



**State of Hawaii, Department of Health, Clean Water Branch**

**CWB-Individual NPDES Form C**

**Application for HAR, Chapter 11-55 - NPDES Individual Permit  
Authorizing Discharges of Storm Water Associated With  
Construction Activities (as defined in 40 CFR §§122.26(b)(14)(x) and  
122.26(b)(15)(i))**

Before completing this form, read the *Guidelines for CWB-Individual NPDES Form C*. Alteration of the text in this form may delay the processing of this submittal. The \$1000 filing fee and CWB-NPDES Signatory and Certification Statement shall be submitted with this form. The EPA Form 3510-1 is not required to be submitted with this form.

1. Owner Information (see Guidelines for CWB-Individual NPDES Form C - Note 1)

Legal Name: State of Hawaii Department of Transportation

Mailing Address: 869 Punchbowl Street

City, State and Zip Code+4: Honolulu, Hawaii 96813-5097

Street Address: Same as above

City, State and Zip Code+4: Same as above

Contact Person & Title: Karen Chun, P.E., Technical Design Section Head Karen.Chun@hawaii.gov

Phone No.: (808) 692-7544 Fax No.: (808) 692-7555

2. Owner Type (see Guidelines for CWB-Individual NPDES Form C - Note 2)

City ☐ County ☐ State ☒ Federal ☐ Private ☐ Other ☐

If "Other" is checked, specify the type below:

\_\_\_\_\_

3. General Contractor Information (see Guidelines for CWB-Individual NPDES Form C - Note 3)

Legal Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State and Zip Code+4: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State and Zip Code+4: \_\_\_\_\_

Contact Person & Title: \_\_\_\_\_

Phone No.: ( ) \_\_\_\_\_ Fax No.: ( ) \_\_\_\_\_

☒ The general contractor information will be submitted 30 days before the start of construction activities.

4. Project Information (see Guidelines for CWB-Individual NPDES Form C - Note 4)

Legal Name: Keaau-Pahoa Road Shoulder Lane Conversion, Keaau Bypass Rd. to Shower Dr.

Mailing Address: c/o SDOT: 601 Kamokila Blvd – Room 688

City, State and Zip Code+4: Kapolei, Hawaii 96707-2038

Street Address: The proposed highway project spans from Keaau Bypass Road to Shower Drive

City, State and Zip Code+4: Keaau, Hawaii 96749

Contact Person & Title: Brian Lock, Project Manager (balock@wilsonokamoto.com)

Phone No.: (808) 946-2277

Fax No.: (808) 946-2253

Island: Hawaii

Tax Map Key No(s).			
Zone	Section	Plat	Parcel(s)
1	5	33	261
1	5	36	116-121 See Attachment A, Section 4 for additional TMKs

5. Receiving State Water(s) Information (see Guidelines for CWB-Individual NPDES Form C - Note 5)

a. Receiving State Water Name: Pacific Ocean. See add. Rec. water coordinates on Fig. 2 and Attachment A Section 5.a.

Discharge Point Coordinates into the Receiving State Water: RW#5 (Begin Sheet Flow - Pacific Ocean)

Latitude: °  ' '' Longitude: °  ' '' W

Classification: (check the appropriate space(s))

Inland: Class 1 ☐ and Estuary ☐

Marine: Class AA ☒ and Embayment ☐

b. Are there additional discharge points into receiving State waters?

No ☐ Yes ☒ If yes, provide the information requested in Item 5.a. on a separate sheet.

c. Does the discharge enter a storm water drainage system before discharging into the receiving State waters?

No ☐ Yes ☒ If yes, provide the following information. Attach a separate sheet with the requested information if there is more than one (1) discharge point into the storm water drainage system.

i. Drainage System Owner's name: State of Hawaii DOT, See Attachment B, Figure 2

ii. Discharge Point Coordinates into the Drainage System: DP#1 (see Att. B, Fig. 2 for others)

Latitude: °  ' '' N Longitude: °  ' '' W

- iii. A copy of the permit, license, or equivalent written approval granted by the owner(s) of the drainage system(s) allowing the subject discharge to enter their drainage system(s) is attached.

Yes ☒ No ☐ , an explanation is attached. See Attachment A, Section 5.c.iii.

6. Quantity of Storm Water Discharge (see Guidelines for CWB-Individual NPDES Form C - Note 6)

164.81 cfs (cfs/gpd) See Attachment A, Section 6 for calcs

7. Non-Storm Water Information (see Guidelines for CWB-Individual NPDES Form C - Note 7)

a. Source(s) of the non-storm water: dust control, saw-cutting, washdown from construction

Equipment, concrete washout, concrete curing, temporary irrigation

b. Non-storm water handling method: Does the non-storm water discharge from the construction site?

☐

Yes If yes, where is the non-storm water discharged? The construction activity may require additional forms. Contact the CWB for details.

☒

No If no, indicate the non-storm water handling method(s):

See Attachment A, Section 7.b.

8. Location Map (see Guidelines for CWB-Individual NPDES Form C - Note 8)

a. A location map which shows the following is attached: Yes ☒ No ☐

i. Island on which the project site is located, and See Attachment B, Figure 1

ii. Location of the project site.

b. A topographic map or maps of the area which clearly show the following is/are attached:

Yes

☒

No

☐

i. Legal boundaries of the project site, See Attachment B, General Plan Sheets

ii. Location and identification number of each of the project site's existing and/or proposed outfalls or discharge points, and

iii. Receiving State water(s) and receiving storm water drainage system(s), if applicable, identified and labeled.

9. Flow Chart (see Guidelines for CWB-Individual NPDES Form C - Note 9)

A flow chart or line drawing showing the general route taken by storm water through the project site is attached.

Yes

☒

No

☐

See Attachment B, Figure 3

10. Existing or Pending Permits, Licenses, or Approvals (see Guidelines for CWB-Individual NPDES Form C - Note 10)

Provide the status and corresponding file numbers on any existing or pending environmental permits.

- a. Other NPDES Permit or NGPC File No.: N/A
- b. DA Permit: ACOE did not take jurisdiction. See attached letter from ACOE in Attachment B
- c. Section 401 WQC: N/A
- d. SHPD file number: None assigned. See attached letters from SHPD in Attachment B
- e. Others (Specify): N/A

11. Construction Site Characterization (see Guidelines for CWB-Individual NPDES Form C - Note 11)

- a. Describe the scope of the construction activity, including a proposed timetable for major activities with the date when the contractor will begin the site disturbance

See Attachment A, Section 11.a.

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- b. Describe the history of the land use

See Attachment A, Section 11.b.

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- c. Describe the pollution source(s) in the history and corrective measures

There is no known history of pollution sources on the project site

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12. Construction Site Area (see Guidelines for CWB-Individual NPDES Form C - Note 12)
- a. Total area of the site: 30.8 acres
- b. Total disturbance area (i.e., clearing, excavating, grading, grubbing, storage, staging, etc.):  
14 acres
- c. Impervious area of the site after construction is completed: 18 acres

13. Construction Best Management Practices (BMPs) Plan (see Guidelines for CWB-Individual NPDES Form C - Note 13)

a. Project Site Map (see Guidelines for CWB-NPDES Form C - Note 13.a.)

i. Will construction be done in phases?

No ☒

Yes ☐

If yes, a phasing map identifying each phase of the multi-phase construction project and the boundaries of each phase is attached:

Yes ☐

No ☐

ii. A facility site map(s) which shows the following information is attached:

Yes ☒

No ☐

See Attachment A, Section 13.a.ii. for details

- (1) Approximate slopes anticipated after major grading activities and pre-construction, during-construction, and post-construction drainage patterns;
- (2) Areas of soil disturbance;
- (3) Construction Baseyard and/or staging areas;
- (4) The location(s) of impervious structures (including buildings, roads, parking lots, etc.) after construction is completed;
- (5) Wetlands and other State water(s);
- (6) The boundaries of 100-year flood plans, if determined;
- (7) Areas used for the storage of soils, construction materials, or wastes and areas for the disposal of wash water from washing down of construction equipment and vehicles, concrete truck drum wash water, treated dewatering effluent, hydrotesting effluent discharge, etc.;
- (8) The location(s) where stabilization practices are expected to occur;
- (9) The location(s) and descriptions of all structural controls including those that will be used to divert the offsite storm water from flowing into the constructions site and;
- (10) The areas where vegetative practices are to be implemented.

**Note: Items (1) through (6) shall be submitted with the application. If Items (7) through (10) are not available at the time of submittal, the information may be submitted at least 30 days before the start of construction activities.**

iii. Indicate which items are not applicable (use item numbers above):

N/A

iv. Indicate which items will be submitted 30 days before the start of construction activities (use item numbers above):

7,8,9,10

- b. The construction BMPs plan is attached on separate sheets with reference to Item 13.b.

Yes ☒ No ☐ See Attachment A, Section 13.b.

**The construction BMPs plan shall provide information requested in the Guidelines for CWB-Individual NPDES Form C - Note 13.b. by describing methods to minimize erosion of soil and discharge of other pollutants into State waters and, after completion of the construction activity, removal procedures for the construction site BMPs.**

- i. Construction Activity - Describe the nature of the construction activity.

- (1) What is to be constructed and the construction sequence?
- (2) If the project is a multi-phase construction project, include a list of each phase.
- (3) What type of materials and heavy equipment will be used for the construction activity?

- ii. Quality of Discharge - Describe the nature of the fill material to be used and existing data describing the soil or the quality of any discharge from the project site.

- iii. Potential Pollutant(s) - Identify all the potential pollutant(s) that will be generated by the proposed construction activities and the proposed control measures or treatment, as applicable. These pollutants may include, but are not limited to:

- (1) Construction debris, removed vegetation;
- (2) Discharges associated with the operation and maintenance of the equipment, such as oil, fuel and hydraulic fluid leakage;
- (3) Soil erosion from the disturbed areas and stockpile areas;
- (4) Location(s) of oil, fuel or any hazardous material storage site(s) and containment structure(s); and
- (5) Other.

- iv. Controls for Land Disturbances - The owner and/or general contractor shall comply with the Special Conditions for Land Disturbances (from HAR, Chapter 11-55, Appendix C). The Department suggests including the language described in Note 13.b.iv. of the Guidelines for CWB-Individual NPDES Form C in the BMPs plan. It may be amended to be site-specific (i.e., type of cover to be used).

- v. Erosion and Sediment Control Requirements - If applicable, submit the county-approved erosion and sediment control plan and/or the county-approved grading permit as appropriate for the activity and a schedule for implementing each control with the application or 30 days before the start of construction activities.

- vi. Construction Schedule - Attach the proposed construction schedule which shall include, at a minimum:

- (1) The date when the general contractor will begin and end the site disturbance;
- (2) Dates when erosion control measures will be implemented and removed; and
- (3) The dates when major construction activities begin and end.

- c. ☐ The Site-Specific Construction BMPs Plan is submitted as an attachment to the CWB-Individual NPDES Form C.
- ☒ The Site-Specific Construction BMPs Plan will be submitted 30 days before the start of construction activities.

14. Post-Construction Pollutant Control Measures (see Guidelines for CWB-Individual NPDES Form C - Note 14)

The description of measures that will minimize the discharge of pollutants via storm water discharge after construction operations have been completed are attached on a separate sheet with reference to Item 14.

Yes ☒ No ☐ See Attachment A, Section 14

15. Additional Information (see Guidelines for CWB-Individual NPDES Form C - Note 15)

BMPs for the demolition work of the existing bridge and utility lines and poles shall be submitted with the Site-Specific BMPs at least 30 days prior to start of construction activities.

16. Authorization of Representative (see Guidelines for CWB-Individual NPDES Form C - Note 16)

Alteration of this item will result in the invalidation of the authorization statement(s).

- a. This statement authorizes the named individual or any individual occupying the named position of the company/organization listed below to act as our representative to process the required application for coverage under the NPDES permit to discharge to State waters from the subject facility. This authorization begins with NPDES permit application processing and ends upon the Owner's receipt of the NPDES Permit. The Owner hereby agrees to comply with and be responsible for all NPDES permit conditions.

Company/Organization Name: State of Hawaii, Department of Transportation, Highways Div.

Mailing Address: 869 Punchbowl Street

City, State and Zip Code+4: Honolulu, Hawaii 96813-5097

Street Address: Same as above

City, State and Zip Code+4: Same as above. Email: Alvin.Takeshita@hawaii.gov

Authorized Contact Person & Title: Alvin A. Takeshita, Interim Administrator, Highways Div.

Phone No.: (808) 587-2220 Fax No.: (808) 587-2340

- b. This statement authorizes the named individual or any individual occupying the named position of the company/organization listed below to act as our representative to process the required application for coverage under the NPDES permit to discharge to State waters from the subject facility. Our representative is further authorized to fulfill all conditions of the NPDES permit. This authorization begins with NPDES permit application processing and ends upon receipt of the CWB-NOC Form by the CWB. The Owner hereby agrees to comply with and be responsible for all NPDES permit conditions.

Company/Organization Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State and Zip Code+4: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State and Zip Code+4: \_\_\_\_\_

Authorized Contact Person & Title: \_\_\_\_\_

Phone No.: (     ) \_\_\_\_\_ Fax No.: (     ) \_\_\_\_\_

- c. This statement authorizes the named individual or any individual occupying the named position of the company/organization listed below to act as our representative to fulfill all conditions of the NPDES permit for the subject facility. This authorization begins upon the Owner's receipt of the NPDES Permit and ends upon receipt of the CWB-NOC Form by the CWB. The Owner hereby agrees to comply with and be responsible for all NPDES permit Conditions.

Company/Organization Name: Department of Transportation, Highways Division

Mailing Address: 50 Makaala Street

City, State and Zip Code+4: Hilo, Hawaii 96720-5107

Street Address: Same as above

City, State and Zip Code+4: Same as above. Email: Sal.Panem@hawaii.gov

Authorized Contact Person & Title: Salvador Panem, District Engineer

Phone No.: ( 808 )933-8866 \_\_\_\_\_ Fax No.: ( 808 )933-8869 \_\_\_\_\_

- d. ☐ A separate statement is attached.