



Division of Surface Water - Notice of Intent (NOI) For Coverage Under Ohio Environmental Protection Agency General NPDES Permit

(Read accompanying instructions carefully before completing this form.)

Submission of this NOI constitutes notice that the party identified in Section I of this form intends to be authorized to discharge into state surface waters under Ohio EPA's NPDES general permit program. Becoming a permittee obligates a discharger to comply with the terms and conditions of the permit. Complete all required information as indicated by the instructions. Do not use correction fluid on this form. Forms transmitted by fax will not be accepted. A check for the proper amount must accompany this form and be made payable to "Treasurer, State of Ohio." (See the fee table in Attachment C of the NOI instructions for the appropriate processing fee.)

I. Applicant Information/Mailing Address

Company (Applicant) Name: Ohio Department of Transportation, District 4

Mailing (Applicant) Address: 2088 South Arlington Road

City: Akron **State :** OH **Zip Code:** 44306

Country: USA

Contact Person: Michael Simpkins **Phone:** (330) 786-4824 **Fax:**

Contact E-mail Address: michael.simpkins@dot.ohio.gov

II. Facility/Site Location Information

Facility/Site Name: STA-687-02.30 [PID 114831]

Facility Address: SR 687 & Frank Ave NW

City: Jackson Township **State:** OH **Zip Code:** 44718

County: Stark **Township:** Jackson

Facility Contact Person: Michael Simpkins **Phone:** (330) 786-4826 **Fax:**

Facility Contact E-mail Address: michael.simpkins@dot.ohio.gov

Latitude: 40.84990405 **Longitude:** -81.44560736 **Facility/Map Attachment** STA-114831-NOI-MAP.pdf

Receiving Stream or MS4: Sippo Creek, Lake Cable

III. General Permit Information

General Permit Number: OHC000006 **Coverage Type:** New

Type of Activity: Construction Site Stormwater General Permit **SIC Code(s):**

Existing NPDES Facility Permit Number: 3GC15706*AG **ODNR Coal Mining Application Number:**

If Household Sewage Treatment System, is system for: **New Home Construction:** **Replacement of failed existing system:**

Outfall	Design Flow (MGD):	Associated Permit Effluent Table:	Receiving Water :	Latitude	Longitude

Are These Permits Required? **PTI:** NO **Individual 401 Water Quality Certification:** NO

Individual NPDES: NO **Isolated Wetland:** NO **U.S. Army Corp Nationwide Permit:** NO

Proposed Project Start Date(if applicable): July 01, 2025 **Estimated Completion Date(if applicable):** October 31, 2026

Total Land Disturbance (Acres): 4.9000 **MS4 Drainage Area (Sq. Miles):**

SWP3 Attachment(s): <None>

IV. Payment Information

Check #:	For Ohio EPA Use Only	
Check Amount:	Check ID(OFA): _____	ORG #: _____
Date of Check:	Rev ID: _____	DOC #: _____

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.

Applicant Name (printed or typed): **Title:**

Signature: **Date:**

ADDITIONAL INFORMATION

Please add any additional comments or attachments below.

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