



FORM B
MAJOR MODIFICATIONS
Under South Carolina NPDES General Permit
For Stormwater Discharges From Construction
Activities SCR100000
(Maintain As Part of On-Site SWPPP)



FLORENCE COUNTY
MS4

Date: ___/___/___

Project/Site Name: (as identified on prior approved NOI): _____ County: _____

File Number or NPDES Permit (Coverage) Number: (as identified on prior approved NOI): _____

Major Modifications allowed by the Department are listed in Section 3.1.7 of the Construction General Permit. Complete this Form, Fee Schedule C, and applicable sections of Form 2617 (Notice of Intent for Coverage(s) of Primary Permittees) as defined below. Please note that each modification request requires review of Section V (Waterbody Information) of the prior approved NOI to determine and identify if information in this section has changed. Fee Schedule C (page 2), a Narrative describing proposed modifications, and revised SWPPP documentation must also be provided with the major modification request.

Check (✓) each item (A-D) included in this modification package for your project or site

[] A. REVIEW OF PRIOR APPROVED WATERBODY INFORMATION & DISTURBED AREA (Sections V and IV.F)

• SECTION V (WATERBODY INFORMATION REVIEW): Review Section V (Waterbody Information) of your most recent approved Notice of Intent (NOI) application. Identify if the waterbody information has changed since the last approval and initial the applicable certification statement below.

Has any of this information changed since the prior approval? [] Yes [] No

If the information in this section has changed, you are required to complete Sections I.A, I.B (if MS4), III (as applicable), IV.F, V, and VI of the Notice of Intent (Form 2617) and attach it to this form with the other modification request documents. Identify Section V as "Change of Information" on the new form and initial the applicable certification below. If no change is required to this section, initial the applicable certification below.

Section V Certification (Please initial applicable statement)

_____ "I hereby certify that I have reviewed the prior approved Waterbody Information (Section V) for this project/site and no changes are required."

_____ "I hereby certify that I have reviewed the prior approved Waterbody Information (Section V) for this project/site and changes are as identified on the attached NOI (Form 2617)."

• SECTION IV.F (MODIFICATION TO DISTURBED AREA): (nearest tenth of an acre): Review the change to disturbed area as a result of this modification. If the disturbed area decreases or remains the same, a copy of the most recent prior approved NOI may be submitted with this Form. If the disturbed area increases changes, complete Sections I.A, I.B (if MS4), III (as applicable), IV.F, V, and VI of NOI Form 2617 and attach it to this form.

- [] B. FEE SCHEDULE C: Complete the fee schedule on page 2 of this form.
[] C. NARRATIVE: Attach a detailed Narrative description of proposed Major Modifications.
[] D. C-SWPPP REVISIONS: Attach revised Stormwater Pollution Prevention Plan documentation supporting the proposed modification(s) (i.e., project plans, calculations, justification for disturbed area increases, etc.).

E. SIGNATURES AND CERTIFICATIONS: DO NOT SIGN IN BLACK INK! Read the Certifications below (in entirety). Provide date, printed name, and signatures below.

MODIFIED C-SWPPP PREPARER: "One copy of the modified C-SWPPP, all specifications and supporting calculations, forms, and reports are herewith submitted and made a part of this application. I have placed my signature and seal on the design documents submitted signifying that I accept responsibility for the design of the system. Further, I certify to the best of my knowledge and belief that the design is consistent with the requirements of Title 48, Chapter 14 of the Code of Laws of SC, 1976 as amended, pursuant to Regulation 72-300 et seq. (if applicable), and in accordance with the terms and conditions of SCR100000." (This should be the person identified in Section III of the NOI).

Printed Name _____ Signature _____ Date Signed _____

PRIMARY PERMITTEE: "I or I (on behalf of my company and its contractors and agents), as the case may be, 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 understand that DHEC enforcement actions may be taken if the terms and conditions of the C-SWPPP are not met and I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."

Printed Name _____ Signature _____ Date Signed _____

NPDES CGP FEE SCHEDULE C

(This schedule should **ONLY** be used Major Modification Reviews and may be used for ALL counties)
 This schedule should **not** be used for projects reviewed by a delegated entity or MS4 operator.

See Section 3.1.7 (Modifications) of the Construction General Permit (CGP) for additional information and guidance. Modification requests are approved by the Department on a case-by-case basis. The BOW reserves the right to require a modification request be treated as a new project, where appropriate. You may consult the SCDHEC Stormwater Division at 803-898-4300 prior to submittal to determine if your proposed changes may be processed as a modification or will require a new project submittal.

If you are completing the fillable version of this form and if the **County** and **Disturbed Area** fields are correctly filled out on page 2 of this form, the fees in the right hand column will be automatically entered based on your answers to the questions below. The schedule should be attached to DHEC Form 2617. Do not send payment in window envelope. **DO NOT MAIL CASH**. DHEC will notify the Project Owner/Operator if the submitted check or credit card payment cannot be processed or if fee requirements are different than indicated on this schedule. **A \$100 NPDES plan review fee and \$100 per disturbed acre increase fee (not to exceed \$2000 for the entire project/site) is required with each modification request for projects NOT exempt from this fee per 72-300 et. seq.**

1. Identify the Major Modification(s) and Required Modification Fee See Section 3.1.7 of the CGP and page 3 of this form for additional information and a list of Department allowed major modifications.	Permit Modification Fee
If the modification is allowed under SCR100000, enter \$200.00 in the right-hand column). Proceed to Item 2.	\$ _____.00

2. Determine the Additional Project Review Fees [\(Review fees cannot exceed \\$2000 for a project\).](#)
 (Identify any additional disturbed area (nearest tenth of an acre) required for this modification in the center column and review fees (based on \$100/disturbed acre) in the right-hand column). [Proceed to Item 2.a below.](#)

a. Prior (Current) Disturbed Area = _____ (nearest tenth of an acre)
 1. Enter the current total disturbed area for this project (**prior to this modification**). [Proceed to Item 2.a.2.](#)
 2. If the total entered in Item 2.a is **equal to or greater than 20.0 acres**, **no Review Fees are required**. [Proceed to Item 2.d.](#)
 If the total is **less than 20.0 acres**, proceed to Item 2.b.

b. Increase in Disturbed Area = _____ (nearest tenth of an acre)
 1. If the disturbed area for this project will increase with this modification application, enter the additional or increase in disturbed area (Item IV.F). If no increase, enter 0.0 acres. [Proceed to Item 2.c.](#) (NOTE: Additional disturbed area should typically be no greater than 1-2 acres. Requests for more than this amount must be accompanied with a detailed justification for the proposed increase amount)

c. Total Disturbed Area = _____ (nearest tenth of an acre) Add the disturbed areas in Items 2.a. and 2.b. Complete either 2.c.1 below or 2.c.2 below.	Disturbed Area (Nearest tenth of an acre)	Additional Disturbed Area Fees
1. If the Total (Item 2.c) is less than or equal to 20.0 acres, enter the increase in disturbed area (Item 2.b) in the center column. Multiply the increase by \$100/disturbed area and enter this fee in the right-hand column). Proceed to Item 2.d.	(Increase) (2.b)	\$ _____.00
2. If the Total (Item 2.c) is greater than 20.0 acres, subtract the current disturbed area entered in Item 2.a from 20.0 acres and enter ONLY the (absolute numeric) difference in the center column. Difference: (20.0 acres - _____ (Item 2.a) acres = _____ (nearest tenth of an acre) Multiply this difference by \$100/disturbed area and enter this fee in the right-hand column. Proceed to Item 2.d.	(Difference) (2.b.2)	\$ _____.00

d. Total Required Fees (Modification Project)
 If Item 2.a is equal to or greater than 20.0 acres, enter fee from Item 1 in the right-hand column. Otherwise, add the values in the right-hand columns of Items 1 and Item 2.c.1 or 2.c.2 and enter this sum in the right-hand column. (The Department will not review this project until all required fees are received). [Proceed to Item 3.](#)

\$ _____.00

3. Identify the Method of Payment:

Payment by Check:

Attach a **signed and dated check payable to Florence County** to the **front** of this Fee Schedule. Please note that all checks must be **less than 30 days old** and must be for the **entire required fees**.

Payment by Credit Card: [\(Check here if you wish to pay via credit card using the on-line payment system\).](#)

The Department will contact you to obtain the credit card's information.

Please provide an e-mail address where the invoice number may be sent: _____

For official use only: Invoice Number _____