



Application

For Certification Under the Clean Water Act Section 401 for a Water Quality Certification to a Federal Permit (Not for Use with a CWA404 Permit)

Project Name: _____

Federal Agency Name: _____

The application including maps/drawings and signatures may be submitted electronically. Please direct all emails to:

Rosi Sherrill LS7@azdeq.gov (602) 771-4409
Christopher Henninger CPH@azdeq.gov (602) 771-4508

If mailing the application, please mail to the following address:

Arizona Department of Environmental Quality
Surface Water Section, 401 Certification, 5415A-1
Attn.: Rosi Sherrill and Christopher Henninger
1110 West Washington, Phoenix, Arizona 85007

Project Site Location Information

Street Address (If available. For projects encompassing multiple addresses, either "n/a" or on-site office address acceptable.):

City/town (indicate if near rather than within municipal boundaries): _____

County: _____ Site Zip code: _____ Site telephone (if available): _____

Approximate Center of Project (In degrees, minutes, seconds):

Latitude: _____ ° _____ ' _____ " Longitude: _____ ° _____ ' _____ "

Directions to project location (from nearest intersection of major streets/highways). Include maps or drawings displaying location relative to state boundaries and nearby cities, highways, waterbodies, etc.

Impacted and downstream waterbody(ies) (from Water Quality Standards for Surface Waters [18 A.A.C. 11, Article 1], otherwise use “unnamed” or “unnamed tributary to”).

Flow regime (ephemeral, intermittent or perennial): _____

Name of downstream waterbody(ies): _____

Name of watershed (from 18 A.A.C. 11, Article 1): _____

Area Of Disturbance (label units; e.g., acres, linear feet, square feet, square miles, etc.)

1. The total jurisdictional waters within the project boundaries: _____

2. The impacted jurisdictional waters: _____

3. The project size: _____

Attach the following maps or drawings (either 8½ x 11” or 11 x 17” in size):

- U.S.G.S. 7.5 min. topographic map or other contour map of project area
 - Map delineating the ordinary high water mark of jurisdictional waters affected by activity to be certified
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Project Description/Purpose:

Describe work to be performed (e.g., pad fill, utility crossings, bridges, channel modification, detention pond, etc.), including fill material to be used, armor material, structure material and revegetation / reclamation plan.

Describe the measures to be taken in order to control the discharge of pollutants into waters of the U.S. (WUS).

These measures may be procedural or physical in nature, temporary or permanent and must be functional prior to beginning any construction activity other than the creation of the measures themselves.

If, in lieu of entering the information here, a reference is made to another document; e.g., Stormwater Pollution Prevention Plan, the applicable portions of the referenced document must be included with this application.

Applicant Information (Complete all that apply. Use "N/A" for not applicable):

Project Name: Rosemont Copper Project Mitigation

Applicant Name: Katherine Ann Arnold Title: Director, Environment

Company, Agency, etc.: Rosemont Copper Company

Phone Number: 520-495-3502 email address: kathy.arnold@hudsonbay.com

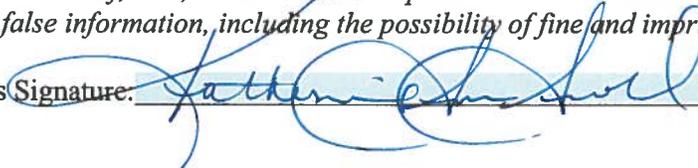
Mailing Address: 5255 E. Williams Circle, Suite 1065

City: Tucson State: AZ Zip Code: 85711

I have reviewed the Arizona Water Quality Standards for Surface Waters (18 A.A.C. 11, Article 1) (available through www.azdeq.gov).

Application is hereby made for Arizona certification under CWA section 401 for the above-named project. I certify that I am familiar with the information contained or referenced in this application and that the information is true, accurate and complete.

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 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.

Applicant's Signature:  Date: 25 Sep 2017

Agent Information (if applicable):

I hereby authorize (agent) _____ to act in my behalf in the processing of this application and to furnish any supplemental information in support of this application. I understand that I am bound by the actions of my agent.

Applicant's Signature: _____ Date: _____

Applicant Name: _____ Title: _____

Company, Agency, etc.: _____

Phone Number: _____ email address: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Agent's Signature: _____ Date: _____

Property Owner (if not applicant):

Name: _____

Phone Number: _____ email address: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Property Owner's Signature: _____ Date: _____