inspector. Check the box in the column for "Stormwater Discharge During Inspection?" If a stormwater discharge was occurring during the inspection. The permit requires that at least one semiannual inspection be conducted during conditions where a stormwater discharge is occurring.

2. Check the appropriate boxes to indicate areas, activities and practices evaluated during the inspections. These areas, activities and practices must be inspected during all inspections in accordance with the permit.

3. For each inspection answer each of the questions listed in the column headers. Enter the Inspection No. corresponding to the inspection dates identified in No. 1, and check any box in which the answer to the question is "Yes".

4. Where any answer to No. 3 is "Yes", describe the corrective measures taken or are planned by the permittee.

5. Check the appropriate box to indicate whether all BMPs required by the permit were implemented during the reporting period (Yes or No). If No, identify which BMPs were not implemented and efforts being undertaken to begin or resume implementation of the BMPs.

Stormwater Outfall Information

1. Permittees must complete the stormwater outfall table for each Annual Report. It is possible for conditions to change from year to year; for example, an outfall that is considered "No Exposure" one year is not the next year, and the percentage of impervious surface in an outfall's drainage area may change. The following lists the column headers and an explanation of the information requested:

   - **Outfall No.** – Provide a 3-digit identification number (numeric only) for each outfall (discharge point) discharging stormwater associated with industrial activity from the facility, starting with 001 and continuing with 002, 003, etc. If there are more outfalls than space allows, attach an additional sheet.

   - **No Exp.?** – Check the box if, during the reporting period, the listed outfall discharges stormwater consistent with a "No Exposure" condition.

     No Exposure means that all industrial materials and activities (in the drainage area of the outfall) are protected by a storm resistant shelter to prevent exposure to rain, snow, snowmelt, and/or runoff. Industrial materials or

activities include, but are not limited to, material handling equipment or activities, industrial machinery, raw materials, intermediate products, by-products, final products, or waste products. Material handling activities include the storage, loading and unloading, transportation, or conveyance of any raw material, intermediate product, final product or waste product. (See the instructions to the No Exposure Certification application, 3850-PM-BCW0083e, for additional information).

By checking the box, the applicant is certifying that a No Exposure condition existed within the drainage area for the particular outfall during the reporting period.

- **Non-SW?** – Check the box if the listed outfall received any non-stormwater discharges during the reporting period.

- **Sampling?** – Check the box if the listed outfall has been sampled for analysis of pollutant concentrations, consistent with the permit, during the reporting period.

- **Rep. Outfall** – Identify the representative outfall, if applicable, for each listed outfall during the reporting period.

  Permittees may group outfalls based on industrial activities occurring within the drainage areas of those outfalls and, if it is determined by the permittee that the quality of stormwater discharges are substantially identical, select one outfall to represent others in the group. Enter the representative outfall number, if applicable. For example, if during the reporting period Outfalls 001, 002 and 003 all have drainage areas characterized by unloading of the same raw materials and the applicant has reason to believe that the quality of Outfalls 001, 002 and 003 are substantially identical, the applicant may select Outfall 001 as representative of Outfalls 002 and 003. The permittee would then monitor stormwater discharges for pollutants for Outfall 001 only. In this example, for the Annual Report the "Rep. Outfall" column would remain blank for Outfall 001, and contain "001" for Outfalls 002 and 003 (see below).

Outfall No.	No Exp.?	Non-SW?	Sampling?	Rep. Outfall
001	☐	☐	☒	
002	☐	☐	☒	001
003	☐	☐	☒	001

- **DA (sf)** – Report the drainage area of the outfall in square feet, as of the last day of the reporting period.

- **% Imp.** – Enter the percentage of the outfall's drainage area that is impervious surface, as of the last day of the reporting period.

- **Description of Materials/Activities in Drainage Area Exposed to Precipitation** – Enter a characterization of the drainage area for each outfall during the reporting period, identifying all existing activities including material storage and utilization. Attach additional pages with this information to the Annual Report if necessary.

- **Description of BMPs in Drainage Area to Control Pollutants in Stormwater** – Identify and describe all best management practices (BMPs) that were implemented within the drainage areas of each outfall to control pollutants in stormwater during the reporting period. Attach additional pages with this information to the Annual Report if necessary.

2. Check the appropriate box to indicate whether any of the outfalls identified in Nos. 6 and 7 above discharge to a municipal separate storm sewer system (MS4) (Yes or No). If Yes, identify the name of the MS4 owner/operator and list all outfall numbers that discharge to the MS4.

   NOTE – If the permittee discharges to an MS4, a copy of the Annual Report must be submitted to the operator of the MS4.

3. Indicate whether any changes to outfall information (Nos. 1 and 2 above) have changed during the reporting period as compared to the previous reporting period by checking the appropriate box (Yes or No). If changes have occurred, describe those changes in the space provided or as a separate attachment.

Stormwater Sampling Event Information

1. In the table provided, enter the information requested concerning each storm event in which samples were collected. The following lists the column headers and an explanation of the information requested:

   - **Outfall No. Sampled** – List every outfall number sampled per storm event.

   - **Sample Date** – Identify the date in which samples were collected.

     Example – Three outfalls were sampled twice during the reporting period: one event took place on February 1 and the other event occurred on August 15. The first two columns should be completed as follows:

Outfall No. Sampled	Sample Date
001	2/1/2016
002	2/1/2016
003	2/1/2016
001	8/15/2016
002	8/15/2016
003	8/15/2016

   - **Duration of Storm Event** – Report the duration, in hours, of the storm event in which samples were collected.

   - **Sample Collected within First 30 Minutes?** – Check the box if the sample was collected within the first 30 minutes of the stormwater discharge.

   - **Precipitation Amount** – Report the amount of precipitation, in inches, that fell during the storm event in which samples were collected. Note that the permit requires that samples be collected from storm events producing greater than 0.1 inch of precipitation.

   - **Duration Between Storm Event Sampled and Previous Measurable Storm Event** – Enter the amount of time, in hours, between the storm event sampled and the previous measurable storm event (greater than 0.1 inch of precipitation).

   - **Were Results Reported on DMR?** – Check the box if the analytical results for the sampling event were reported to DEP on a Discharge Monitoring Report (DMR).

   - **Were Benchmark Value(s) in Permit Exceeded?** – Check the box if any benchmark values identified in the permit were exceeded for the outfall and sampling event listed.

   - **Parameter(s) Exceeding Benchmark Value(s)** – If benchmark values were exceeded, report the name(s) of all parameter(s) in which stormwater concentrations exceeded the benchmarks.

2. Indicate whether the need to develop and submit a corrective action plan was triggered during the reporting period by checking the appropriate box (Yes or No). The permit requires submission of a corrective action plan within 90 days following the end of the reporting period that demonstrates two consecutive exceedances of benchmark values. If Yes, list the date the corrective action plan was submitted to DEP, and the date by which corrective measures will be implemented.

3. If samples were not collected within the first 30 minutes for any stormwater sampling event, provide an explanation below as to why this could not be done in the space provided. If not applicable, enter "N/A".

Certification

The permittee must certify that the information contained in the Annual Report is true, accurate and complete.

The Annual Report must be signed as follows:

For individually owned operations - the owner of the facility must sign the Annual Report.

For a Corporation - by a responsible corporate officer. For purposes of this section, a responsible corporate officer means a principal executive officer of at least the level of vice president or an authorized representative, if the representative is responsible for the overall operation of the facility from which the discharge described in the Annual Report originates.

For a Partnership or Sole Proprietorship - by a general partner or the proprietor, respectively.

For a Municipality - state, federal or other public agency - by either a principal executive officer, ranking elected official or other authorized employee. For purposes of the Annual Report, a principal executive officer of a federal agency includes:

1. The chief executive officer of the agency, or

2. A senior executive officer who has responsibility for the overall operations of a principal geographic unit of the agency (e.g., Regional Administrator of EPA).

Submission

One copy of the Annual Report must be submitted to the regional office of DEP that issued the permit, by the deadline established in the permit. For a list of DEP regional office addresses, please visit **[HYPERLINK "http://www.dep.pa.gov"]**, and select "Regional Resources." Where the permittee discharges stormwater to an MS4, one copy of the Annual Report must be submitted to the operator of the MS4.

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