

Industrial Stormwater General Permit Annual Report Form

Permit No. WAR-0 0 1 1 6 8

Site Name:

Port of Olympia Ocean Terminal

Site County: Thurston

Use this form to submit your annual report to Ecology. This form is not protected. Use your F11 key to maneuver through the fields. Attach corrective action documentation, and/or additional sheets if necessary. All facilities must submit a signed annual report each year on or before May 15th. Retain a copy of your submitted report onsite for Ecology review.

1. Benchmarks Exceeded	
This report is based on samples collected during calendar year 2021.	
Did you exceed the benchmark for any parameter during the above noted calendar ye Note : If you sampled a parameter (other than pH or visible oil sheen) at a dischar- once during a quarter, the average of the sample results must be compared to the	ge point more than
Yes ☐ - Complete Sections 2 and 3 and sign and submit the form as described No ☐ - Complete Section 2, skip Section 3, and sign and submit the form as described	in Section 4. escribed in Section 4.
Include any additional comments here:	
2. Stormwater Problems Identified At the Facility	
Instructions: Based on the best available information, briefly describe any potential or problem(s) you identified during the previous calendar year (Jan 1st – Dec 31st).	actual stormwater pollution
 Sources of available information may include (but may not be limited to): SW consultants or providers of technical assistance, inspection reports or other n federal/state/local authorities, visual observations, and/or your facility's month inspections). 	otification made by
 For each problem identified, provide the date you discovered the problem (es 	
 Do not include problems discovered through stormwater sampling. This info 	rmation is covered in Section 3.
Date Problem Discovered: 2-9-21, 4-26-21, 5-24-21	rk on top of ecology blocks and not I bark debris off containment blocks
Date Problem Discovered: 9-30-21 Replaced 10-1-21, verified 10-25-21 Describe the Problem: spill kit missing non	nmetallic shovel and 5 gallon bucket
Date Problem Discovered: 12-15-21 Describe the Problem: Monthly SWTF inspections are complete for Oct and Nov.	pection checklist not completed for
Date Problem Discovered: Describe the Problem	

3. Corrective Actions Planned or Taken

Instructions: Complete this section for each pollutant parameter (e.g., turbidity, copper) that exceeded a benchmark during the previous calendar year (Jan 1 st – Dec 31 st). The permit requires you to identify the condition triggering the need for corrective action review. To do this, indicate below which quarters had a sample result that exceeded the benchmark. If more than one sample was taken at a sample location, indicate which quarters had an average sample result that exceeded the benchmark. Note: If you exceeded the benchmark for more than one parameter (e.g., turbidity and zinc), make additional copies of Section 3 and complete one for each parameter.
Pollutant Parameter: benchmark was exceeded during the following quarters (check all that apply):
1st Quarter (January, February, March)
2nd Quarter (April, May, June)
3rd Quarter (July, August, September)
4 th Quarter (October, November, December)
Instructions: For the pollutant parameter above, summarize any Level 1, 2, or 3 corrective actions completed during the
previous calendar year and include the dates you completed the corrective actions.
☐ Level 1 corrective action
Describe the additional operational source control BMPs you implemented (Permit Condition S8.B):
Describe the additional operational course control bin o year implementative
Date corrective action was completed:
Date corrective action was completed.
Level 2 corrective action
Describe the additional structural source control BMPs you implemented (Permit Condition S8.C):
Describe the additional structural source control bivil 3 you implemented (1 cmilt condition co. 5).
Data constitue action was completed:
Date corrective action was completed:
Level 3 corrective action
Describe the additional treatment BMPs you implemented (Permit Condition S8.D):
Date corrective action was completed:
Instructions: For the pollutant parameter listed above, describe the status of any Level 2 or 3 corrective actions triggered during the previous calendar year, but have not yet been completed. Identify the date you expect to complete corrective actions.
Level 2 corrective action
Describe the status of the corrective action:
Date you expect to complete corrective action:
☐ Level 3 Corrective Action
Describe the status of the corrective action:
Describe the states of the contest of action.
Date you expect to complete corrective action:
Date you expect to complete confective action.

Certification by Permittee 4.

"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." _____

Lisa Parks	Port of Olympia	3/30/2022
Printed Name	Company	Date
Sia Parks		
Signature*		

*Note: Signature not required if the form is submitted electronically through the Water Quality Permitting Portal

*Federal regulations require this report to be signed by the following person, or a duly authorized representative:

A. In the case of corporations, by a responsible corporate officer.

Note: Responsible Corporate Officer is defined on p.59 of ISGP:

http://www.ecy.wa.gov/programs/wq/stormwater/industrial/ISGPFinal2015.pdf

- B. In the case of a partnership, by a general partner of a partnership.
- C. In the case of sole proprietorship, by the proprietor.
- D. In the case of a municipality, state, federal, or other public facility: by either a principal executive officer or ranking elected official.

A person is a duly authorized representative only if:

- 1. The authorization is made in writing by a person described above and submitted to Ecology.
- 2. The authorization specifies either an individual or a position having responsibility for the overall operation of the regulated facility, such as the position of plant manager, superintendent, position of equivalent responsibility, or an individual or position having overall responsibility for environmental matters.

Please upload the completed form to the Water Quality Permitting Portal:

http://www.ecy.wa.gov/programs/wq/permits/paris/portal.html. Make sure you retain a copy for your records.

- Click on "Permit Submittals"
- Then, click on "My Permits", and
- Then, click on "Submittals".

If you have any issues or questions, please contact Ecology's IT support staff at WQWebPortal@ecy.wa.gov or call 800-633-6193/Option 3

If you have questions about this form, cont Location	Contact Name	Phone	E-mail
City of Seattle, and Kitsap, Pierce, and Thurston counties	Josh Klimek	360-407-7451	josh.klimek@ecy.wa.gov
Island, King, and San Juan counties	Clay Keown	360-407-6048	clay.keown@ecy.wa.gov
Adams, Asotin, Columbia, Ferry, Franklin, Garfield, Grant, Lincoln, Pend Oreille, Skagit, Snohomish, Spokane, Stevens, Walla, Whatcom, and Whitman counties.	Shawn Hopkins	360-407-6442	shawn.hopkins@ecy.wa.gov
Benton, Chelan, Clallam, Clark, Cowlitz, Douglas, Grays Harbor, Jefferson, Kittitas, Klickitat, Lewis, Mason, Okanogan, Pacific, Skamania, Wahkiakum, and Yakima counties.	Joyce Smith	360-407-6858	joyce.smith@ecy.wa.gov

To request materials in a format for the visually impaired, call the Water Quality Program at Ecology, 360-407-6600, Relay Service 711, or TTY 877-833-6341.