KPDES FORM 1

AI 5463

RECEIVED JUL. 05 2007 BY

KENTUCKY POLLUTANT DISCHARGE ELIMINATION SYSTEM

PERMIT APPLICATION

This is an application to: (check one)

- ☐ Apply for a new permit.
- ☑ Apply for reissuance of expiring permit.
- ☐ Apply for a construction permit.
- ☐ Modify an existing permit.
  Give reason for modification under Item II.A.

A complete application consists of this form and one of the following:
Form A, Form B, Form C, Form F, or Short Form C

For additional information contact: ChK 200
KPDES Branch (502) 564-3410

I. FACILITY LOCATION AND CONTACT INFORMATION	AGENCY USE	0	1	0	4	3	8	8

A. Name of business, municipality, company, etc. requesting permit: Vacuum Depositing LLC Inc.

B. Facility Name and Location	C. Facility Owner/Mailing Address
Facility Location Name: Vacuum Depositing LLC Inc.	Owner Name: Gary Osswald
Facility Location Address (i.e. street, road, etc.): 1294 Old Fern Valley Road	Mailing Street: 1294 Old Fern Valley Road
Facility Location City, State, Zip Code: Louisville, KY 40219	Mailing City, State, Zip Code: Louisville, KY 40219
	Telephone Number: (502) 969-4227

II. FACILITY DESCRIPTION

A. Provide a brief description of activities, products, etc:
Provide metallized film to customers. Maintain all equiptment in house. Building Maintenance.

B. Standard Industrial Classification (SIC) Code and Description

Principal SIC Code & Description:	SIC 3479		
Other SIC Codes:			

III. FACILITY LOCATION

A. Attach a U.S. Geological Survey 7 ½ minute quadrangle map for the site. (See instructions)

B. County where facility is located: Jefferson	City where facility is located (if applicable): Louisville
C. Body of water receiving discharge: Spring Ditch RMI 0.8 Topo # 14-35	
D. Facility Site Latitude (degrees, minutes, seconds): 38 9 21	Facility Site Longitude (degrees, minutes, seconds): 85 41 9

E. Method used to obtain latitude & longitude (see instructions):

F. Facility Dun and Bradstreet Number (DUNS #) (if applicable):

Revised June 1999

IV. OWNER/OPERATOR INFORMATION

A. Type of Ownership:
☐ Publicly Owned ☑ Privately Owned ☐ State Owned ☐ Both Public and Private Owned ☐ Federally owned

B. Operator Contact Information (See instructions)

Name of Treatment Plant Operator: N/A No treatment Plant	Telephone Number:
Operator Mailing Address (Street):	
Operator Mailing Address (City, State, Zip Code):	
Is the operator also the owner? Yes ☐ No ☐	Is the operator certified? If yes, list certification class and number below. Yes ☐ No ☐
Certification Class:	Certification Number:

V. EXISTING ENVIRONMENTAL PERMITS

Current NPDES Number:	Issue Date of Current Permit:	Expiration Date of Current Permit:
Number of Times Permit Reissued:	Date of Original Permit Issuance:	Sludge Disposal Permit Number:
Kentucky DOW Operational Permit #:	Kentucky DSMRE Permit Number(s):	

C. Which of the following additional environmental permit/registration categories will also apply to this facility?

CATEGORY	EXISTING PERMIT WITH NO.	PERMIT NEEDED WITH PLANNED APPLICATION DATE
Air Emission Source	4-01-C Air Pollution	
Solid or Special Waste	N/A	
Hazardous Waste - Registration or Permit	N/A	

VI. DISCHARGE MONITORING REPORTS (DMRs)

KPDES permit holders are required to submit DMRs to the Division of Water on a regular schedule (as defined by the KPDES permit). The information in this section serves to specifically identify the department, office or individual you designate as responsible for submitting DMR forms to the Division of Water.

A. Name of department, office or official submitting DMRs:	
B. Address where DMR forms are to be sent. (Complete only if address is different from mailing address in Section I.)	
DMR Mailing Name:	
DMR Mailing Street:	
DMR Mailing City, State, Zip Code:	
DMR Official Telephone Number:	

VII. APPLICATION FILING FEE

KPDES regulations require that a permit applicant pay an application filing fee equal to twenty percent of the permit base fee. Please examine the base and filing fees listed below and in the Form 1 instructions and enclose a check payable to "Kentucky State Treasurer" for the appropriate amount. Descriptions of the base fee amounts are given in the "General Instructions."

Facility Fee Category:	Filing Fee Enclosed:
Non-Process Industry ✓	$200.00

VIII. 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.

NAME AND OFFICIAL TITLE (type or print):	TELEPHONE NUMBER (area code and number):
David Bryant President	(502) 969-4227
SIGNATURE	DATE:
	06/20/07

KPDES FORM SC

KENTUCKY POLLUTANT DISCHARGE ELIMINATION SYSTEM

PERMIT APPLICATION

A complete application consists of this form and Form 1.
For additional information, contact: KPDES Branch, (502) 564-3410.

NAME OF FACILITY: Vacuum Depositing Inc

I. FACILITY DISCHARGE FREQUENCY	AGENCY USE							

A. Do discharge(s) occur all year? Yes ☐ No ☑
(Complete Item IX for intermittent discharges.)

B. How many days per week? 5 days

II. A. Give the basis of design for sizing of the wastewater facility (see instructions):
This water is only bleed down water on one cooling tower and one discharge point.

B. If new discharger, indicate anticipated discharge date:

C. Indicate the design capacity of the treatment system: MGD

III. Outfall Location (see instructions)

Outfall (list)	LATITUDE			LONGITUDE			RECEIVING WATER (name)
	Degrees	Minutes	Seconds	Degrees	Minutes	Seconds	
	As indicated on map						Spring Ditch
							RMI 0.8
							Topo map #14-35

Method used to obtain latitude/longitude
(i.e. GPS unit, USGS topographic map coordinates, etc.) USGS

IV. FLOWS, SOURCES OF POLLUTION, AND TREATMENT TECHNOLOGIES (see instructions)
If wastewater other than domestic or sanitary is listed, complete page 4 in addition to page 1 and 2.

OUTFALL NO. (list)	OPERATION(S) CONTRIBUTING FLOW		TREATMENT	
	Operation (list)	Avg/Design Flow (include units)	List treatment components	List Codes from Table SC-1
	The discharge consists of cooling tower blowdown water at 260 GPD. This discharge occurs 5 days a week at 45 min a day	1-unit 260 G		

V. Check the type(s) of wastewater discharged.

☐ Domestic (60% or more sanitary sewage) ☐ Oil field waste

☐ Noncontact cooling water ☐ Other (list):

VI. Does all water used at facility (except for human consumption) flow to a treatment plant? ☐ **Yes** ☐ **No**

VII. Discharge to other than surface waters. Check appropriate location:

☐ Publicly-owned lake or impoundment Name of lake:

☐ Publicly-owned treatment works (POTW). Name of POTW:

☐ Land application of Effluent

☐ Surface injection (Check term and identify on map) ☐ lateral field; ☐ sinkhole; ☐ sinking stream; ☐ deep well

☐ Closed Circuit (Check appropriate term) ☐ Holding tank; ☐ Mechanical evaporation; ☐ Waste impoundment

VIII. Check the metals present in the discharge if applicable and indicate the quantity discharged per year. (Indicate units).

☐	Antimony		☐	Copper		☐	Silver	
☐	Arsenic		☐	Lead		☐	Thallium	
☐	Beryllium		☐	Mercury		☐	Zinc	
☐	Cadmium		☐	Nickel		☐		
☐	Chromium		☐	Selenium		☐		

IX. INTERMITTENT DISCHARGES (Complete this section for intermittent discharges.)

A. Number of bypass points:		(If bypass points are indicated, information below must be completed for each bypass.)

Check when bypass occurs:	☐ Wet Weather	☐ Dry Weather
Give the number of bypass incidents	per year	per year
Give average duration of bypass	hours	hours
Give average volume per incident	1,000 gallons	1,000 gallons
Give reason why bypass occurs:		

B. Number of Overflow Points: (If discharge is from an overflow point, the information below must be completed.)

Check when overflow occurs:	☐ Wet Weather	☐ Dry Weather
Give the number of overflow incidents:	per year	per year
Give average duration of overflow:	hours	hours
Give average volume per incident:	1,000 gallons	1,000 gallons

C. Number of seasonal discharge points	
Give the number of times discharge occurs per year	
Give the average volume per discharge occurrence	(1,000 gallons)
Give the average duration of each discharge	(days)
List month(s) when the discharge occurs	

X. AREA SERVED (see instructions)

NAME	ACTUAL POPULATION SERVED
TOTAL POPULATION SERVED	

(PLEASE COMPLETE THIS PAGE IF OTHER THAN DOMESTIC WASTEWATER IS DISCHARGED)

XI. COOLING WATER ADDITIVES AND THEIR COMPOSITIONS

Additive	Composition	Concentration (mg/l)

XII. EFFLUENT CHARACTERISTICS

A. Indicate results of analysis for pollutants listed below.

POLLUTANT/PARAMETER	MAX DAILY VALUE	AVG DAILY VALUE	NUMBER OF SAMPLES
BOD_5			
TOTAL SUSPENDED SOLIDS			
FECAL COLIFORM			
TOTAL RESIDUAL CHLORINE			
OIL AND GREASE			
CHEMICAL OXYGEN DEMAND			
TOTAL ORGANIC CARBON			
AMMONIA			
DISCHARGE FLOW			
pH			
TEMPERATURE (WINTER)			
TEMPERATURE (SUMMER)			

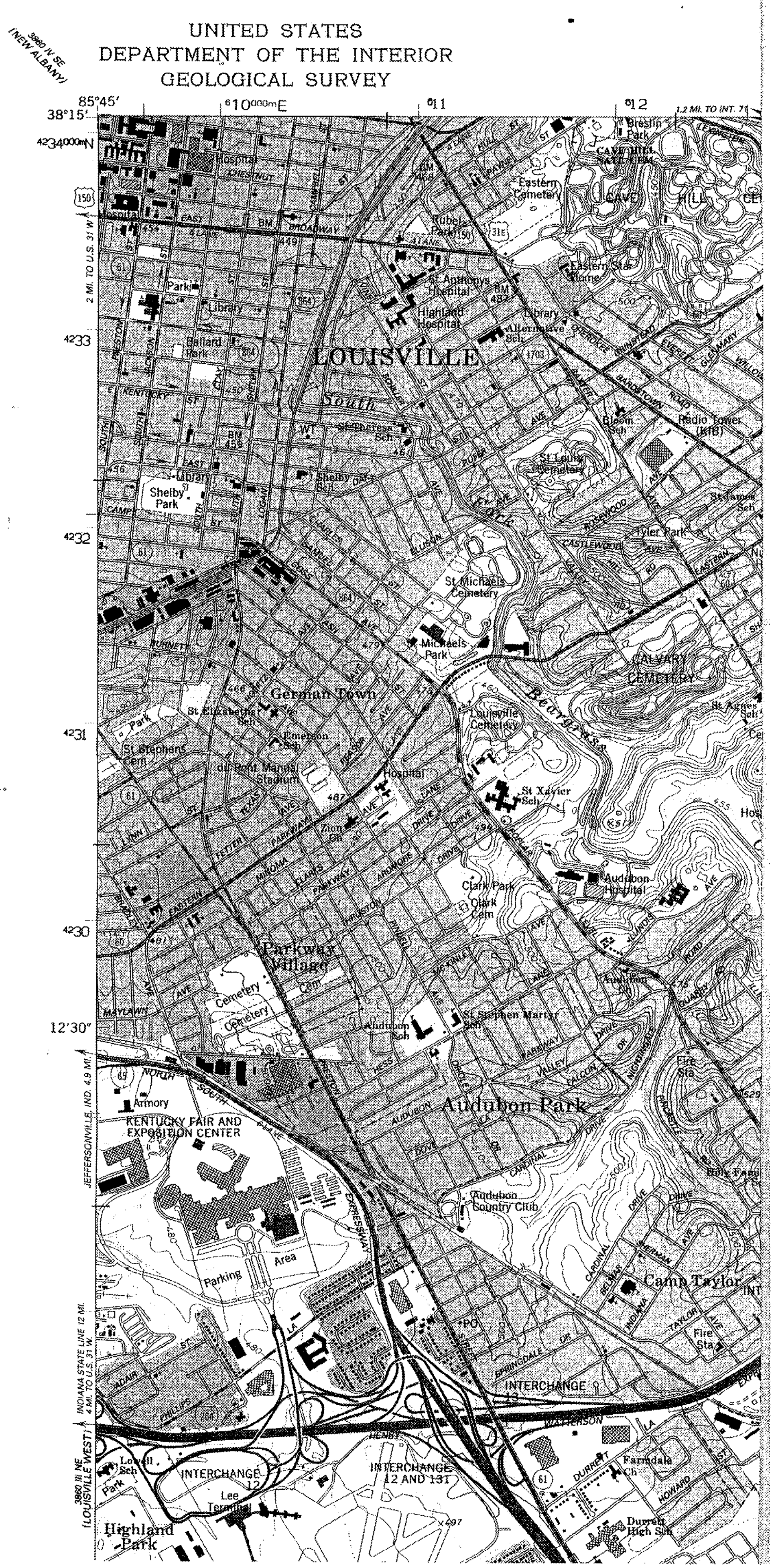
B. Frequency and duration of flow:	

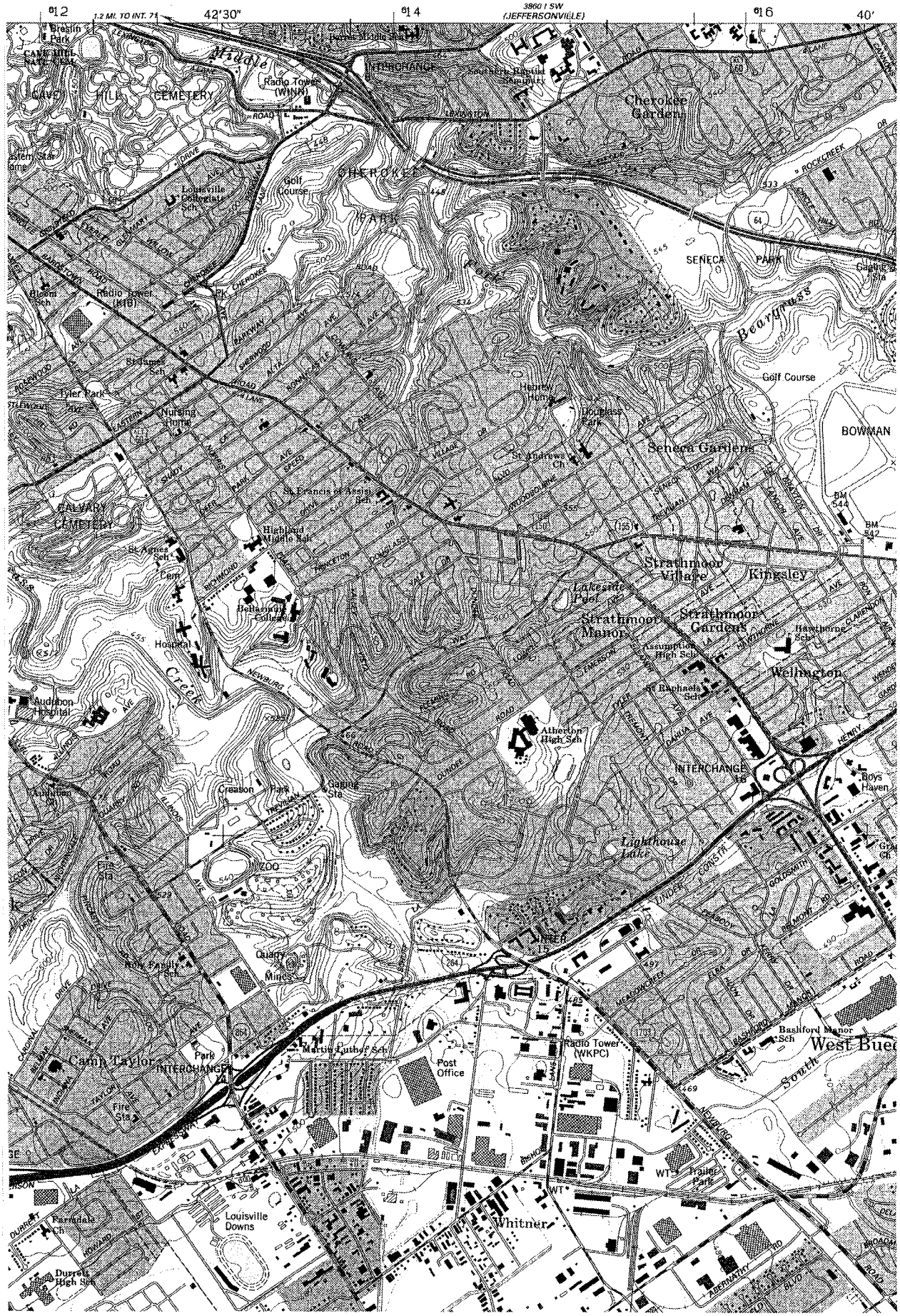
XIII. CERTIFICATION

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.

NAME AND OFFICIAL TITLE (type or print):	TELEPHONE NUMBER (area code and number):
David Bryant President	502 969 4227
SIGNATURE David Bryant	DATE 06/21/07

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

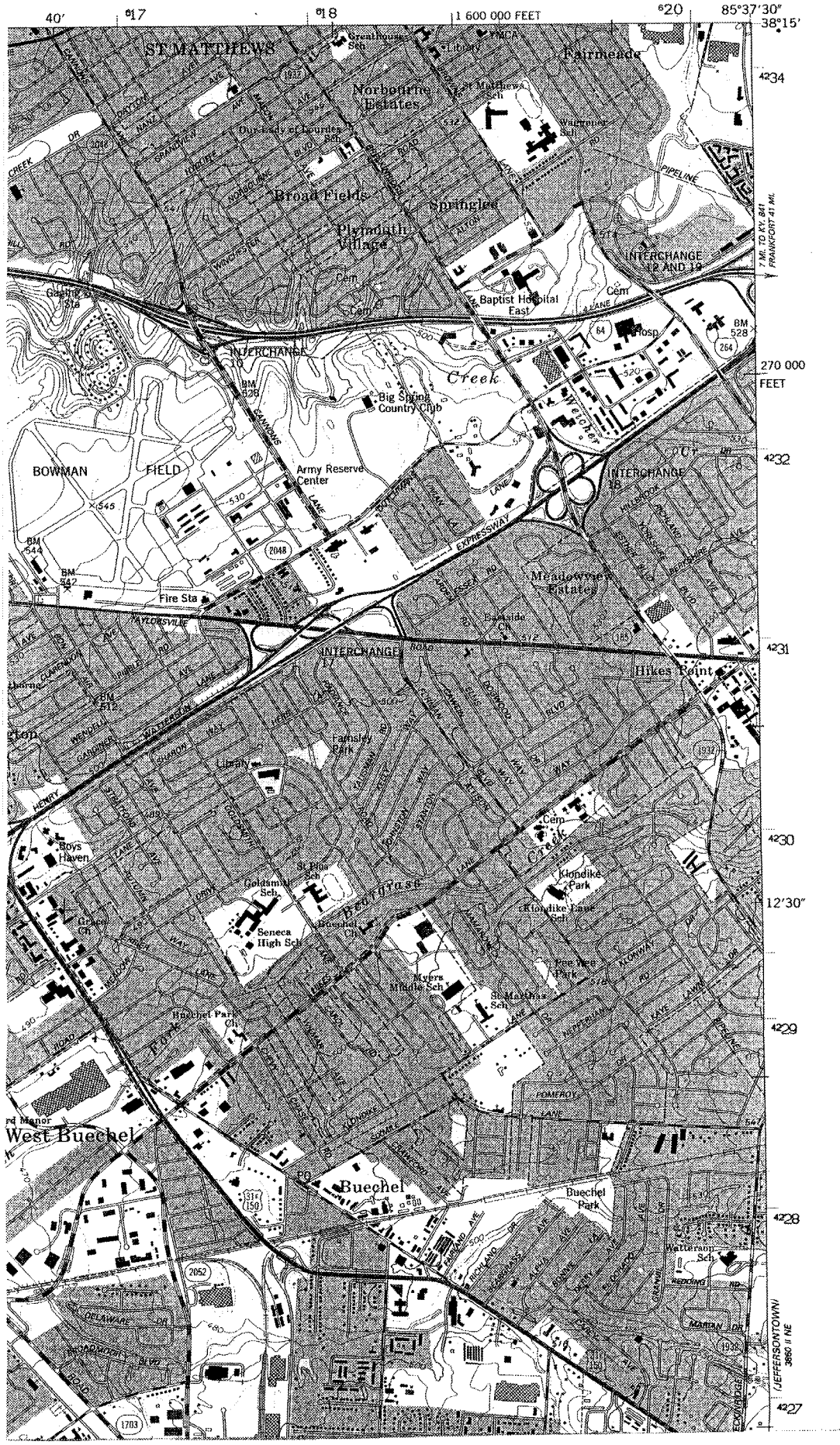


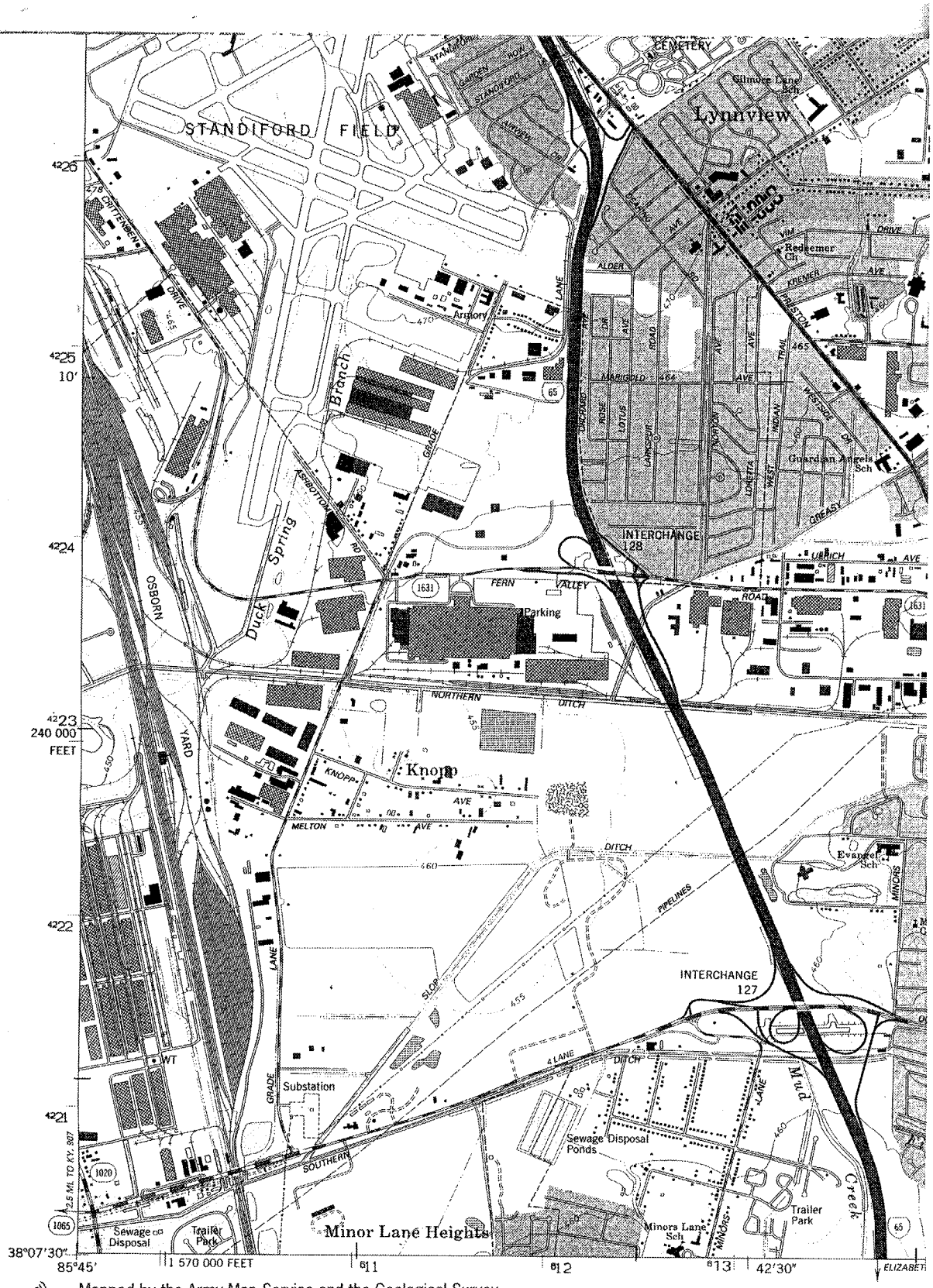


1.2 MI. TO INT. 71
42'30"
3860 I SW
(JEFFERSONVILLE)
40'
Cherokee Garden
CHEROKEE PARK
Golf Course
SENECA PARK
Beargrass
Golf Course
BOWMAN
Seneca Gardens
Strathmoor Village
Kingsley
Strathmoor Manor
Strathmoor Gardens
Wellington
Lakeside Pool
Lighthouse Lake
Atherton High Sch
Boys Haven
Creason Park
Gaging Sta
ZOO
Quarry
Mines
Camp Taylor
Park
Post Office
Radio Tower (WKPC)
Trailer Park
Whitner
Louisville Downs
Durrett High Sch
Farmdale Ch
Fire Sta
Audubon Hospital
Hospital
Nursing Home
Tyler Park
St James Sch
Radio Tower (KTB)
Louisville Collegiate Sch
Radio Tower (WINN)
CAVE HILL CEMETERY
Breslin Park
CALVARY CEMETERY
St Agnes Sch
Highland Middle Sch
St Francis of Assisi Sch
Bellarmine College
Hebrew Home
Douglass Park
St Andrews Ch
Assumption High Sch
St Raphaels Sch
Hawthorne Sch
Bashford Manor Sch
West Bue
Martin Luther Sch
Holy Family Sch
Creek
Middle

LOUISVILLE EAST QUADRANGLE
KENTUCKY–JEFFERSON CO.
7.5 MINUTE SERIES (TOPOGRAPHIC)

3860 I SE (ANCHORAGE)





(VALLEY STATION) 3880 III SE

Mapped by the Army Map Service and the Geological Survey
Revised by the United States Geological Survey

Control by USGS, NOS/NOAA, USCE, and the City of Louisville

Topography by photogrammetric methods from aerial photographs taken 1947. Field checked 1950. Revised from aerial photographs taken 1978. Field checked 1979. Map edited 1982

North American Datum of 1927 (NAD 27). Projection and 10 000-foot ticks: Kentucky coordinate system, north zone (Lambert conformal conic)
Blue 1000-meter Universal Transverse Mercator ticks, zone 16

North American Datum of 1983 (NAD 83) is shown by dashed corner ticks. The values of the shift between NAD 27 and NAD 83 for 7.5-minute intersections are obtainable from National Geodetic Survey NADCON software

Red tint indicates areas in which only landmark buildings are shown

MN GN
3° 53 MILS
0°49' 15 MILS

UTM GRID AND 1994 MAGNETIC NORTH DECLINATION AT CENTER OF SHEET

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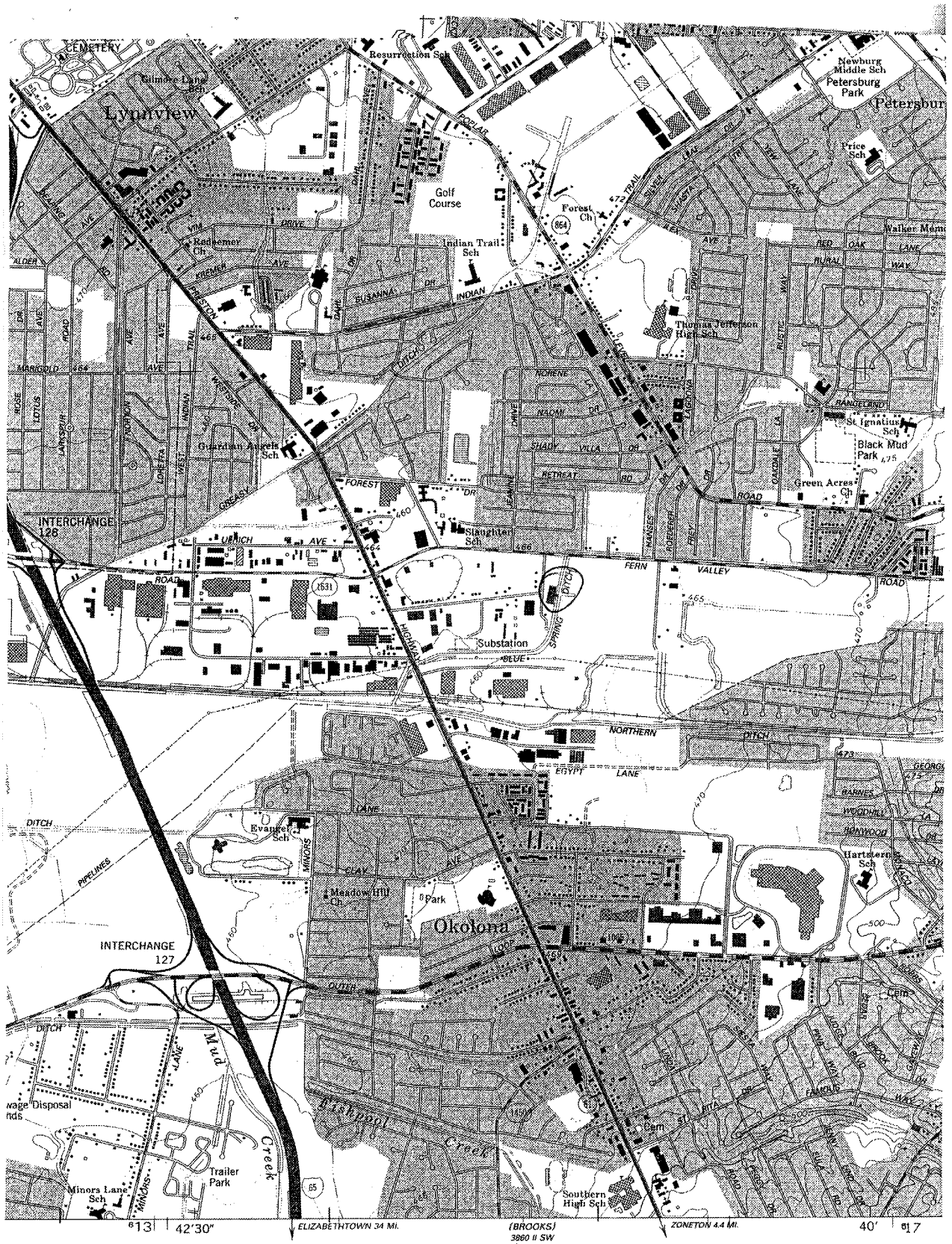
1000

COMPLI
FOR SALE BY U. S.
KE
AND KE
A FOLDER



SCALE 1:24 000

1 ½ 0 1 MILE

1000 0 1000 2000 3000 4000 5000 6000 7000 FEET

1 .5 0 1 KILOMETER

MN GN

3° 53 MILS 0°49' 15 MILS

UTM GRID AND 1994 MAGNETIC NORTH DECLINATION AT CENTER OF SHEET

CONTOUR INTERVAL 10 FEET
DOTTED LINES REPRESENT 5-FOOT CONTOURS
NATIONAL GEODETIC VERTICAL DATUM OF 1929

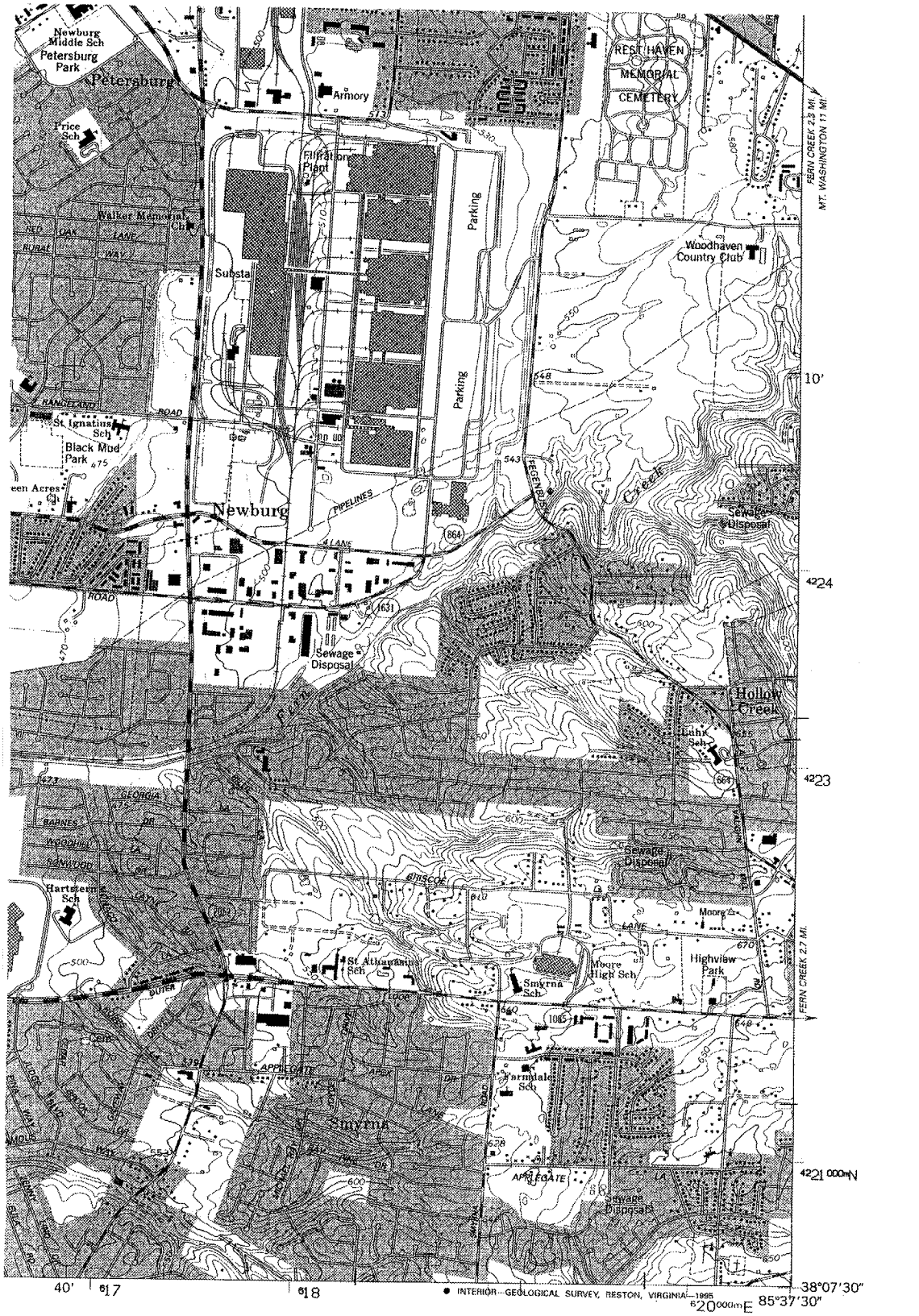
COMPLIES WITH U.S. GEOLOGICAL SURVEY STANDARDS FOR SPATIAL ACCURACY-CLASS 2

FOR SALE BY U. S. GEOLOGICAL SURVEY, DENVER, COLORADO 80225 OR RESTON, VIRGINIA 22092,
KENTUCKY GEOLOGICAL SURVEY, LEXINGTON, KENTUCKY 40506,
AND KENTUCKY DEPARTMENT OF COMMERCE, FRANKFORT, KENTUCKY 40601
A FOLDER DESCRIBING TOPOGRAPHIC MAPS AND SYMBOLS IS AVAILABLE ON REQUEST

Revisions
State of K
taken 199
field check

Informatio
standards

Purple tint



● INTERIOR—GEOLOGICAL SURVEY, RESTON, VIRGINIA—1995

1 MILE

ROAD CLASSIFICATION

Primary highway, hard surface

Light-duty road, hard or improved surface

Secondary highway, hard surface

Unimproved road

Interstate Route

U. S. Route

State Route

QUADRANGLE LOCATION

2092,

Revisions shown in purple compiled in cooperation with State of Kentucky agencies from aerial photographs taken 1991 and other sources. This information not field checked. Map edited 1994

Information shown in purple may not meet USGS content standards and may conflict with previously mapped contours

Purple tint indicates extension of urban areas

LOUISVILLE EAST, KY.

38085-B6-TF-024

1982

REVISED 1994

DMA 3860 II NW-SERIES V853

ERNIE FLETCHER
GOVERNOR

ENVIRONMENTAL AND PUBLIC PROTECTION CABINET
DEPARTMENT FOR ENVIRONMENTAL PROTECTION
DIVISION OF WATER
14 REILLY ROAD
FRANKFORT, KENTUCKY 40601
www.kentucky.gov

TERESA J. HILL
SECRETARY

May 31, 2007

JUN 25 2007
SECOND NOTICE

Mr. Gary Osswald
Vacuum Depositing, Incorporated
1294 Old Fern Valley Road
Louisville, Kentucky 40219

RE: KPDES No. KY0104388
Vacuum Depositing, Incorporated
Jefferson County, Kentucky

Dear Mr. Osswald:

Our records indicate that your Kentucky Pollutant Discharge Elimination System (KPDES) permit is due to expire on December 31, 2007. According to the KPDES Regulation 401 KAR 5:060, "any person with a currently effective permit shall submit a new application at least 180 days before the expiration of the existing permit..." **The due date for your permit renewal application is July 5, 2007.**

Please complete the enclosed application forms and return to the KPDES Branch, Division of Water, at the above address by the indicated due date. Applications received after the due date are in violation of 401 KAR 5:060, Section 1, which could result in enforcement action being taken.

If you have any questions regarding the completion of these forms, please contact me at (502) 564-8158, extension 470, or Ann Workman at extension 528.

Sincerely,

Vickie L. Prather

Vickie L. Prather, Acting Supervisor
Inventory and Data Management Section
KPDES Branch
Division of Water

VLP:ASW:asw

Enclosures

C: Louisville Regional Office
Division of Water Files

ERNIE FLETCHER
GOVERNOR

ENVIRONMENTAL AND PUBLIC PROTECTION CABINET
DEPARTMENT FOR ENVIRONMENTAL PROTECTION
DIVISION OF WATER
14 REILLY ROAD
FRANKFORT, KENTUCKY 40601-1190
www.kentucky.gov

TERESA J. HILL
SECRETARY

July 12, 2007

David Bryant, President
1294 Old Fern Valley Road
Louisville, Kentucky 40219

Re: Complete KPDES Permit Application
KPDES No.: KY0104388
AI ID: 5463
Vacuum Depositing LLC, Inc.
Jefferson County, Kentucky

Dear Mr. Bryant:

Your Kentucky Pollutant Discharge Elimination System (KPDES) permit application for the above-referenced facility was received by the Division of Water on July 5, 2007, and has been determined complete. As per 401 KAR 5:075, Section 1(7), the official effective date of your application has been determined as July 12, 2007, the date of this notice.

A technical review of your permit application will commence in the near future. Please be aware that you may be asked to provide additional information to clarify, modify, or supplement your application material. A request for this additional information will not render your application incomplete.

If you have any questions concerning this matter, please contact Larry Sowder at (502) 564-8158, extension 472.

Sincerely,

Nancy Green

Nancy Green, Program Coordinator
Inventory and Data Management Section
KPDES Branch
Division of Water

NG:ng
c: Division of Water Files