Dominion Terminal Associates

P.O. Box 967 A
Newport News, VA 23607
(757) 245-2275

DTA

May 24, 2001

Certified Mail – Return Receipt

Mr. Richard E. Fox, Jr.
Environmental Engineer
Department of Environmental Quality
5636 Southern Boulevard
Virginia Beach, VA 23462

RE: VPDES Permit No. VA0057576
Application for Permit Re-Issuance

Dear Mr. Fox:

We have updated our O&M Manual to include the elimination of the Oil/Water Separator. The unit needed major repairs and we are confident we can handle all oil collection via other means.

Please find enclosed original application forms plus 4 copies pertaining to Dominion Terminal Associates' application for re-issuance of it VPDES Permit. Also enclosed are the DEQ Regional Office Permit Application Fee form (Pink Copy) and a copy of our check No. 063521 for your files.

Completed forms:

- EPA Application Form 1 – General Information.
- EPA Application Form 2-C Application for Permit to Discharge Wastewater, Existing Manufacturing Commercial, Moving and Silvicultural Operation.
- EPA Form 3510 - Form 2F Application for Permit to Discharge Stormwater Discharge Associated with Industrial Activity.

Maps:

- Vicinity map of Dominion Terminal Associates – March 19, 2001, showing relocation of Retention Pond and Discharge No. 1.
- C. K. Tudor Engineer's Site Drainage Drawing 96-011 revised March 18, 1996 - 5 copies.

Exhibits:

- Exhibit "A" – Description of Dominion Terminal Associates Stormwater Collection System dated April 18, 2001.
- Exhibit "B" – Listing of materials stored at Dominion Terminal Associates and the maximum on hand at any one time.
- Exhibit "C" – Updated copy of the O&M Manual for the Retention Pond Discharge System. (1 copy)

Please contact me if any additional information is needed.

Sincerely,

John E. Davis

John E. Davis
General Superintendent

JED/dft

Enclosures

cc: C. E. Brinley w/o enclosures
File P-2-4A

DEPARTMENT OF ENVIRONMENTAL QUALITY
WATER DIVISION
PERMIT APPLICATION FEE

N 16850

INSTRUCTIONS

Applicants for individual Virginia Pollutant Discharge Elimination System (VPDES), Virginia Pollution Abatement (VPA), Virginia Water Protection (VWP), Surface Water Withdrawal (SWW), and Ground Water Withdrawal (GWW) Permits are required to pay permit application fees except farming operations engaged in production for market. Fees are also required for registration for coverage under General Permits except for the general permits for sewage treatment systems with discharges of 1,000 gallons per day (GPD) or less and for Corrective Action Plans for leaking underground storage tanks. Except for VWP permits, fees must be paid when applications for permit issuance, reissuance or modification are submitted. Applicants for VWP permits will be notified by the DEQ of the fee due. Applications will be considered incomplete if the proper fee is not paid and will not be processed until the fee is received.

The permit fee schedule can be found on the back of this form. Fees for permit issuance or reissuance and for permit modification are included. Once you have determined the fee for the type of application you are submitting, complete this form. The white and yellow copies of the form and your check or money order payable to "Commonwealth of Virginia--DEQ" should be mailed to the Department of Environmental Quality, Receipts Control, P.O. Box 10150, Richmond, VA 23240. The pink copy of the form and a copy of your check or money order should accompany the permit application. The gold copy is for your records. Please direct any questions regarding this form or fee payment to the DEQ Office to which you are submitting your application.

APPLICANT NAME: Dominion Terminal Associates SSN/FIN: 54-1212570

ADDRESS: Post Office Box 967-A DAYTIME PHONE: (757) 245-2275
Area Code

Newport News, VA 23607-0967

FACILITY/ACTIVITY NAME: Dominion Terminal Associates

LOCATION: Harbor Road, Pier 11

TYPE OF PERMIT APPLIED FOR
(from Fee Schedule): VPDES Industrial Minor, Standard Limits

TYPE OF ACTION: _____ New Issuance X Reissuance _____ Modification

AMOUNT OF FEE SUBMITTED
(from Fee Schedule): $2200.00

EXISTING PERMIT NUMBER (if applicable): VA0057576

DEQ OFFICE TO WHICH APPLICATION SUBMITTED (check one)

☐ Abingdon/SWRO	☐ Bridgewater/VRO	☐ Kilmarnock/KO	☐ Prince William/NRO
☐ Richmond/PRO	☐ Richmond/Headquarters	☐ Roanoke/WCRO	☒ Virginia Beach/TRO

FOR DEQ USE ONLY

Date: _____

DC #: _____

White and Yellow Copies - DEQ Accounting Office
Pink Copy - DEQ Regional or Permit Program Office
Gold Copy - Applicant

FEE SCHEDULE--APPLICATIONS FOR INDIVIDUAL PERMITS EXCEPT FOR VIRGINIA WATER PROTECTION PERMITS (DUE WITH SUBMISSION OF APPLICATION)

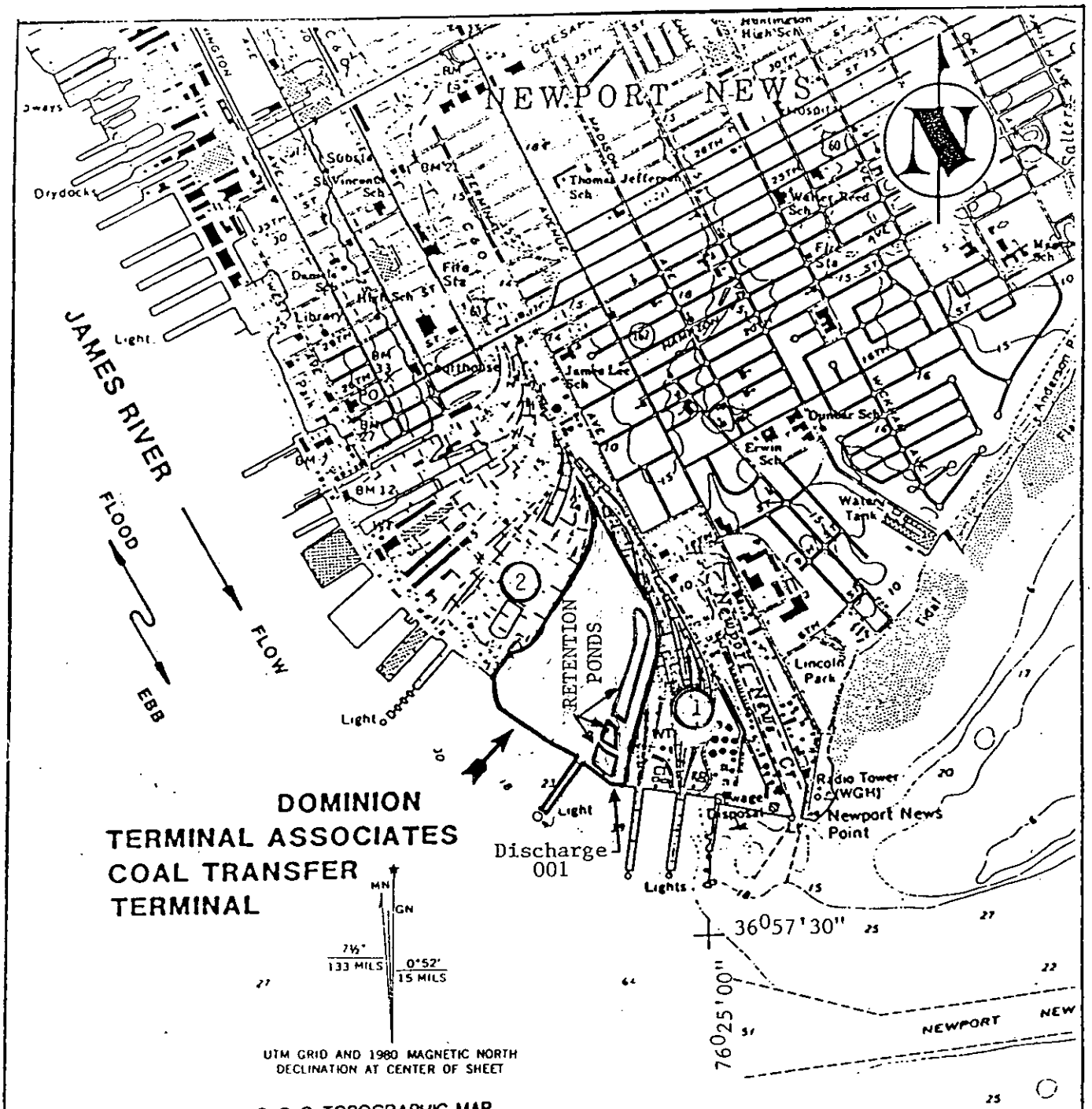
TYPE OF PERMIT	ISSUANCE/ REISSUANCE	MODIFICATION
VPDES Industrial Major	$8,000	$4,000
VPDES Municipal Major	$7,100	$3,550
VPDES Municipal Storm Water	$7,100	$3,550
VPDES Industrial Minor, No Standard Limits	$3,400	$1,700
VPDES Industrial Minor, Standard Limits	$2,200	$1,100
VPDES Industrial Storm Water	$2,400	$1,200
VPDES Municipal Minor, 100,000 GPD or More	$2,500	$1,250
VPDES Municipal Minor, More than 10,000 GPD but Less than 100,000 GPD	$2,000	$1,000
VPDES Municipal Minor, More than 1,000 GPD but 10,000 GPD or Less	$1,800	$ 900
VPDES Municipal Minor, 1,000 GPD or Less	$1,400	$ 700
VPA Industrial Wastewater Operation	$3,500	$1,750
VPA Industrial Sludge Operation	$2,500	$1,250
VPA Municipal Wastewater Operation	$4,500	$2,250
VPA Municipal Sludge Operation	$2,500	$1,250
GWW Initial Permit for an Existing Withdrawal	$ 400	$ 200
GWW Permit for a New or Expanded Withdrawal	$2,000	$1,000
SWW Certificate for an Existing Withdrawal	$2,000	$1,000
SWW Permit for a New or Expanded Withdrawal	$3,000	$1,500

FEE SCHEDULE--APPLICATIONS FOR INDIVIDUAL VIRGINIA WATER PROTECTION PERMITS (APPLICANT WILL BE NOTIFIED OF FEE DUE BY DEQ)

TYPE OF PERMIT	ISSUANCE/ REISSUANCE	MODIFICATION
VWP Category I Project	$3,000	$1,500
VWP Category II Project	$2,100	$1,050
VWP Category III Project	$ 800	$ 400
VWP Waiver	$ 300	$ 150

FEE SCHEDULE--REGISTRATION FOR GENERAL PERMIT COVERAGE

The maximum fee for registration for general permit coverage is $200. The specific amount of the fee depends on the amount of time the general permit will remain in effect. Please contact the DEQ Office to which registration materials are to be submitted for assistance in determining the amount of the fee due.



TAKEN FROM U. S. G. S. TOPOGRAPHIC MAP

NEWPORT NEWS SOUTH QUADRANGLE, VA. (1964)

PHOTO REVISED 1980

PURPOSE: COAL TRANSFER TERMINAL

DATUM: M.L.W.

ADJACENT PROPERTY OWNERS:

(1) CSX TRANSPORTATION

(2) PIER IX TERMINAL CO.

USE: COMMERCIAL

VICINITY MAP

1000 0 1000 2000

SCALE IN FEET

DOMINION TERMINAL ASSOCIATES
HARBOR ROAD, PIER 11
NEWPORT NEWS, VIRGINIA 23607

March 19, 2001

Please print or type in the unshaded areas only
(fill—in areas are spaced for elite type, i.e., 12 characters per inch).

Form Approved. OMB No. 2040-0086. Approval expires 5-31-92.

FORM 1 GENERAL

U.S. ENVIRONMENTAL PROTECTION AGENCY

GENERAL INFORMATION

Consolidated Permits Program

(Read the "General Instructions" before starting.)

I. EPA I.D. NUMBER

F V A 0 0 5 7 5 7 6 — T/A: D

LABEL ITEMS

I. EPA I.D. NUMBER

III. FACILITY NAME

V. FACILITY MAILING ADDRESS

VI. FACILITY LOCATION

PLEASE PLACE LABEL IN THIS SPACE

MAY 2001

GENERAL INSTRUCTIONS

If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill—in area below. Also, if any of the preprinted data is absent *(the area to the left of the label space lists the information that should appear)*, please provide it in the proper fill—in area(s) below. If the label is complete and correct, you need not complete Items I, III, V, and VI *(except VI-B which must be completed regardless)*. Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.

II. POLLUTANT CHARACTERISTICS

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of **bold—faced** terms.

SPECIFIC QUESTIONS	MARK 'X' YES	NO	FORM ATTACHED
A. Is this facility a **publicly owned treatment works** which results in a **discharge** to waters of the U.S.? (FORM 2A)		X	
B. Does or will this facility *(either existing or proposed)* include a **concentrated animal feeding operation** or **aquatic animal production facility** which results in a **discharge** to waters of the U.S.? (FORM 2B)		X	
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)	X		X
D. Is this a proposed facility *(other than those described in A or B above)* which will result in a **discharge** to waters of the U.S.? (FORM 2D)		X	
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)		X	
F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)		X	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X	
H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X	
I. Is this facility a proposed **stationary source** which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	
J. Is this facility a proposed **stationary source** which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an **attainment area**? (FORM 5)		X	

III. NAME OF FACILITY

1 SKIP DOMINION TERMINAL ASSOCIATES

IV. FACILITY CONTACT

A. NAME & TITLE *(last, first, & title)*	B. PHONE *(area code & no.)*
2 DAVIS, JOHN GENERAL SUPERINTEND.	757 245 2275

V. FACILITY MAILING ADDRESS

A. STREET OR P.O. BOX

3 POST OFFICE BOX 967-A

B. CITY OR TOWN	C. STATE	D. ZIP CODE
4 NEWPORT NEWS	VA	23607

VI. FACILITY LOCATION

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER

5 HARBOR ROAD, PIER 11

B. COUNTY NAME

N/A

C. CITY OR TOWN	D. STATE	E. ZIP CODE	F. COUNTY CODE *(if known)*
6 NEWPORT NEWS	VA	23607	N/A

CONTINUE ON REVERSE

CONTINUED FROM THE FRONT

VII. SIC CODES (4-digit, in order of priority)

A. FIRST	B. SECOND
4491 (specify) COAL TRANSHIPPING FACILITY	(specify) N/A
C. THIRD	**D. FOURTH**
(specify) N/A	(specify) N/A

VIII. OPERATOR INFORMATION

A. NAME

DOMINION TERMINAL ASSOCIATES

B. Is the name listed in Item VIII-A also the owner? ☐ YES ☒ NO

C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)

F = FEDERAL; S = STATE; P = PRIVATE; M = PUBLIC (other than federal or state); O = OTHER (specify)

P (specify)

D. PHONE (area code & no.) A 757 245 2275

E. STREET OR P.O. BOX

POST OFFICE BOX 967-A

F. CITY OR TOWN NEWPORT NEWS

G. STATE VA

H. ZIP CODE 23607

IX. INDIAN LAND

Is the facility located on Indian lands? ☐ YES ☒ NO

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water) 9 N VA0057576	**D. PSD** (Air Emissions from Proposed Sources) 9 P N/A
B. UIC (Underground Injection of Fluids) 9 U N/A	**E. OTHER** (specify) 9 60997 (specify) VA DEPT OF ENVIRONMENTAL QUALITY - AIR
C. RCRA (Hazardous Wastes) 9 R N/A	**E. OTHER** (specify) 9 97-0121 (specify) ARMY CORP OF ENGINEERS DREDGING PERMIT

XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property bounderies. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

XII. NATURE OF BUSINESS (provide a brief description)

COAL TRANSHIPPING FACILITY - SHIP COAL FOR DOMESTIC AND EXPORT USE

XIII. CERTIFICATION (see instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME & OFFICIAL TITLE (type or print)	B. SIGNATURE	C. DATE SIGNED
CHARLES E. BRINLEY PRESIDENT & CHIEF OPERATING OFFICER	Charles E Brinley	May 23, 2001

COMMENTS FOR OFFICIAL USE ONLY

C

EPA I.D. NUMBER (copy from Item 1 of Form 1)

CONTINUED FROM PAGE 2

V. INTAKE AND EFFLUENT CHARACTERISTICS

A, B, & C: See instructions before proceeding – Complete one set of tables for each outfall – Annotate the outfall number in the space provided. NOTE: Tables V-A, V-B, and V-C are included on separate sheets numbered V-1 through V-9.

D. Use the space below to list any of the pollutants listed in Table 2c-3 of the instructions, which you know or have reason to believe is discharged or may be discharged from any outfall. For every pollutant you list, briefly describe the reasons you believe it to be present and report any analytical data in your possession.

1. POLLUTANT	2. SOURCE	1. POLLUTANT	2. SOURCE
NONE			

VI. POTENTIAL DISCHARGES NOT COVERED BY ANALYSIS

Is any pollutant listed in Item V-C a substance or a component of a substance which you currently use or manufacture as an intermediate or final product or byproduct?

☐ YES *(list all such pollutants below)* ☒ NO *(go to Item VI-B)*

N/A

CONTINUE ON REVERSE

CONTINUED FROM THE FRONT

VII. BIOLOGICAL TOXICITY TESTING DATA

Do you have any knowledge or reason to believe that any biological test for acute or chronic toxicity has been made on any of your discharges or on a receiving water in relation to your discharge within the last 3 years?

☒ YES *(identify the test(s) and describe their purposes below)* ☐ NO *(go to Section VIII)*

ACUTE EFFLUENT TOXICITY TEST _ MYSIDOPSIS BAHIA

PURPOSE OF TEST WAS TO DETERMINE RETENTION POND TOCIXITY

VIII. CONTRACT ANALYSIS INFORMATION

Were any of the analyses reported in Item V performed by a contract laboratory or consulting firm?

☒ YES *(list the name, address, and telephone number of, and pollutants analyzed by, each such laboratory or firm below)* ☐ NO *(go to Section IX)*

A. NAME	B. ADDRESS	C. TELEPHONE *(area code & no.)*	D. POLLUTANTS ANALYZED *(list)*
UNIVERSAL LABORATORIES	20 RESEARCH DRIVE HAMPTON, VA 23666	757-865-0880	BOD 5 COD FIELD TEMPERATURE AMMONIA (DISTILLED) NITRATE NITRITE OIL & GREASE TKN TOTAL ORGANIC CAREON

IX. CERTIFICATION

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.

A. NAME & OFFICIAL TITLE *(type or print)*	B. PHONE NO. *(area code & no.)*
CHARLES E. BRINLEY, PRESIDENT & CHIEF OPERATING OFFICER	757-245-2275 EXT. 310
C. SIGNATURE Charles E Brinley	**D. DATE SIGNED** May 23, 2001

Please print or type in the unshaded areas only.

EPA I.D. NUMBER (copy from Item 1 of Form 1) VA0057576

Form Approved
OMB No. 2040-0086
Approval expires 5-31-92

FORM 2C NPDES

EPA

U.S. ENVIRONMENTAL PROTECTION AGENCY

APPLICATION FOR PERMIT TO DISCHARGE WASTEWATER
EXISTING MANUFACTURING, COMMERCIAL, MINING AND SILVICULTURAL OPERATIONS

Consolidated Permits Program

I. OUTFALL LOCATION

For each outfall, list the latitude and longitude of its location to the nearest 15 seconds and the name of the receiving water.

A. OUTFALL NUMBER (list)	B. LATITUDE			C. LONGITUDE			D. RECEIVING WATER (name)
	1. DEG.	2. MIN.	3. SEC.	1. DEG.	2. MIN.	3. SEC.	
001	36	57	30	76	25	00	James River

II. FLOWS, SOURCES OF POLLUTION, AND TREATMENT TECHNOLOGIES

A. Attach a line drawing showing the water flow through the facility. Indicate sources of intake water, operations contributing wastewater to the effluent, and treatment units labeled to correspond to the more detailed descriptions in Item B. Construct a water balance on the line drawing by showing average flows between intakes, operations, treatment units, and outfalls. If a water balance cannot be determined *(e.g., for certain mining activities)*, provide a pictorial description of the nature and amount of any sources of water and any collection or treatment measures.

B. For each outfall, provide a description of: (1) All operations contributing wastewater to the effluent, including process wastewater, sanitary wastewater, cooling water, and storm water runoff; (2) The average flow contributed by each operation; and (3) The treatment received by the wastewater. Continue on additional sheets if necessary.

1. OUT-FALL NO (list)	2. OPERATION(S) CONTRIBUTING FLOW		3. TREATMENT		
	a. OPERATION (list)	b. AVERAGE FLOW (include units)	a. DESCRIPTION	b. LIST CODES FROM TABLE 2C-1	
001	Coal Pile Dust Suppression	0.71 MGD	Sedimentation	1	U
	Runoff		Neutralization	2	K

OFFICIAL USE ONLY *(effluent guidelines sub-categories)*

CONTINUED FROM THE FRONT

C. Except for storm runoff, leaks, or spills, are any of the discharges described in Items II-A or B intermittent or seasonal?

☐ YES *(complete the following table)* ☒ NO *(go to Section III)*

1. OUTFALL NUMBER *(list)*	2. OPERATION(s) CONTRIBUTING FLOW *(list)*	3. FREQUENCY		4. FLOW				
		a. DAYS PER WEEK *(specify average)*	b. MONTHS PER YEAR *(specify average)*	a. FLOW RATE *(in mgd)*		b. TOTAL VOLUME *(specify with units)*		c. DURATION *(in days)*
				1. LONG TERM AVERAGE	2. MAXIMUM DAILY	1. LONG TERM AVERAGE	2. MAXIMUM DAILY	
	N/A							

III. PRODUCTION

A. Does an effluent guideline limitation promulgated by EPA under Section 304 of the Clean Water Act apply to your facility?

☐ YES *(complete Item III-B)* ☒ NO *(to to Section IV)*

B. Are the limitations in the applicable effluent guideline expressed in terms of production *(or other measure of operation)*?

☐ YES *(complete Item III-C)* ☒ NO *(go to Section IV)*

C. If you answered "yes" to Item III-B, list the quantity which represents an actual measurement of your level of production, expressed in the terms and units used in the applicable effluent guideline, and indicate the affected outfalls.

1. AVERAGE DAILY PRODUCTION			2. AFFECTED OUTFALLS *(list outfall numbers)*
a. QUANTITY PER DAY	b. UNITS OF MEASURE	c. OPERATION, PRODUCT, MATERIAL, ETC. *(specify)*	
		N/A	

IV. IMPROVEMENTS

A. Are you now required by any Federal, State or local authority to meet any implementation schedule for the construction, upgrading or operation of wastewater treatment equipment or practices or any other environmental programs which may affect the discharges described in this application? This includes, but is not limited to, permit conditions, administrative or enforcement orders, enforcement compliance schedule letters, stipulations, court orders, and grant or loan conditions.

☐ YES *(complete the following table)* ☒ NO *(go to Item IV-B)*

1. IDENTIFICATION OF CONDITION, AGREEMENT, ETC.	2. AFFECTED OUTFALLS		3. BRIEF DESCRIPTION OF PROJECT	4. FINAL COMPLIANCE DATE	
	a. NO.	b. SOURCE OF DISCHARGE		a. REQUIRED	b. PROJECTED
			N/A		

B. OPTIONAL: You may attach additional sheets describing any additional water pollution control programs *(or other environmental projects which may affect your discharges)* you now have underway or which you plan. Indicate whether each program is now underway or planned, and indicate your actual or planned schedules for construction. ☐ MARK "X" IF DESCRIPTION OF ADDITIONAL CONTROL PROGRAMS IS ATTACHED

CONTINUE ON PAGE

EASE PRINT OR TYPE IN THE UNSHADED AREAS ONLY. You may report some or all of
s information on separate sheets *(use the same format)* instead of completing these pages.
E INSTRUCTIONS.

EPA I.D. NUMBER *(copy from Item 1 of Form 1)*: VA0057576

OUTFALL NO

. INTAKE AND EFFLUENT CHARACTERISTICS *(continued from page 3 of Form 2-C)*

PART A - You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.

. POLLUTANT	2. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	a. MAXIMUM DAILY VALUE (2) MASS	b. MAXIMUM 30 DAY VALUE *(if available)* (1) CONCENTRATION	b. MAXIMUM 30 DAY VALUE *(if available)* (2) MASS	c. LONG TERM AVRG. VALUE *(if available)* (1) CONCENTRATION	c. LONG TERM AVRG. VALUE *(if available)* (2) MASS	d. NO. OF ANALYSES	3. UNITS *(specify if blank)* a. CONCENTRATION	3. UNITS b. MASS	4. INTAKE *(optional)* a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	a. LONG TERM AVERAGE VALUE (2) MASS	b. NO. OF ANALYSES
. Biochemical Oxygen Demand (BOD)	< 2.0						1	MG/L	lb/day			
. Chemical Oxygen Demand (COD)	18						1	MG/L	lb/day			
:. Total Organic Carbon (TOC)	5.33						1	MG/L	lb/day			
d. Total Suspended Solids (TSS)	< 1.0				13.5		12	MG/L	lb/day			
. Ammonia (as N)	< 0.1						1	MG/L	lb/day			
f. Flow	VALUE		VALUE		VALUE .500		8	MG/D	lb/day	VALUE		
g. Temperature (winter)	VALUE		VALUE		VALUE			°C		VALUE		
h. Temperature (summer)	VALUE 18.5		VALUE		VALUE			°C		VALUE		
i. pH	MINIMUM 6.3	MAXIMUM 8.8	MINIMUM	MAXIMUM			12	STANDARD UNITS				

PART B - Mark "X" in column 2-a for each pollutant you know or have reason to believe is present. Mark "X" in column 2-b for each pollutant you believe to be absent. If you mark column 2a for any pollutar which is limited either directly, or indirectly but expressly, in an effluent limitations guideline, you must provide the results of at least one analysis for that pollutant. For other pollutants for which you ma column 2a, you must provide quantitative data or an explanation of their presence in your discharge. Complete one table for each outfall. See the instructions for additional details and requirement

1. POLLUTANT AND CAS NO. *(if available)*	2. MARK 'X' a. BELIEVED PRESENT	2. MARK 'X' b. BELIEVED ABSENT	3. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	a. MAXIMUM DAILY VALUE (2) MASS	b. MAXIMUM 30 DAY VALUE *(if available)* (1) CONCENTRATION	b. MAXIMUM 30 DAY VALUE *(if available)* (2) MASS	c. LONG TERM AVRG. VALUE *(if available)* (1) CONCENTRATION	c. LONG TERM AVRG. VALUE *(if available)* (2) MASS	d. NO. OF ANALYSES	4. UNITS a. CONCENTRATION	4. UNITS b. MASS	5. INTAKE *(optio* a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	a. LONG TERM AVERAGE VALUE (2) MASS	b. NO. ANALYSES
a. Bromide (24959-67-9)		X								MG/L	lb/day			
b. Chlorine, Total Residual		X												
c. Color		X												
d. Fecal Coliform		X	< 1.0							cfu/100				
e. Fluoride (16984-48-8)		X	1.80											
f. Nitrate-Nitrite (as N)		X												

CONTINUE ON REVERSE

ITEM V-B CONTINUED FROM FRONT

1. POLLUTANT AND CAS NO. (if available)	2. MARK 'X' a. BELIEVED PRESENT	2. MARK 'X' b. BELIEVED ABSENT	3. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	3. EFFLUENT a. MAXIMUM DAILY VALUE (2) MASS	3. EFFLUENT b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	3. EFFLUENT b. MAXIMUM 30 DAY VALUE (if available) (2) MASS	3. EFFLUENT c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	3. EFFLUENT c. LONG TERM AVRG. VALUE (if available) (2) MASS	3. EFFLUENT d. NO. OF ANALYSES	4. UNITS a. CONCENTRATION	4. UNITS b. MASS	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (2) MASS
g. Nitrogen, Total Organic (as N)		X	.74							MG/L	lb/day		
h. Oil and Grease		X	<5							MG/L	lb/day		
i. Phosphorus (as P), Total (7723-14-0)		X	.14							MG/L	lb/day		
j. Radioactivity													
(1) Alpha, Total	X									MG/L			
(2) Beta, Total	X									MG/L			
(3) Radium, Total	X									MG/L			
(4) Radium 226, Total	X									MG/L			
k. Sulfate (as SO_4) (14808-79-8)	X									MG/L			
l. Sulfide (as S)	X									MG/L			
m. Sulfite (as SO_3) (14265-45-3)	X									MG/L			
n. Surfactants	X									MG/L			
o. Aluminum, Total (7429-90-5)	X									MG/L			
p. Barium, Total (7440-39-3)	X									MG/L			
q. Boron, Total (7440-42-8)	X									MG/L			
r. Cobalt, Total (7440-48-4)	X									MG/L			
s. Iron, Total (7439-89-6)	X									MG/L			
t. Magnesium, Total (7439-95-4)	X									MG/L			
u. Molybdenum, Total (7439-98-7)	X									MG/L			
v. Manganese, Total (7439-96-5)	X									MG/L			
w. Tin, Total (7440-31-5)	X									MG/L			
x. Titanium, Total (7440-32-6)	X									MG/L			

PART C - If you are a primary industry and this outfall contains process wastewater, refer to Table 2c-2 in the instructions to determine which of the GC/MS fractions you must test for. Mark "X" in column 2-a for all such GC/MS fractions that apply to your industry and for ALL toxic metals, cyanides, and total phenols. If you are not required to mark column 2-a *(secondary industries, nonprocess wastewater outfalls, and nonrequired GC/MS fractions)*, mark "X" in column 2-b for each pollutant you know or have reason to believe is present. Mark "X" in column 2-c for each pollutant you believe is absent. If you mark column 2a for any pollutant, you must provide the results of at least one analysis for that pollutant. If you mark column 2b for any pollutant, you must provide the results of at least one analysis for that pollutant if you know or have reason to believe it will be discharged in concentrations of 10 ppb or greater. If you mark column 2b for acrolein, acrylonitrile, 2,4 dinitrophenol, or 2-methyl-4, 6 dinitrophenol, you must provide the results of at least one analysis for each of these pollutants which you know or have reason to believe that you discharge in concentrations of 100 ppb or greater. Otherwise, for pollutants for which you mark column 2b, you must either submit at least one analysis or briefly describe the reasons the pollutant is expected to be discharged. Note that there are 7 pages to this part; please review each carefully. Complete one table *(all 7 pages)* for each outfall. See instructions for additional details and requirements.

1. POLLUTANT AND CAS NUMBER *(if available)*	2. MARK 'X' a. TESTING REQUIRED	2. MARK 'X' b. BELIEVED PRESENT	2. MARK 'X' c. BELIEVED ABSENT	3. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	3. EFFLUENT a. MAXIMUM DAILY VALUE (2) MASS	3. EFFLUENT b. MAXIMUM 30 DAY VALUE *(if available)* (1) CONCENTRATION	3. EFFLUENT b. MAXIMUM 30 DAY VALUE *(if available)* (2) MASS	3. EFFLUENT c. LONG TERM AVRG. VALUE *(if available)* (1) CONCENTRATION	3. EFFLUENT c. LONG TERM AVRG. VALUE *(if available)* (2) MASS	3. EFFLUENT d. NO. OF ANALYSES	4. UNITS a. CONCENTRATION	4. UNITS b. MASS	5. INTAKE *(optional)* a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	5. INTAKE *(optional)* a. LONG TERM AVERAGE VALUE (2) MASS	5. INTAKE *(optional)* b. NO. OF ANALYSES
METALS, CYANIDE, AND TOTAL PHENOLS															
1M. Antimony, Total (7440-36-0)			X								MG/L				
2M. Arsenic, Total (7440-38-2)			X	< .02							MG/L				
3M. Beryllium, Total, 7440-41-7)			X								MG/L				
4M. Cadmium, Total (7440-43-9)		X	X	.0003							MG/L				
5M. Chromium, Total (7440-47-3)			X	< .001							MG/L				
6M. Copper, Total (7440-50-8)				.005							MG/L				
7M. Lead, Total (7439-92-1)				.001							MG/L				
8M. Mercury, Total (7439-97-6)			X	< .0002							MG/L				
9M. Nickel, Total (7440-02-0)		X		.037							MG/L				
10M. Selenium, Total (7782-49-2)		X		.013							MG/L				
11M. Silver, Total (7440-22-4)			X	< .0002							MG/L				
12M. Thallium, Total (7440-28-0)			X								MG/L				
13M. Zinc, Total (7440-66-6)		X		.063							MG/L				
14M. Cyanide, Total (57-12-5)			X								MG/L				
15M. Phenols, Total			X								MG/L				
DIOXIN															
1,3,7,8-Tetrachlorodibenzo-P-Dioxin (1764-01-6)			X	DESCRIBE RESULTS											

CONTINUED FROM THE FRONT

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X' a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	3. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	(2) MASS	b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	(2) MASS	c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	(2) MASS	d. NO. OF ANALYSES	4. UNITS a. CONCENTRATION	b. MASS	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	(2) MASS	b.
GC/MS FRACTION – VOLATILE COMPOUNDS															
1V. Acrolein (107-02-8)			X								UG/L				
2V. Acrylonitrile (107-13-1)			X								UG/L				
3V. Benzene (71-43-2)			X								UG/L				
4V. Bis (Chloromethyl) Ether (542-88-1)			X								UG/L				
6V. Bromoform (75-25-2)			X								UG/L				
6V. Carbon Tetrachloride (56-23-5)			X								UG/L				
7V. Chlorobenzene (108-90-7)			X								UG/L				
8V. Chlorodibromomethane (124-48-1)			X								UG/L				
9V. Chloroethane (75-00-3)			X								UG/L				
10V. 2-Chloroethylvinyl Ether (110-75-8)			X								UG/L				
11V. Chloroform (67-66-3)			X								UG/L				
12V. Dichlorobromomethane (75-27-4)			X								UG/L				
13V. Dichlorodifluoromethane (75-71-8)			X								UG/L				
14V. 1,1-Dichloroethane (75-34-3)			X								UG/L				
15V. 1,2-Dichloroethane (107-06-2)			X								UG/L				
16V. 1,1-Dichloroethylene (75-35-4)			X								UG/L				
17V. 1,2-Dichloropropane (78-87-5)			X								UG/L				
18V. 1,3-Dichloropropylene (542-75-6)			X								UG/L				
19V. Ethylbenzene (100-41-4)			X								UG/L				
20V. Methyl Bromide (74-83-9)			X								UG/L				
21V. Methyl Chloride (74-87-3)			X								UG/L				

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X' a. TEST INCLUDED	2. MARK 'X' b. BELIEVED PRESENT	2. MARK 'X' c. BELIEVED ABSENT	3. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	3. EFFLUENT a. MAXIMUM DAILY VALUE (2) MASS	3. EFFLUENT b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	3. EFFLUENT b. MAXIMUM 30 DAY VALUE (if available) (2) MASS	3. EFFLUENT c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	3. EFFLUENT c. LONG TERM AVRG. VALUE (if available) (2) MASS	3. EFFLUENT d. NO. OF ANALYSES	4. UNITS a. CONCENTRATION	4. UNITS b. MASS	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (2) MASS	5. INTAKE (optional) b. NO. OF ANALYSES
GC/MS FRACTION – VOLATILE COMPOUNDS (continued)															
12V. Methylene Chloride (75-09-2)			X								UG/L				
13V. 1,1,2,2-Tetrachloroethane (79-34-5)			X								UG/L				
14V. Tetrachloroethylene (127-18-4)			X								UG/L				
25V. Toluene (108-88-3)			X								UG/L				
26V. 1,2-Trans-Dichloroethylene (156-60-5)			X								UG/L				
27V. 1,1,1-Trichloroethane (71-55-6)			X								UG/L				
28V. 1,1,2-Trichloroethane (79-00-5)			X								UG/L				
29V. Trichloroethylene (79-01-6)			X								UG/L				
30V. Trichlorofluoromethane (75-69-4)			X								UG/L				
31V. Vinyl Chloride (75-01-4)			X								UG/L				
GC/MS FRACTION – ACID COMPOUNDS															
1A. 2-Chlorophenol (95-57-8)			X								UG/L				
2A. 2,4-Dichlorophenol (120-83-2)			X								UG/L				
3A. 2,4-Dimethylphenol (105-67-9)			X								UG/L				
4A. 4,6-Dinitro-O-Cresol (534-52-1)			X								UG/L				
5A. 2,4-Dinitrophenol (51-28-5)			X								UG/L				
6A. 2-Nitrophenol (88-75-5)			X								UG/L				
7A. 4-Nitrophenol (100-02-7)			X								UG/L				
8A. P-Chloro-M-Cresol (59-50-7)			X								UG/L				
9A. Pentachlorophenol (87-86-5)			X								UG/L				
10A. Phenol (108-95-2)			X								UG/L				
11A. 2,4,6-Trichlorophenol (88-06-2)			X								UG/L				

CONTINUE ON REVERSE

CONTINUED FROM THE FRONT

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X' a. TESTING REQUIRED	2. MARK 'X' b. BELIEVED PRESENT	2. MARK 'X' c. BELIEVED ABSENT	3. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	3. EFFLUENT a. MAXIMUM DAILY VALUE (2) MASS	3. EFFLUENT b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	3. EFFLUENT b. MAXIMUM 30 DAY VALUE (if available) (2) MASS	3. EFFLUENT c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	3. EFFLUENT c. LONG TERM AVRG. VALUE (if available) (2) MASS	3. EFFLUENT d. NO. OF ANALYSES	4. UNITS a. CONCENTRATION	4. UNITS b. MASS	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (2) MASS	5. INTAKE (optional) b. NO. OF ANALYSES
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS															
1B. Acenaphthene (83-32-9)			X								UG/L				
2B. Acenaphtylene (208-96-8)			X								UG/L				
3B. Anthracene (120-12-7)			X								UG/L				
4B. Benzidine (92-87-5)			X								UG/L				
5B. Benzo *(a)* Anthracene (56-55-3)			X								UG/L				
6B. Benzo *(a)* Pyrene (50-32-8)			X								UG/L				
7B. 3,4-Benzo-fluoranthene (205-99-2)			X								UG/L				
8B. Benzo *(ghi)* Perylene (191-24-2)			X								UG/L				
9B. Benzo *(k)* Fluoranthene (207-08-9)			X								UG/L				
10B. Bis *(2-Chloro-ethoxy)* Methane (111-91-1)			X								UG/L				
11B. Bis *(2-Chloro-ethyl)* Ether (111-44-4)			X								UG/L				
12B. Bis *(2-Chloroiso-propyl)* Ether (102-60-1)			X								UG/L				
13B. Bis *(2-Ethyl-hexyl)* Phthalate (117-81-7)			X								UG/L				
14B. 4-Bromo-phenyl Phenyl Ether (101-55-3)			X								UG/L				
15B. Butyl Benzyl Phthalate (85-68-7)			X								UG/L				
16B. 2-Chloro-naphthalene (91-58-7)			X								UG/L				
17B. 4-Chloro-phenyl Phenyl Ether (7005-72-3)			X								UG/L				
18B. Chrysene (218-01-9)			X								UG/L				
19B. Dibenzo *(a,h)* Anthracene (53-70-3)			X								UG/L				
20B. 1,2-Dichloro-benzene (95-50-1)			X								UG/L				
21B. 1,3-Dichloro-benzene (541-73-1)			X								UG/L				

CONTINUE ON PAGE V-

EPA I.D. NUMBER (copy from Item 1 of Form 1): VA0057576 | OUTFALL NUMBER: 001

CONTINUED FROM PAGE V-6

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X' a. TEST INCLUDED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	3. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	(2) MASS	b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	(2) MASS	c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	(2) MASS	d. NO. OF ANALYSES	4. UNITS a. CONCENTRATION	b. MASS	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	(2) MASS	b. NO. OF ANALYSES
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS (continued)															
22B. 1,4-Dichlorobenzene (106-46-7)			X								UG/L				
23B. 3,3'-Dichlorobenzidine (91-94-1)			X								UG/L				
24B. Diethyl Phthalate (84-66-2)			X								UG/L				
25B. Dimethyl Phthalate (131-11-3)			X								UG/L				
26B. Di-N-Butyl Phthalate (84-74-2)			X								UG/L				
27B. 2,4-Dinitrotoluene (121-14-2)			X								UG/L				
28B. 2,6-Dinitrotoluene (606-20-2)			X								UG/L				
29B. Di-N-Octyl Phthalate (117-84-0)			X								UG/L				
30B. 1,2-Diphenylhydrazine (as *Azobenzene*) (122-66-7)			X								UG/L				
31B. Fluoranthene (206-44-0)			X								UG/L				
32B. Fluorene (86-73-7)			X								UG/L				
33B. Hexachlorobenzene (118-74-1)			X								UG/L				
34B. Hexachlorobutadiene (87-68-3)			X								UG/L				
35B. Hexachlorocyclopentadiene (77-47-4)			X								UG/L				
36B. Hexachloroethane (67-72-1)			X								UG/L				
37B. Indeno (*1,2,3-cd*) Pyrene (193-39-5)			X								UG/L				
38B. Isophorone (78-59-1)			X								UG/L				
39B. Naphthalene (91-20-3)			X								UG/L				
40B. Nitrobenzene (98-95-3)			X								UG/L				
41B. N-Nitrosodimethylamine (62-75-9)			X								UG/L				
42B. N-Nitrosodi-N-Propylamine (621-64-7)			X								UG/L				

CONTINUE ON REVERSE

NTINUED FROM THE FRONT

POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X' a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	3. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	(2) MASS	b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	(2) MASS	c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	(2) MASS	d. NO. OF ANALYSES	4. UNITS a. CONCENTRATION	b. MASS	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	(2) MASS	b. NO. OF ANALYSES
/MS FRACTION – BASE/NEUTRAL COMPOUNDS *(continued)*															
3. N-Nitro-iphenylamine -30-6)			X								UG/L				
3. Phenanthrene -01-8)			X								UG/L				
3. Pyrene 9-00-0)			X								UG/L				
B. 1,2,4 - Tri-lorobenzene 20-82-1)			X								UG/L				
:/MS FRACTION – PESTICIDES															
. Aldrin 09-00-2)			X								UG/L				
. α-BHC 9-84-6)			X								UG/L				
. β-BHC 9-85-7)			X								UG/L				
. γ-BHC 3-89-9)			X								UG/L				
. δ-BHC 9-86-8)			X								UG/L				
. Chlordane -74-9)			X								UG/L				
. 4,4'-DDT -29-3)			X								UG/L				
. 4,4'-DDE -55-9)			X								UG/L				
4,4'-DDD -64-8)			X								UG/L				
. Dieldrin -57-1)			X								UG/L				
. α-Endosulfan 5-29-7)			X								UG/L				
. β-Endosulfan 5-29-7)			X								UG/L				
. Endosulfan fate 31-07-8)			X								UG/L				
. Endrin -20-8)			X								UG/L				
. Endrin dehyde 21-93-4)			X								UG/L				
. Heptachlor 5-44-8)			X								UG/L				

CONTINUE ON PAGE V-9

POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X' a. TEST INCLUDED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	3. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	(2) MASS	b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	(2) MASS	c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	(2) MASS	d. NO. OF ANALYSES	4. UNITS a. CONCENTRATION	b. MASS	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	(2) MASS	b. NO. OF ANALYSES
MS FRACTION -- PESTICIDES *(continued)*															
. Heptachlor oxide 24-67-3)			X								UG/L				
. PCB-1242 469-21-9)			X								UG/L				
. PCB-1254 097-69-1)			X								UG/L				
. PCB-1221 104-28-2)			X								UG/L				
. PCB-1232 141-16-5)			X								UG/L				
. PCB-1248 672-29-6)			X								UG/L				
. PCB-1260 098-82-5)			X								UG/L				
. PCB-1016 674-11-2)			X								UG/L				
. Toxaphene 01-35-2)			X								UG/L				

U.S. G.P.O.:1992-312-020:63176

UNIVERSAL LABORATORIES

20 Research Drive Hampton, Va 23666

TELEPHONE: (757) 865-0880
TOLL-FREE: (800) 695-2162
FAX: (757) 865-8014

Order ID: 0104117

REPORT OF ANALYSIS

(REPORT DATE)
20-Apr-01

TO: Dominion Terminal Associates
PO Box 967-A
Newport News Va. 23607
ATTN: Rick Rogers x332

Project ID: VPDES Permit Application
Site: OF-001 Annual
Matrix: Wastewater

UL Sample Number: 0104117-001
Sample ID: OF-001 Annual
Grab Date/Time: 4/9/01 8:30:00 AM
Composite Start: N/A
Composite Stop: N/A
Received Date: 09-Apr-01
Collected By: DT

Parameter	Method	Test Result	Units	UL Report Limit	Analysis Date/Time	Analyst
OIL and Grease (HEM)	EPA 1664	<	mg/L	5	4/12/01 4:05:00 PM	JDA
Flouride	SM-4500 F/C	1.80	mg/L	0.1	4/17/01 6:30:00 PM	WK
Ammonia	SM-4500 NH3/B	<	mg/L	0.1	4/10/01 4:27:00 PM	WK
BOD5	SM-5210	<	mg/L	2	4/9/01 2:30:00 PM	GT
Chemical Oxygen Demand	SM-5220 D	18	mg/L	10	4/10/01 9:30:00 AM	MK
Total Organic Carbon	SM-5310 C	5.33	mg/L	0.5	4/10/01 3:00:00 PM	MK
Fecal Coliform	SM-9222 D	<	CFU/100mL	1	4/9/01 1:30:00 PM	DD

Respectfully Submitted,

7572479729

Please print or type in the unshaded areas only

EPA ID Number *(copy from item I of Form 1)*
VA0057576

Form Approved. OMB No. 2040-0086
Approval expires 5-31-92

Parts I-VI only + Sign Pg. 1 X

Form 2F NPDES

United States Environmental Protection Agency
Washington, DC 20460

Application for Permit To Discharge Stormwater Discharges Associated with Industrial Activity

Paperwork Reduction Act Notice

Public reporting burden for this application is estimated to average 23.6 hours per application, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate, any other aspect of this collection of information, or suggestions for improving this form, including suggestions which may increase or reduce this burden to: Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., SW, Washington, DC 20460, or Director, Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.

I. Outfall Location

For each outfall, list the latitude and longitude of its location to the nearest 15 seconds and the name of the receiving water.

A. Outfall Number *(list)*	B. Latitude			C. Longitude			D. Receiving Water *(name)*
001	36	57	30	76	25	00	James River

II. Improvements

A. Are you now required by any Federal, State, or local authority to meet any implementation schedule for the construction, upgrading or operation of wastewater treatment equipment or practices or any other environmental programs which may affect the discharges described in this application? This includes, but is not limited to, permit conditions, administrative or enforcement orders, enforcement compliance schedule letters, stipulations, court orders, and grant or loan conditions. No

1. Identification of Conditions, Agreements, Etc.	2. Affected Outfalls		3. Brief Description of Project	4. Final Compliance Date	
	number	source of discharge		a. req.	b. proj.
N/A					

B. You may attach additional sheets describing any additional water pollution (or other environmental projects which may affect your discharges) you now have under way or which you plan. Indicate whether each program is now under way or planned, and indicate your actual or planned schedules for construction.

III. Site Drainage Map

Attach a site map showing topography (or indicating the outline of drainage areas served by the outfall(s) covered in the application if a topographic map is unavailable) depicting the facility including: each of its intake and discharge structures; the drainage area of each storm water outfall; paved areas and buildings within the drainage area of each storm water outfall, each known past or present areas used for outdoor storage or disposal of significant materials, each existing structural control measure to reduce pollutants in storm water runoff, materials loading and access areas, areas where pesticides, herbicides, soil conditioners and fertilizers are applied; each of its hazardous waste treatment, storage or disposal units (including each area not required to have a RCRA permit which is used for accumulating hazardous waste under 40 CFR 262.34); each well where fluids from the facility are injected underground; springs, and other surface water bodies which receive storm water discharges from the facility.

Continue on Page 2

IV. Narrative Description of Pollutant Sources

A. For each outfall, provide an estimate of the area (include units) of impervious surfaces (including paved areas and building roofs) drained to the outfall, and an estimate of the total surface area drained by the outfall.

Outfall Number	Area of Impervious Surface (provide units)	Total Area Drained (provide units)	Outfall Number	Area of Impervious Surface (provide units)	Total Area Drained (provide units)
001	72.3± Acres	95.4± Acres			

B. Provide a narrative description of significant materials that are currently or in the past three years have been treated, stored or disposed in a manner to allow exposure to storm water; method of treatment, storage, or disposal; past and present materials management practices employed, in the last three years, to minimize contact by these materials with storm water runoff; materials loading and access areas; and the location, manner, and frequency in which pesticides, herbicides, soil conditioners, and fertilizers are applied.

DTA has a total of 72.3 acres including 1000' of shoreline that has 20,000 ft. of concrete ditches, culverts, gutters and curbs that controls all stormwater and directs it to one of two settling ponds. Another pond is used as treatment pond and is our source of recirculated water for the rainbird dust control system for the coal piles. This is also the pond where, if necessary, we can discharge into the James River. We have a detailed procedure of the requirements and treatment that must be met prior to discharge into the river. We also have restrictions on the gallons that can be discharged.

Our collection system is designed for the 10 year, 24 hour storm and has a capacity of 10.6 million gallons in the 3 ponds. (See Exhibit A)

Our weed control is being done this year for the first time in 3 years. We contracted * with Aquatic Ecosystem Management of Boydton, VA (804-689-933 for 2 applications per year. No other agents are used. SEE ATTACHED LIST

C. For each outfall, provide the location and a description of existing structural and nonstructural control measures to reduce pollutants in storm water runoff; and a description of the treatment the storm water receives, including the schedule and type of maintenance for control and treatment measures and the ultimate disposal of any solid or fluid wastes other than by discharge.

Outfall Number	Treatment	List Codes from Table 2F-1
001	We have 3 ponds, 2 of which can be considered settling ponds. The other pond is an active rainbird pond but prior to any discharge the TSP & pH is checked. Our feed system can use caustic or we use liquid polymer to accelerate * reduction of suspended solids. See updated O&M Manual for "Retention Pond Discharge System".	1-G 1-U 2-K 4-A 4-C 5-H

V. Nonstormwater Discharges

A. I certify under penalty of law that the outfall(s) covered by this application have been tested or evaluated for the presence of nonstormwater discharges, and that all nonstormwater discharges from these outfall(s) are identified in either an accompanying Form 2C or Form 2E application for the outfall.

Name and Official Title (type or print)	Signature	Date Signed
CHARLES E. BRINLEY PRESIDENT & CHIEF OPERATING OFFICER	Charles E Brinley	May 23, 2001

B. Provide a description of the method used, the date of any testing, and the onsite drainage points that were directly observed during a test.

N/A

VI. Significant Leaks or Spills

Provide existing information regarding the history of significant leaks or spills of toxic or hazardous pollutants at the facility in the last three years, including the approximate date and location of the spill or leak, and the type and amount of material released.

N/A

* with Aquatic Ecosystem Management of Boydton, VA (804-689-9333) for 2 applications per year. No other agents are used. SEE ATTACHED LIST.

EPA ID Number *(copy from Item I of Form 1)*

Continued from Page 2

VII. Discharge Information

A,B,C, & D: See instructions before proceeding. Complete one set of tables for each outfall. Annotate the outfall number in the space provided. Tables VII-A, VII-B, and VII-C are included on separate sheets numbered VII-1 and VII-2.

E: Potential discharges not covered by analysis - Is any pollutant listed in Table 2F-2 a substance or a component of a substance which you currently use or manufacture as an intermediate or final product or byproduct?

☐ Yes *(list all such pollutants below)* ☐ No *(go to Section IX)*

VIII. Biological Toxicity Testing Data

Do you have any knowledge or reason to believe that any biological test for acute or chronic toxicity has been made on any of your discharges or on a receiving water in relation to your discharge within the last 3 years?

☐ Yes *(list all such pollutants below)* ☐ No *(go to Section IX)*

IX. Contract Analysis Information

Were any of the analyses reported in Item V performed by a contract laboratory or consulting firm?

☐ Yes *(list the name, address, and telephone number of, and pollutants analyzed by, each such laboratory or firm below)* ☐ No *(go to Section X)*

A. Name	B. Address	C. Area Code & Phone No.	D. Pollutants Analyzed

X. Certification

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.

A. Name & Official Title *(type or print)*	B. Area Code and Phone No.
CHARLES E. BRINLEY PRESIDENT & CHIEF OPERATING OFFICER	757-245-2275
C. Signature Charles E Brinley	**D. Date Signed** May 23, 2001

Continued from the Front

Part C - List each pollutant shown in Tables 2F-2, 2F-3, and 2F-4 that you know or have reason to believe is present. See the instructions for additional details and requirements. Complete one table for each outfall.

Pollutant and CAS Number (*if available*)	Maximum Values (*include units*)		Average Values (*include units*)		Number of Storm Events Sampled	Sources of Pollutants
	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite		

Part D - Provide data for the storm event(s) which resulted in the maximum values for the flow weighted composite sample.

1. Date of Storm Event	2. Duration of Storm (*in minutes*)	3. Total rainfall during storm event (*in inches*)	4. Number of hours between beginning of storm measured and end of previous measurable rain event	5. Maximum floe rate during rain event (*gallons/minute or specify units*)	6. Total flow from rain event (*gallons or specify units*)	7. Season sample was taken	8. Form of Precipitation (*rainfall, snowmelt*)

9. Provide a description of the method of flow measurement or estimate.

VII. Discharge Information *(Continued from page 3 of Form 2F)*

Part A - You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	Sources of Pollutants
	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite		
Oil and Grease						
Biological Oxygen Demand (BOD5)						
Chemical Oxygen Demand (COD)						
Total Suspended Solids (TSS)						
Total Kjeldahl Nitrogen						
Nitrate plus Nitrite Nitrogen						
Total Phosphorus						
pH	Minimum	Maximum	Minimum	Maximum		

Part B - List each pollutant that is limited in an effluent guideline which the facility is subject to or any pollutant listed in the facility's NPDES permit for its process wastewater (if the facility is operating under an existing NPDES permit). Complete one table for each outfall. See the instructions for additional details and requirements.

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	Sources of Pollutants
	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite		

Continue on Reverse

Exhibit A

DESCRIPTION OF DOMINION TERMINAL ASSOCIATES STORMWATER COLLECTION SYSTEM

(See Tudor Engineering Site Drainage Drawing 96-011)

Dominion Terminal Associates' (DTA) Stormwater Collection System is designed for a 10 year, 24-hour rainfall event. 99.2% (94.61 acre) of all stormwater that falls on DTA's facility is collected and drained to three stormwater retention ponds. The remaining 0.8% (0.79 acres) drains to two yard drains located in the railroad yard. The two yard drains flow to a Newport News city storm sewer located on Terminal Avenue.

The total area of the site is 95.4 acres. Of the total, 72.3 acres are impervious which includes: paved coal storage areas, roads, ditches, curbs and gutters, building and structure roofs, ponds and miscellaneous paved areas. The remaining area of 23.1 acres is pervious and includes the railroad yard and miscellaneous unpaved areas.

The following is a description of the components that make up the storm water collection system:

- Storm water is collected by approximately 20,000 feet of concrete lined ditches and culverts; and transported by gravity to storm water retention ponds (Ponds No. 1 and No. 3) for the initial retention time to settle out solids. Weirs have been constructed in the ditch system to improve the sedimentation rate and keep as many coal fines out of the ponds as possible.

- Storm water run off from roads, building and structure roofs and other paved areas is collected by a system of curbs and gutters and is directed to storm water pump stations (No. 1, 2, 3 and 4) located at various points along Harbor Road and the waterfront. Storm water is pumped from these stations to the lined ditch system and ponds.

- There are three lined storm water retention ponds. Ponds No. 1 and No. 3 collect and initially retain all of the storm water that falls on the site. Water is then pumped from these two ponds to Pond No. 2 closest to the James River. Pond No. 2 is used for the following:

    1) Final retention time for solids sedimentation
    2) Treatment for correction of pH and solids as required
    3) Storage of water for use in the various dust suppression systems

When Pond No. 2 is full it must be discharged into the James River. A grab sample is taken and tested by a private testing laboratory before discharge is initiated. When the water quality test results meet the requirements of our VPDES permit, the water is discharged by gravity flow or pumping into the river through Out Fall No. 001. The discharge volume is measured and recorded by a Marsh-McBirne 253-03 flow recorder.

Total storage capacity of the three ponds is 10.6 million gallons, plus a volume allowance for accumulation of sediment. Each pond is equipped with a pump that can transfer water to the other two ponds.

- Each of the three ponds out fall structure is protected by a floating oil boom.

T. N. Houck 3/15/96
Revised 4/18/01

Exhibit "B"

Item IV-B

The following products are in 55 gallon drums and **are** contained within a dike system:

Automatic Transmission Fluid	1 – 55 gal Drum
TR – 1000 Gear Oil	1 - " " "
Spin 10 lite Gear Oil	2 - " " "
Conveyor Antifreeze – Be Free	3 - " " "
Diethylene Glycol Antifreeze	1 - " " "
Zinc Free Loco engine Oil 20W-40	3 - " " "
Rando 68 HD Hydraulic Oil	1 - " " "
Motor Oil 10W	1 - " " "
Spray 9 Cleaner	3 - " " "

The following products are in drums, kegs or pails and are in the warehouse area:

Grease EP-2	6 – 35# Pails
Grease EP-2	4 – 120# Kegs
Grease EP-2	2 – 400#Drums

All the products above are kept in a fenced area and under the warehouse control.

Exhibit "B"

Item IV-B

TABLE 5-1
STORAGE TANK SCHEDULE

TANK NO.	MATERIAL STORED	CAPACITY GAL.	TANK DIA x LENGTH	IN CONTAINMENT DIKE NO.	TANK CONSTRUCTION	COMMENTS
ST-1	85-140 Lube oil	550	4' x 5'-5	CD-1	STL	Maint. bldg
ST-2	15W40 Lube oil	550	4' x 5'-5	CD-1	STL	Maint. bldg
ST-3	30W Lube oil	550	4' x 5'-5	CD-1	STL	Maint. bldg
ST-4	10W Lube oil	550	4' x 5'-5	CD-1	STS	Maint. bldg
ST-5	32AW	550	4' x 5'-5	CD-1	STL	Maint. bldg
ST-6	Waste oil	2,000	5'-4 x16'	CD-1	STL	Maint. bldg
ST-7	Loco eng. oil	3,920	5'-4 x 23'-6	CD-2	STL	Spray bridge
ST-8	Diesel fuel	285	3'-6 x 4'-1	CD-4	STL	Pump house #1
ST-9	Waste oil	510	3'-5 x 7'-8	CD-10	STL	Warehouse
ST-10	32AW	1,020	4' x 10'-11	CD-7	STL	North side dumper
ST-11	Waste oil	530	4' x 5'-9	CD-7	STL	North side dumper
ST-12	Waste oil	275	2'-3W x 3'-9H x 5'L	CD-7	STL	North side dumper
ST-13	Loco eng. oil	275	2'-3W x 3'-9H x 5'L	CD-8	STL	South side positioner
ST-14	Waste oil	535	3'-6 x 7'-6	Pos. bldg	STL	Inside pos. bldg-north wall
ST-15	Kerosene	275	2'-3W x 3'-9H x 5'L	CD-10	STL	Warehouse
ST-16	Soil sement	8,270	8' x 22'	CD-12	STL	TT-5
ST-17	Dumper surfactant	2,900	8'-2 x 7'-5H	CD-13	Fiberglass	North side dumper

TANK NO.	MATERIAL STORED	CAPACITY GAL.	TANK DIA x LENGTH	IN CONTAINMENT DIKE NO.	TANK CONSTRUCTION	COMMENTS
ST-18	Diesel fuel	6,000	8' x 20'-6.5	Underground	Fiberglass	Warehouse
ST-19	Gasoline	1,000	4'-4 x 11'-4	Underground	Fiberglass	Warehouse
ST-20	Propane	30,000	11' x 47'	None	STL	ASME code 250PSI wrkg pressure
ST-21	Propane	1,000		None	STL	Maint. bldg
ST-22	Used antifreeze	520	3'-10 x 3'-11	CD-1	STL	Maint. bldg
ST-23	Waste oil tank	290	3'-6 x 3'-11	CD-1	STL	Waste Oil Trailor

TABLE 5-1
STORAGE TANK SCHEDULE

TANK NO.	MATERIAL STORED	CAPACITY GAL.	TANK DIA x LENGTH	IN CONTAINMENT DIKE NO.	TANK CONSTRUCTION	COMMENTS
ST-1	85-140 Lube oil	550	4' x 5'-5	CD-1	STL	Maint. bldg
ST-2	15W40 Lube oil	550	4' x 5'-5	CD-1	STL	Maint. bldg
ST-3	30W Lube oil	550	4' x 5'-5	CD-1	STL	Maint. bldg
ST-4	10W Lube oil	550	4' x 5'-5	CD-1	STS	Maint. bldg
ST-5	32AW	550	4' x 5'-5	CD-1	STL	Maint. bldg
ST-6	Waste oil	2,000	5'-4 x16'	CD-1	STL	Maint. bldg
ST-7	Loco eng. oil	3,920	5'-4 x 23'-6	CD-2	STL	Spray bridge
ST-8	Diesel fuel	285	3'-6 x 4'-1	CD-4	STL	Pump house #1
ST-9	Waste oil	510	3'-5 x 7'-8	CD-10	STL	Warehouse
ST-10	32AW	1,020	4' x 10'-11	CD-7	STL	North side dumper
ST-11	Waste oil	530	4' x 5'-9	CD-7	STL	North side dumper
ST-12	Waste oil	275	2'-3W x 3'-9H x 5'L	CD-7	STL	North side dumper
ST-13	Loco eng. oil	275	2'-3W x 3'-9H x 5'L	CD-8	STL	South side positioner
ST-14	Waste oil	535	3'-6 x 7'-6	Pos. bldg	STL	Inside pos. bldg-north wall
ST-15	Kerosene	275	2'-3W x 3'-9H x 5'L	CD-10	STL	Warehouse
ST-16	Soil sement	8,270	8' x 22'	CD-12	STL	TT-5
ST-17	Dumper surfactant	2,900	8'-2 x 7'-5H	CD-13	Fiberglass	North side dumper

TABLE 5-2
CONTAINMENT DIKE SCHEDULE

DIKE NO.	ITEMS CONTAINED IN DIKE	LxWxH INSIDE DIKE	DIKE CAPACITY		COMMENTS
			CU. FT.	GAL.	
CD-1	ST-1,ST-2,ST-3,ST-4,ST-5,ST-6, ST-22	25' x 15' x 1'-6	563	4,208	Maint bldg
CD-2	ST-7	27'-6 x 7' x 1'-9	537	4,017	Spray bridge
CD-3	Various reducers	50'-1 x 12' x 1'-6	901	6,743	Behind ER-6
CD-4	ST-8	7'-1 x 5'-6 x 1'-3	49	364	Pump house No. 1
CD-5	Various oil & grease drums	22'-8 x 8' x 1'-6	272	2,035	ER-6
CD-6	ST-23	14' x 6' x 1'-0	84	628	Waste oil trailer
CD-7	ST-10,ST-11,ST-12	14'-11 x 14'-9 x 1'-6	330	2,468	Nothside dumper bldg
CD-8	ST-13	17'-7 x 5' x 1'-3	110	823	South side positioner
CD-9	Posit. whl. clamp Hyd pump & reservoir	18'-4 x 5'-4 x 1'-3	122	912	Posit. bldg southside, hyd reservoir (6' x 3' x 1'-10, 245 Gal.)
CD-10	ST-9, ST-15/various drums	16'-8 x 7'-9 x 1'-6	194	1,451	Warehouse eastside above ground
CD-11	Various reducers/oil drums	28' x 5' x 1'-3	175	1,309	Warehouse eastside in ground
CD-12	ST-16	27'-8 x 14'-8 x 2'-6	1;015	7,592	TT-5
CD-13	ST-17	14'-8 x 10'-6 x 1'-6	231	1,728	Northside dumper bldg

TANK NO.	MATERIAL STORED	CAPACITY GAL.	TANK DIA x LENGTH	IN CONTAINMENT DIKE NO.	TANK CONSTRUCTION	COMMENTS
ST-18	Diesel fuel	6,000	8' x 20'-6.5	Underground	Fiberglass	Warehouse
ST-19	Gasoline	1,000	4'-4 x 11'-4	Underground	Fiberglass	Warehouse
ST-20	Propane	30,000	11' x 47'	None	STL	ASME code 250PSI wrkg pressure
ST-21	Propane	1,000		None	STL	Maint. bldg
ST-22	Used antifreeze	520	3'-10 x 3'-11	CD-1	STL	Maint. bldg
ST-23	Waste oil tank	290	3'-6 x 3'-11	CD-1	STL	Waste Oil Trailor

TABLE 5-2
CONTAINMENT DIKE SCHEDULE

DIKE NO.	ITEMS CONTAINED IN DIKE	LxWxH INSIDE DIKE	DIKE CAPACITY		COMMENTS
			CU. FT.	GAL.	
CD-1	ST-1,ST-2,ST-3,ST-4,ST-5,ST-6, ST-22	25' x 15' x 1'-6	563	4,208	Maint bldg
CD-2	ST-7	27'-6 x 7' x 1'-9	537	4,017	Spray bridge
CD-3	Various reducers	50'-1 x 12' x 1'-6	901	6,743	Behind ER-6
CD-4	ST-8	7'-1 x 5'-6 x 1'-3	49	364	Pump house No. 1
CD-5	Various oil &.grease drums	22'-8 x 8' x 1'-6	272	2,035	ER-6
CD-6	ST-23	14' x 6' x 1'-0	84	628	Waste oil trailer
CD-7	ST-10,ST-11,ST-12	14'-11 x 14'-9 x 1'-6	330	2,468	Nothside dumper bldg
CD-8	ST-13	17'-7 x 5' x 1'-3	110	823	South side positioner
CD-9	Posit. whl. clamp Hyd pump & reservoir	18'-4 x 5'-4 x 1'-3	122	912	Posit. bldg southside, hyd reservoir (6' x 3' x 1'-10, 245 Gal.)
CD-10	ST-9, ST-15/various drums	16'-8 x 7'-9 x 1'-6	194	1,451	Warehouse eastside above ground
CD-11	Various reducers/oil drums	28' x 5' x 1'-3	175	1,309	Warehouse eastside in ground
CD-12	ST-16	27'-8 x 14'-8 x 2'-6	1;015	7,592	TT-5
CD-13	ST-17	14'-8 x 10'-6 x 1'-6	231	1,728	Northside dumper bldg

Notification of Un-scanned Pages

The purpose of this form is to notify the reader that portions of this document could not be scanned or stored with the document within DEQ's electronic filing system. The information below provides details for what portion of this document is stored separately and where it is stored.

For access to the un-scanned portions of this document, please contact the Office Manager in the appropriate DEQ office location.

Document Date*: 5/24/01 (*SAME AS ECM METADATA) **DEQ Tracking Number (optional):** VA0057576

Select Type/Format**		Description
☐	Blueprints	
☐	Color Pages	
☐	Diagrams	
☒	Maps	
☐	Pictures/Photos	
☐	Plans (rolled)	
☐	Plans (flat)	
☐	Slides	
☐	Other	

****It is important to note that all documents and portions of those documents that <u>can</u> be scanned or submitted to FileNet <u>should be</u>. The list is <u>not</u> intended to indicate that certain types/formats should not be scanned. It is merely provided for the convenience of DEQ staff when processing documents.**

Select Office Location				
☐ BRRO-L	☐ NRO	☐ SWRO	☐ VRO	
☐ BRRO-R	☐ PRO	☒ TRO	☐ Central	

Indicate specific physical location of the un-scanned portion(s) of this document:	Varies, dependant on document