

GENERAL NPDES PERMIT FOR RESIDUAL  
AQUATIC PESTICIDE DISCHARGES FROM  
ALGAE AND AQUATIC WEED CONTROL APPLICATIONS

ORDER NO. 2013-0002-DWQ  
NPDES NO. CAG990005

### Attachment E – Notice of Intent

#### WATER QUALITY ORDER NO. 2013-0002-DWQ GENERAL PERMIT NO. CAG990005

#### STATEWIDE GENERAL NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) PERMIT FOR RESIDUAL AQUATIC PESTICIDE DISCHARGES TO WATERS OF THE UNITED STATES FROM ALGAE AND AQUATIC WEED CONTROL APPLICATIONS

##### I. NOTICE OF INTENT STATUS (see Instructions)

Mark only one item	A. <input type="checkbox"/> New Applicator	<input checked="" type="checkbox"/> B. Change of Information: WDID# <u>5B01AP00001</u>
	C. <input type="checkbox"/> Change of ownership or responsibility: WDID# _____	

##### II. DISCHARGER INFORMATION

A. Name Department of Water Resources			
B. Mailing Address 715 P Street, 5th Floor			
C. City Sacramento	D. County Sacramento	E. State CA	F. Zip 95814
G. Contact Person Tanya Veldhuizen	H. E-mail address Tanya.Veldhuizen@water.ca.gov	I. Title Program Manager, Water Quality and Special Projects Section	J. Phone (916) 657-3609

##### III. BILLING ADDRESS (Enter Information only if different from Section II above)

A. Name			
B. Mailing Address			
C. City	D. County	E. State	F. Zip
G. E-mail address	H. Title	I. Phone	

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#### IV. RECEIVING WATER INFORMATION

A. Algaecide and aquatic herbicides are used to treat (check all that apply):	
1. <input checked="" type="checkbox"/>	Canals, ditches, or other constructed conveyance facilities owned and controlled by Discharger. Name of the conveyance system: <u>State Water Project aqueducts, reservoirs, forebays, and ditches *</u>
2. <input type="checkbox"/>	Canals, ditches, or other constructed conveyance facilities owned and controlled by an entity other than the Discharger. Owner's name: _____ Name of the conveyance system: _____
3.	Directly to river, lake, creek, stream, bay, ocean, etc. Name of water body: _____
B. Regional Water Quality Control Board(s) where treatment areas are located (REGION 1, 2, 3, 4, 5, 6, 7, 8, or 9): Region <u>2, 3, 4, 5, 6, and 8</u> (List all regions where algaecide and aquatic herbicide application is proposed.)	

#### V. ALGAECIDE AND AQUATIC HERBICIDE APPLICATION INFORMATION

A. Target Organisms: _____ Floating, submersed, and emergent aquatic weeds, algae, cyanobacteria, and diatoms	
B. Algaecide and Aquatic Herbicide Used: List Name and Active ingredients <i>(Example products shown in parentheses)</i>	
Copper (Komeen, Nautique, Copper Sulfate Pentahydrate)	Imazamox (Clearcast)
Diquat (Tribune, Reward)	Imazapyr (Habitat, Polaris)
Endothall (Aquathol K, Aquathol Super K Granular)	Penoxsulam (Galleon SC)
Flumioxazin (Clipper SC, SureGuard SC)	Peroxyacetic Acid (GreenClean Liquid 2.0, GreenClean Liquid 5.0)
Fluridone (Sonar)	Sodium Carbonate Pentahydrate (PAK 27)
Glyphosate (Aquaneat, Rodeo)	Triclopyr (Garlon 3A, Renovate 3)
Hydrogen Peroxide (GreenClean Liquid 2.0, GreenClean Liquid 5.0)	
C. Period of Application: Start Date <u>January 1</u> End Date <u>December 31</u>	
D. Types of Adjuvants Used: Adjuvants labeled for aquatic use (e.g., Activator 90, Competitor, Liberate)	

#### VI. AQUATIC PESTICIDE APPLICATION PLAN

Has an Aquatic Pesticide Application Plan been prepared and is the applicator familiar with its contents? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If not, when will it be prepared? _____

#### VII. NOTIFICATION

Have potentially affected public and governmental agencies been notified? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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#### VIII. FEE

Have you included payment of the filing fee (for first-time enrollees only) with this submittal? <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> NA
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\*Examples include: *Aqueducts: South Bay, Coastal Branch, East Branch, California; Reservoirs and Forebays: Patterson Res., Dyer Res., Pyramid Lake, Castaic Lake, Silverwood Lake, Lake Perris, Quail Lake, Clifton Court FB, O'Neill FB, Coastal Branch FBs, Thermalito FB, Los Banos Dam and Res.; Ditches: Thermalito FB and Power Canal.*

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**IX. CERTIFICATION**

"I certify under penalty of law that this document and all attachments were prepared under my direction and supervision in accordance with a system designed to ensure 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 or imprisonment. Additionally, I certify that the provisions of the General Permit, including developing and implementing a monitoring program, will be complied with."

A. Printed Name: Tanya Veldhuizen

B. Signature: Tanya Veldhuizen

Date: 4/5/2023

C. Title: Section Manager, EPM I

**XI. FOR STATE WATER BOARD STAFF USE ONLY**

WDID:	Date NOI Received:	Date NOI Processed:
Case Handler's Initial:	Fee Amount Received: \$	Check #:
<input type="checkbox"/> Lyris List Notification of Posting of APAP	Date _____	Confirmation Sent _____