


ENVIRONMENTAL COMPLAINTS AND LOCAL SERVICES

Web-based Applications


Organizations

Select the organization from which you would like to submit a form.

Select Organization 

Forms

To locate a specific form please use our form finder.

 Form Finder

Welcome to Oklahoma DEQ - Water Quality

Welcome to the Water Quality Division's Stormwater Page

Forms

NOI for Construction Stormwater Discharges under OKR10 TEST

TEST - Notice of Intent for Stormwater Discharges Associated with Construction Activity under the OPDES Construction General Permit OKR10

NOI for Industrial Stormwater Discharges under OKR05 TEST

TEST Notice of Intent for Stormwater Discharges Associated with Industrial Activity under the OPDES Construction General Permit OKR05

Can't find a specific form? Please use our [Form Finder](#)

INSTRUCTIONS

TEST TEST TEST

Submission of this NOI constitutes notice that the party identified in Section 1 - Operator Information of this form intends to be authorized by DEQ for stormwater discharges associated with construction activity on land disturbance of equal to or greater than 1 or more acres, or less than 1 acre of total land area that is part of a larger common plan of development or sale in the State of Oklahoma.

Becoming a permittee obligates such discharger to comply with the terms and conditions of the OKR10 permit.

To obtain an authorization from DEQ, this form must be submitted with all the pertinent information.



For a MODIFICATION or a RENEWAL you will need to enter your authorization number. Using the authorization number to prepopulate the form will improve data entry.

All associated fees must be submitted with this NOI.

Authorization Number

Please enter your authorization number in order to modify or renew your NOI.

FREQUENTLY ASKED QUESTIONS

-  *Who must file an NOI*
-  *Where can I get a copy of the current OKR10 Permit?*

CONTACT INFORMATION

Home Address

Stormwater Unit of ECLS
Oklahoma DEQ
P.O. Box 1677
Oklahoma City, OK 73101-1677

Billing Address

Stormwater Unit of ECLS
Oklahoma DEQ
P.O. Box 1677
Oklahoma City, OK 73101-1677

CONTACTS

NOI for Construction Stormwater Discharges under OKR10 TEST ?

Alternate Identifier undefined - New Submission HPJ-DE7Y-013DS Revision 1 Form Version 1.30

Calculated Fee
Computed at Payment



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SAVE PROGRESS

Operator

Site / Project Information

Discharge Information (New) 1

Pollution Prevention Plan

Review

Signing

Application Type

New

Operator Name

*

Operator Details

* Phone Type



* Phone Number

ADD PHONE

MAILING ADDRESS i

* Address Line 1

Address Line 2

State/Area

NOI for Construction Stormwater Discharges under OKR10 TEST

Alternate Identifier undefined - New Submission HPJ-DE7Y-013DS Revision 1 Form Version 1.30

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SAVE PROGRESS

Operator

Site / Project Information

Discharge Information (New) 1

Pollution Prevention Plan

Review

Signing

PREVIOUS SECTION
Discharge Information (New)

Pollution Prevention Plan

CLEAR SECTION

All site/projects eligible for coverage under the CGP OKR10 permit must prepare a SWP3 prior to submitting the NOI to DEQ. The SWP3 is intended to document the selection, design, and installation of different control measures to meet the permit's non-numeric technology based effluent limitations, if applicable, numeric effluent limitations, and water quality based effluent limitations contained in Part 3 of the Permit as well as to document compliance with other permit requirements. Existing SWP3 must be updated to reflect all modifications and/or corrections.

SWP3 Prepared and Available

* Yes

No

NEW NOI for Industrial Stormwater Discharges under OKR05 ?

Submission HPG-GWJ5-VH67C Revision 1 Form Version 1.0

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SAVE PROGRESS

Operator

Facility Information

Discharge Information 1

Pollution Prevention Plan

Review

Signing

Covered Material Storage

Employee Training

Indoor Vehicle Maintenance

Other

Runoff Diversion/Berm

Secondary Containment

Sediment Trap

Vegetated Buffer

Dust Collection System

Good Housekeeping

Inlet Protection

Ret/Detention Pond

Runoff Infiltration

Sediment Basin

Spill Prevention Plans

Vegetative Swale



NEXT SECTION
Review

NOI for Construction Stormwater Discharges under OKR10 ?

Alternate Identifier CMS Willowbrook Inc - undefined - OKR1031006

Submission HPH-ZYPG-6T6XC

Revision 1

Form Version 1.30

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Computed at Payment



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SAVE PROGRESS

- ✘ Operator
- ✘ Site / Project Information
- ✔ Discharge Information (Renewal / Modification) 1
- ✘ Pollution Prevention Plan
- Review
- Signing

Authorization Status
In Effect

Operator Name
CMS Willowbrook Inc

Operator Details

Phone Type	Phone Number	Ext.
Business	405-224-1554	None Specified

Mailing Address
620 NE 36th St
Oklahoma City OK 73105

NOI Responsible Official Criteria.
Provide first/last name, title, contact phone number, and email address for the Operator's Responsible Official, certifying this NOI (see criteria below):

For a corporation: by a responsible corporate officer, which means: (i) a president, secretary, treasurer, or vice-president of the corporation in charge of a principal business function, or any other person who performs similar policy or



Oklahoma Department of Environmental Quality
 Water Quality Division
 INSPECTION REPORT - WASTEWATER TREATMENT PLANT

ROUTING
 1. ECLS-encode
 2. WQD-encode
 3. Central File

Facility No. _____ OPDES Permit No. _____ County _____

Name of Facility _____ Address _____ City _____ ZIP _____

Name of Owner _____ Address _____ City _____ ZIP _____

The below listed rules are cited in the Oklahoma Administrative Code, Title 252, except when noted. ** These rules are cited in 27A O.S.

SECTIONS	RULES	REQUIREMENT DESCRIPTIONS	ITEM	VIOL	DESCRIPTIONS OF DEFICIENCIES
OPERATORS	710	Certified operator employed	*01		
	710	All operators properly certified	02		
PERMIT	656-3-2	Facility permitted; no serious construction defects	*03		
VERIFICATION	656-3-2	All modifications and line extensions permitted	*04		
MAINTENANCE	606-1-3(b)(3)(W)	Treatment plant, including FEB, properly operated and maintained	05		
FENCING	656-9-1(d)	Facility identified and access controlled	06		
PROTECTION	656-9-1(b)	Storm drainage/flood protection adequate to protect units	07		
ACCESS	656-11-4(b)	All-weather road maintained	08		
LABORATORY & TESTING	606-11-2(d)	Required testing performed and DMRs submitted last quarter	*09		
	606-1-3(b)(3)(W)	Noncompliance reports submitted when violations occur	*10		
	606-11-2(d)	Required testing performed and reported last month	11		
	605-11-3(b)	Records kept for minimum of 3 years	12		
	606-1-3(b)(3)(W)	Equipment maintained and calibrated	13		
BYPASSES AND/OR SSOs	606-11-2	Testing performed by approved methods	14		
	606-1-3(b)(3)(W)	Dry or wet weather bypasses/SSOs reported	*15		
	** 2-6-205(A)	Dry weather bypasses/SSOs corrected	*16		
PUMP STATIONS	656-7-1	Pumps, motors, piping and valves operable and maintained	18		
	656-7-4	Controls and fail-safe systems operable	19		
HEADWORKS	656-13	Bar screen clean; approved disposal of grit and screenings	20		
	656-9-2(d)	Influent flow measurement device calibrated and operable	21		
	656-13-1(c)	Comminutor maintained and operable	22		
CLARIFIERS (primary & secondary)	656-17-3	Frequency of biosolids removal adequate	23		
	656-17-3	Scum removal equipment operable	24		
	656-17-3	Biosolids removal equipment operable	25		
	656-17	Weirs level and clean	26		
TRICKLING FILTERS & RBCs	656-23	Good biological growth on media	27		
	656-23	Seals, vents and bearings maintained	28		
	656-23	Flow distributed evenly, filter free of ponding	29		
AERATION BASINS	656-15-1	Adequate/uniform mixing provided	30		
	656-15-1	Appearance of mixed liquor acceptable	31		
	656-15-1	Scum and foaming kept to a minimum	32		
FILTRATION	656-23-1 & 2	Media cleaned and maintained	33		
DISINFECTION	656-21	Facilities maintained and operable (safety equipment, etc.)	*34		
OUTFALL	605-11-2(c)	Effluent flow measurement device available and operable	*35		
	605-11-2(c)	Effluent flow measurement device calibrated	*36		
	606-5-1	Appearance of effluent and receiving stream acceptable	37		
BIOSOLIDS FACILITIES	656-19	Digester equipment operable	38		
	656-19	Drying beds or dewatering facilities properly maintained	39		
BIOSOLIDS MANAGEMENT	606-1-3(c) & ** 2-10-101 & ** 2-6-501	Biosolids treated and land applied in accordance with SMP and regulations or disposed at LPD-approved landfill	*40		
	606-1-3(c)	Biosolids testing and application records maintained	41		
	606-1-3(c)	Pathogen treatment requirements met	42		
	** 2-6-501.5	Vector attraction reduction requirements met and biosolids soil incorporated	43		
	656-19	On-site biosolids storage adequate, maintained/operated properly	*44		
POTABLE WATER	656-9-2(b)	Potable water protected, no cross-connections	*45		

Critical items are indicated in bold and by an asterisk (*) in the item column. All critical items marked must be corrected within 14 days or as specified by the inspector. Other violations must be corrected by the next regular inspection or by the date specified.

FACILITY STATUS:
 46 Repeat Violation(s)
 47 Under current enforcement action
 48 No Violation Noted

Date: _____

 Environmental Specialist Employee ID# _____

Total number of items marked

Copy received by _____ Title _____

PURPOSE OF VISIT
 49 Compliance Monitoring
 50 Complaint No. _____
 51 Follow-Up
 52 Emergency/Disaster

Number of critical items marked

ACTION
 53 None
 54 Notice to Comply by: _____ date
 55 Refer to WQD

TYPE CLASS
 74 M Mechanical Plant (major)
 74 M1 Mechanical Plant (minor)

- Current nSpect project includes most facility inspections
- Expansion of project will hopefully address our remaining inspection forms



ENVIRONMENTAL COMPLAINTS & LOCAL SERVICES
TOTAL RETENTION FACILITIES
TOTAL RETENTION FACILITIES with LAND APPLICATION
WASTEWATER BYPASS FORM

DEQ Facility ID: _____ Facility Name: _____ County: _____

<p>Report all Total Retention Facility and Total Retention Facilities with Land Application wastewater bypasses to DEQ/ Environmental Complaints and Local Services within 24 hours at:</p> <p>1-800-522-0206</p>	<p><u>Mail or Fax</u> written report including copies of ANY test results within 5 days to:</p> <p>Department of Environmental Quality Environmental Complaints and Local Services P.O. Box 1677 Oklahoma City, OK 73101-1677 Fax No. (405) 702-6226</p>
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- Addition of forms and inspections
- Allow for real time reporting
- Public facing portal

DEQ notified: _____ AM PM Received by: _____
Month Day Year Time

Period of bypass: From _____ AM PM
Month Day Year Time

To _____ AM PM
Month Day Year Time

Type of Bypass: Pipe Lagoon/Basin Manhole Head Works Lift Station Irrigation

Strength of Bypass Raw Partially Treated Re-use (Category 5) Amount of Bypass: _____gpd

Type of samples taken: BOD TSS Fecal pH None Other: _____

Geographical location of bypass and receiving stream if appropriate: _____

Reason for bypass: _____

Steps taken to prevent recurrence: _____

Were fish or other wildlife affected as a result of the bypass? Yes No How? _____

Impact to receiving stream and /or surrounding areas: _____

Steps taken to clean up or treat bypass: _____

Reported by: _____ Title: _____

Signature: _____ Date: _____ Phone #: _____
Facility Representative

DEQ EPS USE ONLY:

Type of Contact: Phone or Site Visit Date: _____ Follow up Site Visit Date: _____

Geographical location of bypass and receiving stream if appropriate: _____

Reason for bypass: _____

Steps taken to prevent recurrence: _____

Impact to receiving stream and/or surrounding areas: _____

Steps taken to clean up or treat bypass: _____

Corrective action needed: _____ Comply by date: _____

Reported information confirmed: Yes No If no, explain: _____

Comments: _____

Signature: _____ ID #: _____ Date: _____
ECLS Representative

OKC Central Office Use Only
BYPASS ID #