

Vermont Agency of Natural Resources  
Conditional Exclusion from the Multi-Sector General Permit 3-9003  
**No Exposure Certification**

Submission of this No Exposure Certification constitutes notice that the entity identified in Section A does not require permit authorization for its stormwater discharges associated with industrial activity under the Vermont Multi-Sector General Permit (MSGP) due to the existence of a condition of no exposure. Facilities with No Exposure Certifications are obligated to comply with the terms and conditions of the VT MSGP 3-9003 in order to maintain eligibility for exclusion.

A condition of no exposure exists at an industrial facility when all industrial materials and activities are protected by a storm resistant shelter to prevent exposure to rain, snow, snowmelt, and/or runoff. Industrial materials or activities include, but are not limited to, material handling equipment or activities, industrial machinery, raw materials, intermediate products, by-products, final products, or waste products. Material handling activities include the storage, loading and unloading, transportation, or conveyance of any raw material, intermediate product, final product or waste product. A storm resistant shelter is not required for the following industrial materials and activities:

- drums, barrels, tanks, and similar containers that are tightly sealed, provided those containers are not deteriorated and do not leak. "Sealed" means banded or otherwise secured and without operational taps or valves;
- adequately maintained vehicles used in material handling; and
- final products, other than products that would be mobilized in stormwater discharge (e.g., rock salt).

A No Exposure Certification must be provided for each facility qualifying for the no exposure exclusion. In addition, the exclusion from the MSGP is available on a facility-wide basis only, not for individual outfalls. If any industrial activities or materials are or will be exposed to precipitation, the facility is not eligible for the no exposure exclusion.

By signing and submitting this No Exposure Certification form, the entity in Section A is certifying that a condition of no exposure exists at its facility or site, and is obligated to comply with the terms and conditions of the Vermont MSGP 3-9003.

ALL INFORMATION MUST BE PROVIDED ON THIS FORM.

**A. Facility Operator Information**

1. Name: \_\_\_\_\_ 2. Title: \_\_\_\_\_
3. Mailing Address: a. Street: \_\_\_\_\_  
\_\_\_\_\_
- b. City: \_\_\_\_\_ c. State: \_\_\_\_\_ d. Zip Code: \_\_\_\_\_
- e. Phone: \_\_\_\_\_ f. Fax: \_\_\_\_\_ g. Email: \_\_\_\_\_

**B. Facility/Site Information**

1. Facility/Site Name: \_\_\_\_\_
2. Location Address: a. Street: \_\_\_\_\_  
b. City: \_\_\_\_\_ c. County: \_\_\_\_\_ d. State: \_\_\_\_\_ e. Zip Code: \_\_\_\_\_
- f. Latitude: \_\_° \_\_' \_\_" g. Longitude: \_\_° \_\_' \_\_" (at or near the center of the facility)
3. Was or is the facility covered under a NPDES permit?  Yes  No
- a. If yes, list the permit number: \_\_\_\_\_

**C. Industrial Activity Information**

1. List the Standard Industrial Classification (SIC) code(s) that best represents the facility's industrial activity:  
a. Primary SIC code: \_\_\_\_\_ b. Secondary (if applicable): \_\_\_\_\_
2. Total size of site associated with industrial activity: \_\_\_\_\_ square feet
3. Have you made any physical changes to your facility in order to achieve No Exposure?  
 Yes  No
- If yes, please describe. \_\_\_\_\_  
\_\_\_\_\_

**D. Exposure Checklist**

Are any of the following materials or activities exposed to precipitation, now or in the foreseeable future? Please check either "Yes" or "No" in the appropriate box. **If you answer "Yes" to any of these questions (1) through (11), you are not eligible for the no exposure exclusion.**

	Yes	No
1. Using, storing or cleaning industrial machinery or equipment, and areas where residuals from using, storing or cleaning industrial machinery or equipment remain and are exposed to stormwater	<input type="checkbox"/>	<input type="checkbox"/>
2. Materials or residuals on the ground or in stormwater inlets from spills/leaks	<input type="checkbox"/>	<input type="checkbox"/>
3. Materials or products from past industrial activity	<input type="checkbox"/>	<input type="checkbox"/>
4. Material handling equipment (except adequately maintained vehicles)	<input type="checkbox"/>	<input type="checkbox"/>
5. Materials or products during loading/unloading or transporting activities	<input type="checkbox"/>	<input type="checkbox"/>
6. Materials or products stored outdoors (except final products intended for outside use [e.g. new cars] where exposure to stormwater does not result in the discharge of pollutants)	<input type="checkbox"/>	<input type="checkbox"/>
7. Materials contained in open, deteriorated or leaking storage drums, barrels, tanks, and similar containers	<input type="checkbox"/>	<input type="checkbox"/>
8. Materials or products handled/stored on roads or railways owned or maintained by the discharger	<input type="checkbox"/>	<input type="checkbox"/>
9. Waste material (except waste in covered, non-leaking containers [e.g. dumpsters])	<input type="checkbox"/>	<input type="checkbox"/>
10. Application or disposal of process wastewater (unless otherwise permitted)	<input type="checkbox"/>	<input type="checkbox"/>
11. Particulate matter or visible deposits of residuals from roof stacks and/or vents not otherwise regulated (i.e. under an air quality control permit) and evident in stormwater outflow	<input type="checkbox"/>	<input type="checkbox"/>

**E. Certification**

I certify under penalty of law that I have read and understand the eligibility requirements for claiming a condition of "No Exposure" and obtaining a conditional exclusion from the requirements of this General Permit; and that there are no discharges of stormwater contaminated by exposure to industrial activities or materials from the industrial facility identified in this document (except as allowed under Section 1.3 of this General Permit 3-9003).

I understand that I am obligated to submit a No Exposure certification form once every five years to the Vermont Agency of Natural Resources and, if applicable, to the operator of the local municipal separate storm sewer system (MS4) into which this facility discharges. I understand that I must allow the Agency, or MS4 operator where the discharge is into the local MS4, to perform inspections to confirm the condition of no exposure and to make such inspection reports publicly available upon request. I understand that I must obtain coverage under this General Permit 3-9003 in the event that the information in the certification changes and the facility is no longer eligible for the conditional exclusion.

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 gathered and evaluated the information submitted. Based upon my inquiry of the person or persons who manage the system, or those persons directly involved in gathering the information, the information submitted is to the best of my knowledge and belief true, accurate and complete. I am aware there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Printed Name: \_\_\_\_\_

Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Send No Exposure certification form to:

VT DEC  
Water Quality Division  
Stormwater Section – MSGP  
103 South Main Street, 10 N  
Waterbury, VT 05671-0408

Instructions for completing the **No Exposure Certification** for Stormwater Discharge  
Associated with Industrial Activity under the Vermont Multi-Sector General Permit 3-9003

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**A. Facility Operator Information**

1. Enter the legal name of the person, partnership, co-partnership, firm, company, corporation, association, joint stock company, trust, estate, governmental entity, or other legal entity that operates the facility or site described in the application. The name of the operator may or may not be the same as the name of the facility. The responsible party is the legal entity that controls the facility's operation, rather than the plant or site manager.
2. Provide the title of the facility operator.
3. Provide the mailing address of the facility operator. Include the street address or P.O. Box, City, State, and Zip code. All correspondence regarding the permit will be sent to this address, not the facility address listed on the form.

**B. Facility/Site Information**

1. Enter the official or legal name of the facility or site.
2. Enter the complete street address, City, State, and Zip code (i.e. "911" street address). Do not use a P.O. Box.
- f/g. Enter the latitude and longitude of the approximate center of the facility or site in degrees/minutes/seconds (for example, latitude: 44° 15' 40", longitude: -72° 34' 35") Latitude and longitude can be obtained from the U.S. Geological Survey (USGS) maps or by using EPA's web-based facility siting tool at:  
[http://www.epa.gov/tri/report/siting\\_tool/index.htm](http://www.epa.gov/tri/report/siting_tool/index.htm)
3. Identify if the facility was or is covered under a National Pollutant Discharge Elimination System (NPDES) permit and provide the permit number.

**C. Industrial Activity Information**

1. List your primary and secondary (if applicable) 4-digit Standard Industrial Classification (SIC) code or 2-character Activity Code that best describe the principle products or services provided at the facility or site identified. Instructions on how to identify your facility's SIC code can be found at: [http://www.vtwaterquality.org/stormwater/htm/sw\\_msgp.htm](http://www.vtwaterquality.org/stormwater/htm/sw_msgp.htm)
2. Enter the total size of the site associated with the industrial activity in square feet.
3. Check "yes" or "no" as appropriate to indicate whether you have made physical changes to your facility to qualify for no exposure. If yes, please describe your modifications to the facility.

**D. Exposure Checklist**

Check "yes" or "no" as appropriate to describe the exposure conditions at your facility. If you answer "Yes" to **ANY** of the questions (1) through (11) in this section, a potential for exposure exists at your site and you cannot certify to a condition of no exposure. You must obtain (or already have) coverage under the Vermont MSGP 3-9003. After obtaining permit coverage, you can institute modifications to eliminate the potential for a discharge of stormwater exposed to industrial activity, and then certify to a condition of no exposure.

**E. Certification**

Caution: The original signature must be on the form submitted to DEC (no copies or faxes will be accepted). An unsigned or undated No Exposure Certification will prevent the granting of a Conditional Exclusion of No Exposure.

Printed Name and Title: For a corporation, the No Exposure Certification must be signed by a responsible corporate officer, which means: (i) 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 decision making functions for the corporation, or (ii) the manager of one or more manufacturing, production, or operating facilities, provided the manager is authorized to make management decisions which govern the operation of the regulated facility including having the explicit or implicit duty of making major capital investment recommendations, and initiating and directing other comprehensive measures to assure long term environmental compliance with environmental laws and regulations; the manager can ensure that the necessary systems are established or actions taken to gather complete and accurate information for permit application requirements; and where authority to sign documents has been assigned or delegated to the manager in accordance with corporate procedures; for a partnership or sole proprietorship: by a general partner or the proprietor; or for a municipal, State, or other public facility: by either a principal executive or ranking elected official.