

Department of Environmental Quality
VIRGINIA POLLUTION ABATEMENT PERMIT APPLICATION
FORM A

INSTRUCTIONS

All applications submitted for a Virginia Pollution Abatement (VPA) Permit shall include this form.

1. **FACILITY NAME AND ADDRESS:** Provide the name of the facility managing the pollutant. Both the mailing address, county, and physical location should be included.
2. **OWNER:** Provide the legal name, mailing address, telephone number and e-mail address of the owner or the company making application for the VPA Permit.
3. **OWNER CONTACT:** Provide the name, title, mailing address, telephone number and e-mail address of the individual whom DEQ staff should contact regarding this application. If the same as the owner, write SAME.
4. **EXISTING PERMITS:** List all environmentally-related permits issued to the facility by listing the issuing agency and permit number. Include an existing VPA permit if your facility has one.
5. **NATURE OF BUSINESS:** Provide a general statement of the type of business conducted at the facility. Industrial facilities are requested to provide applicable Standard Industrial Classification (SIC) Codes. SIC Codes may be obtained from Standard Industrial Classification Manual published by the U.S. Department of Labor, Occupational Safety and Health Administration. The manual can be found in public libraries and on the internet.
6. **TYPE OF WASTE:** Indicate pollutants or type of waste(s) handled and whether the facilities are either existing or proposed, or both. Note that the pollutant or type of waste determines which other VPA application forms must be completed.
7. **GENERAL LOCATION MAP:** The purpose of the map is to allow the DEQ staff to readily find the establishment. This map is to show the general location of the establishment. Applicants should use county or United States Geological Survey quadrangle maps. DEQ Regional Offices can provide information for obtaining such maps.
8. The application must be signed in accordance with the VPA Permit Regulation (9VAC25-32):
 - a. **FOR A CORPORATION:** by a responsible corporate official. For purposes of this section, a responsible corporate official means (1) 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 decision making functions for the corporation, or (2) the manager of one or more manufacturing, production, or operating facilities employing more than 250 persons or having gross annual sales or expenditures exceeding \$25,000,000 (in second-quarter 1980 dollars), if authority to sign documents has been assigned or delegated to the manager in accordance with corporate procedures.
 - b. **FOR A MUNICIPALITY, STATE, FEDERAL OR OTHER PUBLIC AGENCY,** by either a principal executive officer or ranking elected official. (A principal executive officer of a Federal, Municipal, or State agency includes the chief executive officer of the agency or head executive officer having responsibility for the overall operation of a principal geographic unit of the agency).
 - c. **FOR A PARTNERSHIP OR SOLE PROPRIETORSHIP,** by a general partner or the proprietor, respectively.

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1. Facility	Name	
	County/City	
	Address	
2. Owner	Legal Name	
	Mailing Address	
	Telephone Number	
	Email address	
3. Owner Contact	Name	
	Title	
	Mailing Address	
	Telephone Number	
	Email address	

4. Existing permits (e.g., VPA, VPDES; VWP, RCRA; UIC); other:

Agency	Permit Type	Permit Number

5. Nature of Business: _____

SIC Code(s):			
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6. Type of Waste:

(check box as appropriate)

Proposed

Existing

Animal Waste (complete Form B)

Industrial Waste (complete Form C)

Land Application of Municipal Effluent
(complete Form D, Part I)

Land Application of Biosolids/Sewage Sludge
(complete Form D, Part II)

Reclamation and/or Distribution of Reclaimed
Wastewater (Application Addendum)

7. General Location Map:

Provide a general location map which clearly identifies the location of the facility

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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 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. I further certify that I am an authorized signatory as specified in the VPA Permit Regulation (9VAC25-32).

Signature:		Date:
Printed Name:		
Title:		