

APPENDIX 10
INDIVIDUAL STORMWATER PERMIT
APPLICATION (NY-2C)

State Pollutant Discharge Elimination System (SPDES)
INDUSTRIAL APPLICATION FORM NY-2C
 For New Permits and Permit Modifications to Discharge Industrial Wastewater and Storm Water
Section I - Permittee and Facility Information

Please type or print the requested information.

1. Current Permit Information (leave blank if for new discharge)

SPDES Number: NY-027 0679	DEC Number: 0-9999-00096/00005
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2. Permit Action Requested: (Check applicable box)

A **NEW** proposed discharge
 An **EBPS INFORMATION REQUEST** response
 A **RENEWAL** of an existing SPDES permit
 A **MODIFICATION** of the existing permit
 An **EXISTING** discharge currently without permit

Does this request include an increase in the quantity of water discharged from your facility to the waters of the State?

YES - Describe the increase:
 NO - Go to Item 3. below.

3. Permittee Name and Address

Name Crossroads Ventures, LLC		Attention Mr. Dean Gitter, President	
Street Address 72 Andrews Lane Road, PO Box 267			
City or Village Mt. Tremper	State NY	ZIP Code 12457	

4. Facility Name, Address and Location

Name Belleayre Resort At Catskill			
Street Address NYS Route 28		P.O. Box	
City or Village	State NY	ZIP Code 12441	
Town Shandaken	County Ulster and Delaware		
Telephone 845-688-7740	FAX 845-688-6887	NYTM - E 539842	NYTM - N 4666255
Tax Map Info (New York City, Nassau County and Suffolk County only)			
Section	Block	Subblock	Lot

5. Facility Contact Person

Name Dean Gitter, Crossroads Ventures, LLC		Title President	
Street Address 72 Andrews Lane Road		P.O. Box 267	
City or Village Mt. Tremper	State NY	ZIP Code 12457	
Telephone 845-688-7740	FAX 845-688-6887	E-Mail or Internet	

6. Discharge Monitoring Report (DMR) Mailing Address

Mailing Name Crossroads Ventures, LLC			
Street Address 72 Andrews Lane Road, PO Box 267		P.O. Box 267	
City or Village Mt. Tremper	State NY	ZIP Code 12457	
Telephone 845-688-7740	FAX 845-688-6887	E-Mail or Internet	
Name and Title of person responsible for signing DMRs Dean Gitter, Managing Member		Signature <i>Dean L. Gitter</i>	

**INDUSTRIAL APPLICATION FORM NY-2C
Section I - Permittee and Facility Information**

Facility Name: Belleayre Resort At Catskill	SPDES Number: NY-027-0679
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7. Summarize the outfalls present at the facility:

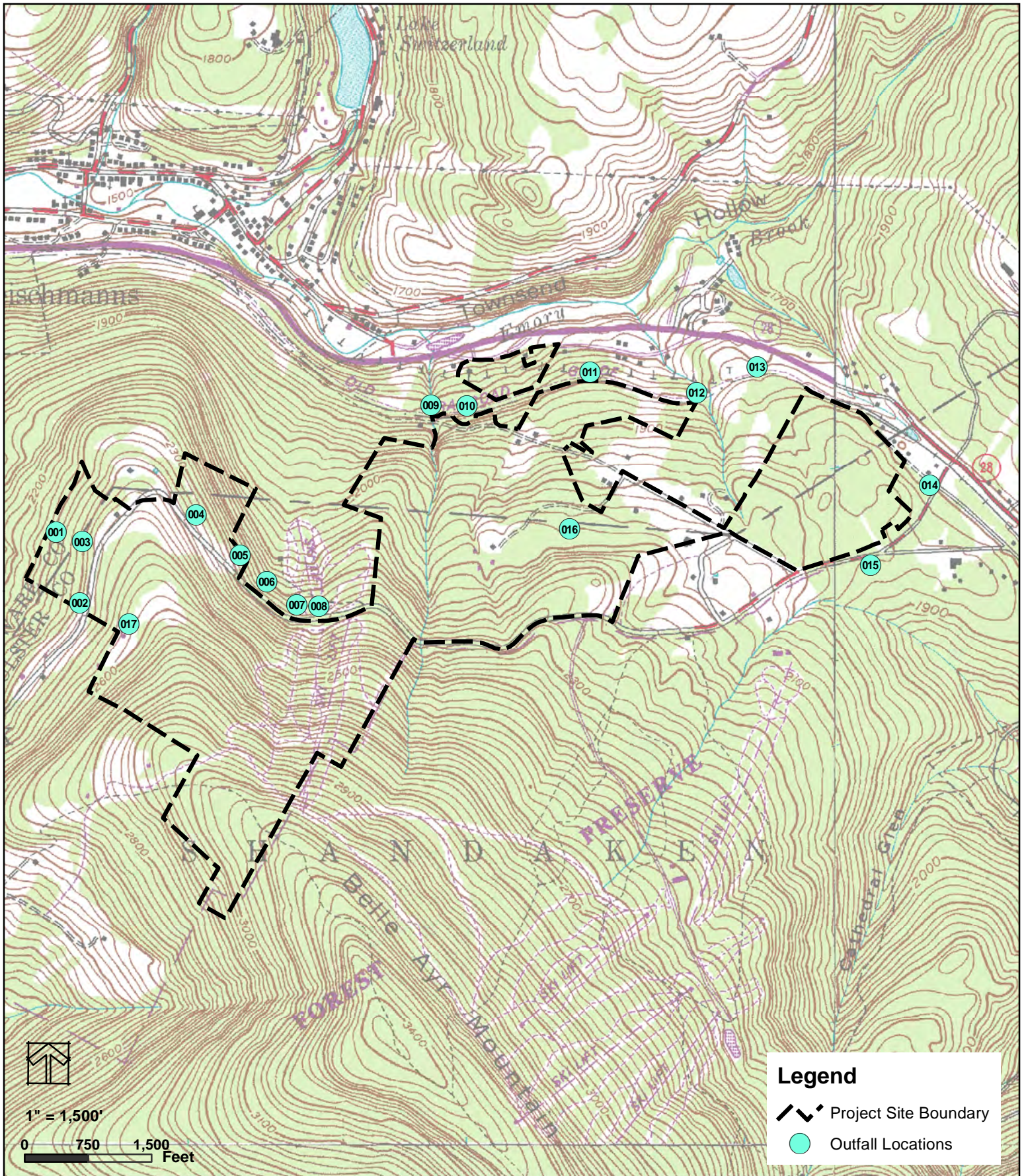
Outfall Number	Receiving Water	Type of discharge
001-003	Todd Mountain Brook	Stormwater
004-008 and 011	Emory Brook	Stormwater
009-010, 012-014	Unnamed Tributary to Emory Brook	Stormwater
015	Crystal Spring Brook	Stormwater
016	Unnamed Tributary to Emory Brook	Stormwater from concrete plant and rock crushing Wildacres
017	Todd Mountain Brook	Stormwater from rock crushing Highmount

8. Map of Facility and Discharge Locations:

Provide a detailed map showing the location of the facility, all buildings or structures present, wastewater discharge systems, outfall locations into receiving waters, nearby surface water bodies, water supply wells, and groundwater monitoring wells, and attach it to this application. Also submit proof, either by indication on the map or other documentation, that a right of way for the discharges exists from the facility property to a public right of way.

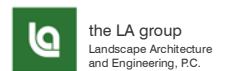
9. Water Flow Diagram:

See Provided Diagram (four pages)



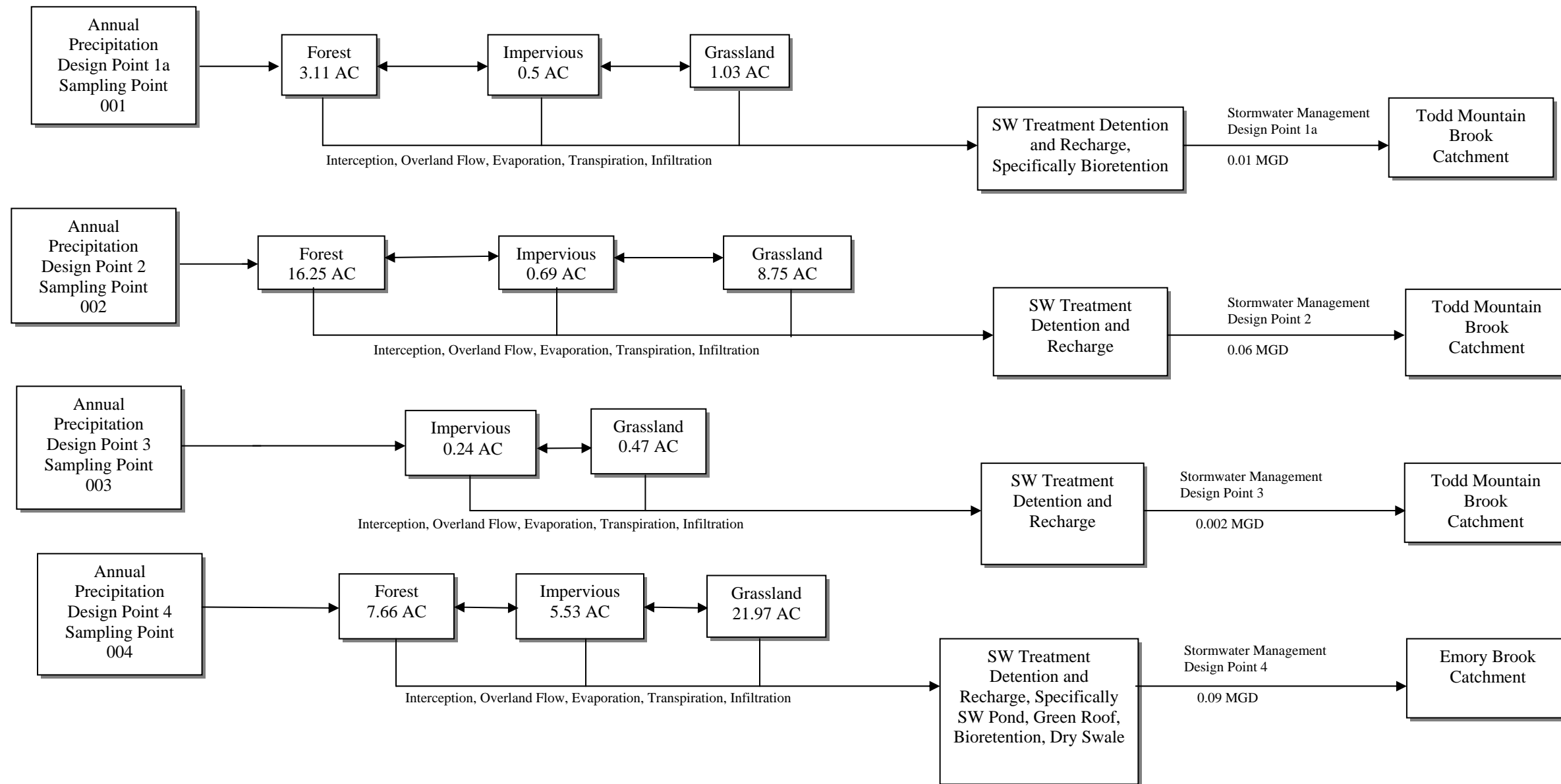
The Modified Belleayre Resort at Catskill Park
 Wildacres Resort & The Highmount Spa Resort
 Towns of Shandaken & Town of Middletown, New York
 Title
Outfall Locations Map

PREPARED FOR:
 Crossroads Ventures, L.L.C.
 P.O. Box 267
 Mt. Tremper, NY 12457

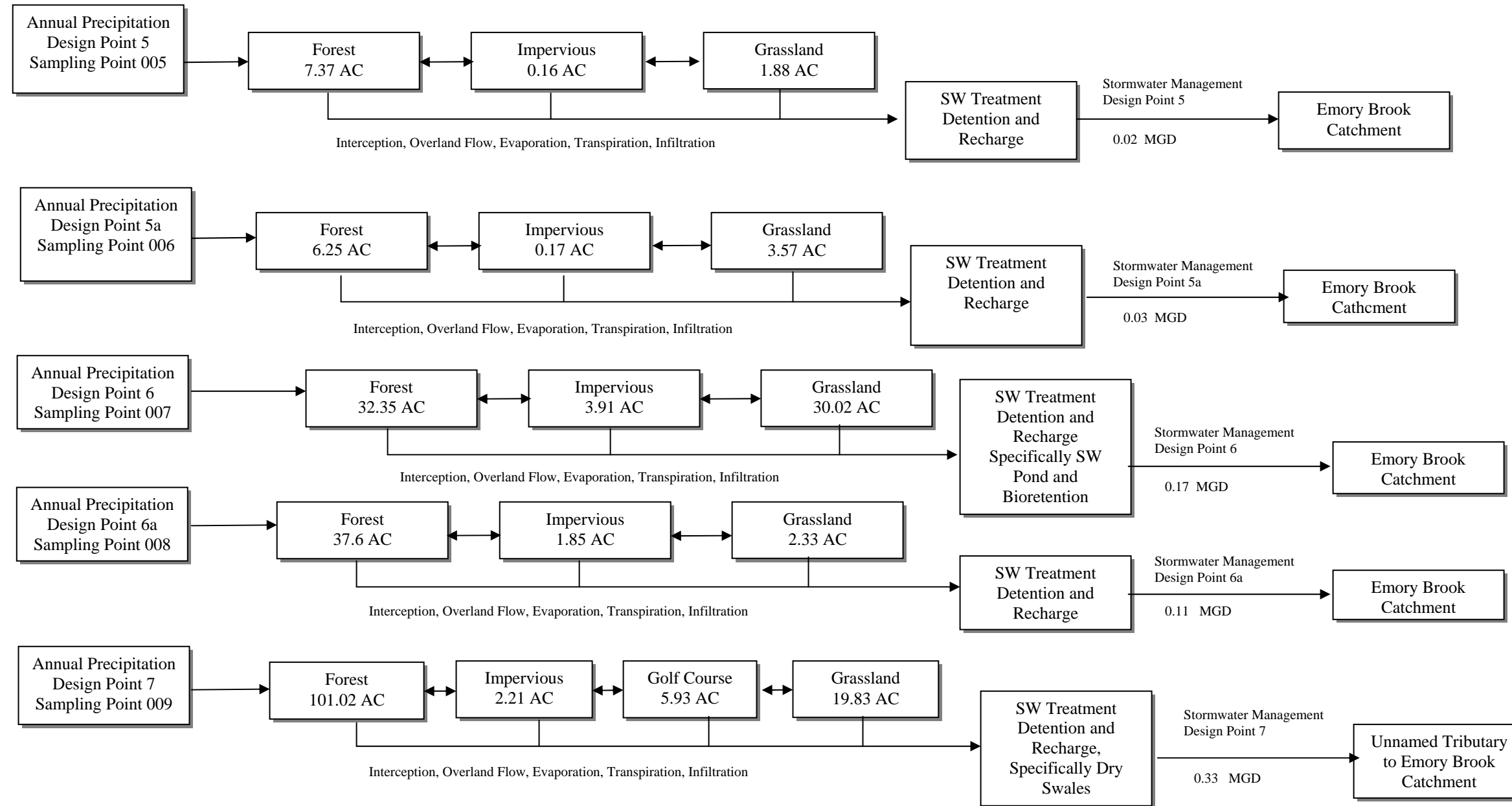


Project 07074
 Date 03/29/2011

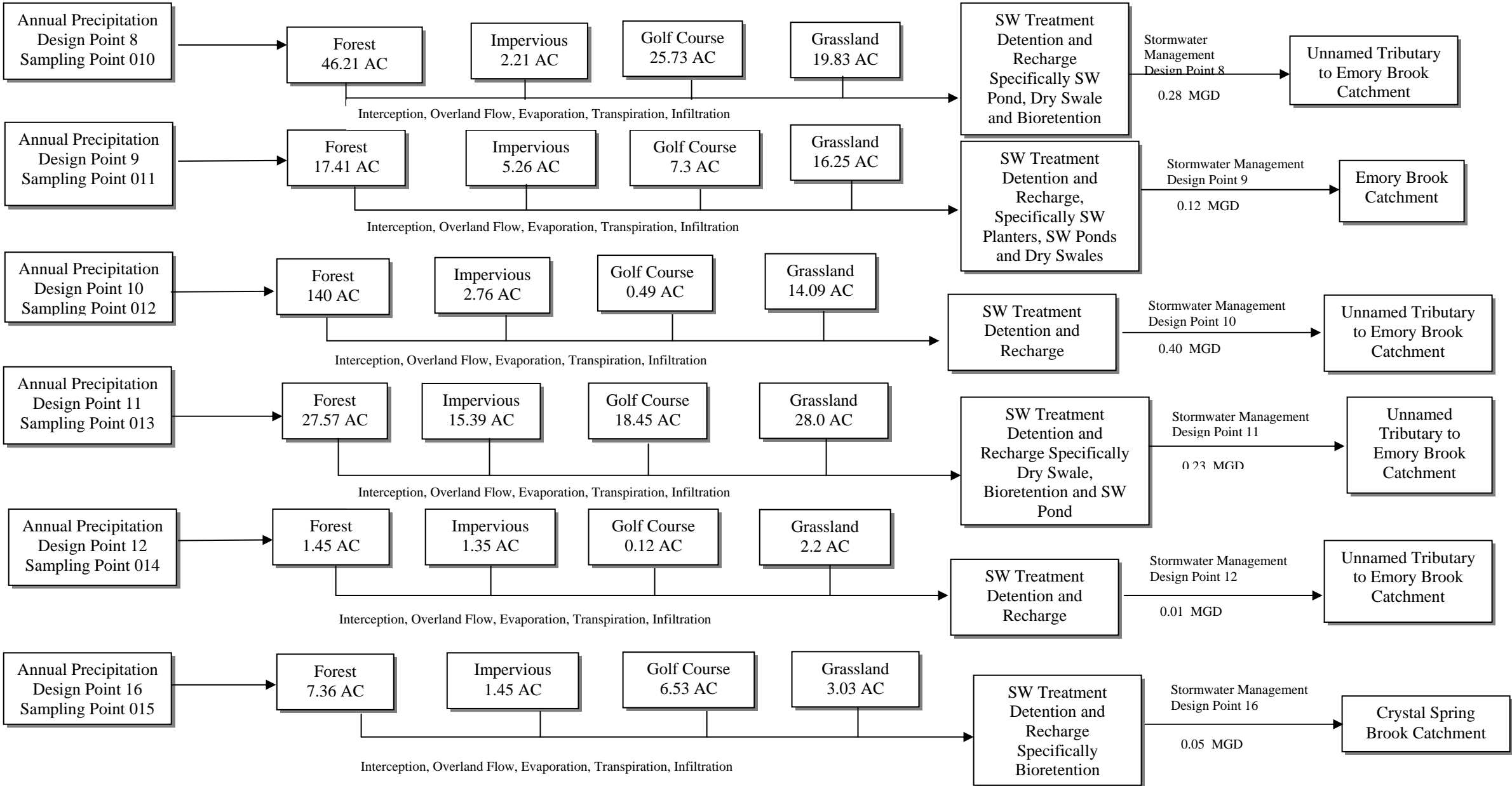
Belleayre Resort at Catskill Park Discharges
Page 1 of 4



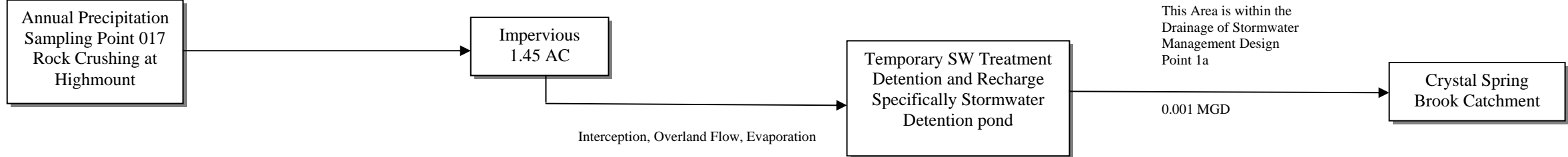
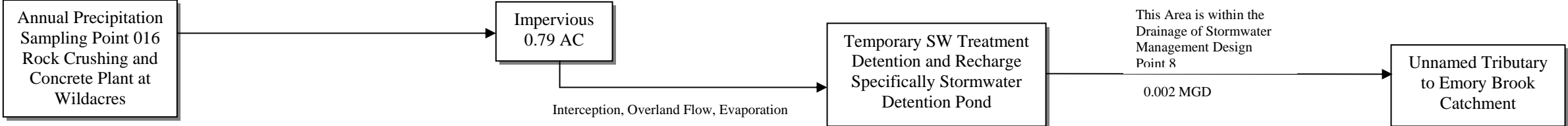
Belleayre Resort at Catskill Park Discharges
Page 2 of 4



Belleayre Resort at Catskill Park Discharges
Page 3 of 4



Belleayre Resort at Catskill Park Discharges
Page 4 of 4



Calculated Estimated Average Flow for Discharge Points									
SPDES Discharge Point	Design Point	Acreage (Ac)	Acreage (ft ²)	Estimated Aggregate Curve Number	Estimated Average Rainfall Annual (ft)	Average Annual Runoff (cf)	Average Daily Runoff (cf)	Average Runoff (MGD)	
001	1a	4.64	202,118	0.68	4.17	572,668.80	1,568.96	0.01	
002	2	25.69	1,119,056	0.68	4.17	3,170,659.80	8,686.74	0.06	
003	3	0.71	30,928	0.68	4.17	87,628.20	240.08	0.002	
004	4	35.16	1,531,570	0.68	4.17	4,339,447.20	11,888.90	0.09	
005	5	9.41	409,900	0.68	4.17	1,161,382.20	3,181.87	0.02	
006	5a	9.99	435,164	0.68	4.17	1,232,965.80	3,377.99	0.03	
007	6	66.27	2,886,721	0.68	4.17	8,179,043.40	22,408.34	0.17	
008	6a	41.78	1,819,937	0.68	4.17	5,156,487.60	14,127.36	0.11	
009	7	128.99	5,618,804	0.68	4.17	15,919,945.80	43,616.29	0.33	
010	8	110.17	4,799,005	0.68	4.17	13,597,181.40	37,252.55	0.28	
011	9	46.21	2,012,908	0.68	4.17	5,703,238.20	15,625.31	0.12	
012	10	157.34	6,853,730	0.68	4.17	19,418,902.80	53,202.47	0.40	
013	11	89.42	3,895,135	0.68	4.17	11,036,216.40	30,236.21	0.23	
014	12	5.12	223,027	0.68	4.17	631,910.40	1,731.26	0.01	
015	16	18.37	800,197	0.68	4.17	2,267,225.40	6,211.58	0.05	
Concrete plant and rock crushing									
016		0.79	34,412	0.68	4.17	97,501.80	267.13	0.0020	
017		0.42	18,295	0.68	4.17	51,836.40	142.02	0.0011	
Estimated Runoff Values were calculated by multiplying the acreage * aggregate curve number * average annual rainfall amount to get annual runoff in cubic feet									
Units were changed to million gallons per day (MGD)									
Estimated Aggregate Curve Number was assumed from the aggregate curve number for the Ashokan reservoir watershed.									
Estimated Average Annual Rainfall was taken from NYSDEP 1997 "Guidance for Phosphorus Offset Pilot Program, Bureau of Water Supply Quality and Protection," report.									

INDUSTRIAL APPLICATION FORM NY-2C Section I - Permittee and Facility Information

Facility Name: Belleayre Resort At Catskill	SPDES Number: NY-027-0679
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10. Nature of business: (Describe the activities at the facility and the date(s) that operation(s) at the facility commenced)

The Belleayre Resort at Catskill Park Development which consist of the Wildacres Resort and Highmount Spa Resort. Overall there will be two hotels, with ancillary hotel buildings, multiple types of lodging buildings, an 18 hole golf course and 15 discharge points that discharge to the Ashokan and Pepacton Watersheds.

11. List the 4-digit SIC codes which describe your facility in order of priority:

Priority 1 1 5 2 2	Description: General Contractors, Residential Buildings	Priority 3 7 2 1 1	Description: Hotel
Priority 2 1 6 2 9	Description: Heavy Construction-Not Elsewhere Class	Priority 4 7 1 3 91	Description: Golf

12. Is your facility a primary industry as listed in Table 1 of the instructions?

- YES** - Complete the following table.
- NO** - Go to Item 13. below.

Industrial Category	40 CFR		Industrial Category	40 CFR	
	Part	Subpart		Part	Subpart

13. Does this facility manufacture, handle, or discharge recombinant-DNA, pathogens, or other potentially infectious or dangerous organisms?

- YES** - Attach a detailed explanation to this application.
- NO** - Go to Item 14 below.

14. Is storm runoff or leachate from a material storage area discharged by your facility?

- YES** - Complete the following table, and show the location of the stockpile(s) and discharge point(s) on the diagram in Item 9.
- NO** - Go to Item 15 on the following page.

Size of area	Type(s) of material stored	Quantity of material stored	Runoff control devices

**INDUSTRIAL APPLICATION FORM NY-2C
Section I - Permittee and Facility Information**

Facility Name: Belleayre Resort At Catskill	SPDES Number: NY-027 0679
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15. Facility Ownership: (Place an "X" in the appropriate box)

Corporate Sole Proprietorship Partnership Municipal State Federal Other

Are any of the discharges applied for in this application on Indian lands? Yes No

16. List information on any other environmental permits for this facility:

Issuing Agency	Permit Type	Permit Number	Permit Status		
			Active	Applied for	Inactive
NYDEC	Part 608				
NYSDEC SPDES	Part 608				
NYSDEC Water Supply	Part 601				
NYSDEC WQC	Part 608				
NYSDOH Water Supply	Part 5				
Town of Middletown	Site Plan				
Town of Shadaken	Site Plan				

17. Laboratory Certification:


Were any of the analyses reported in Section III of this application performed by a contract laboratory or a consulting firm?

YES - Complete the following table.
 NO - Go to Item 18 below.

Name of laboratory or consulting firm	Address	Telephone (area code and number)	Pollutants analyzed
Information in Section 3 prepared by The LA Group, PC	40 Long Alley, Saratoga Springs, NY 12866	(518) 587-8100	See Spreadsheets

18. 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) Dean Gitter Managing Member		Date signed 03/31/2011	
Signature 	Telephone number 845-688-7740	FAX number 845-688-6887	

INDUSTRIAL APPLICATION FORM NY-2C
Section I - Permittee and Facility Information

Facility Name: Belleayre Resort At Catskill	SPDES Number: NY-027-0679
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19. Industrial Chemical Survey (ICS)

Complete all information for those substances your facility has used, produced, stored, distributed, or otherwise disposed of in the past five (5) years at or above the threshold values listed in the instructions. Include substances manufactured at your facility, as well as any substances that you have reason to know or believe present in materials used or manufactured at your facility. Do not include chemicals used only in analytical laboratory work, or small quantities of routine household cleaning chemicals. Enter the name and CAS number for each of the chemicals listed in Tables 6-10 of the instructions, and the table number which lists the chemical. You may use ranges (e.g. 10-100 lbs., 100-1000 lbs., 1000-10000 lbs., etc.) to describe the quantities used on an annual basis as well as for the amount presently on hand. For those chemicals listed in Tables 6, 7, or 8 which are indicated as being potentially present in the discharge from one or more outfalls at the facility, indicate which outfalls may be affected in the appropriate column below, and include sampling results in Section III of this application for each of the potentially affected outfalls. Make additional copies of this sheet if necessary.

Name of Substance	Table	CAS Number	Average Annual Usage	Amount Now On Hand	Units (gallons, lbs, etc)	Purpose of Use (see codes in Table 2 of instructions)	Present in Discharge? (Outfall(s)?)
2,4-D	7	00094-75-7	Variable			HER	ALL
2,4-DP	41	120-36-5	Variable			HER	ALL
Acephate	10	30560-19-1	Variable			PES	ALL
Bendiocarb	10	22781-23-3	Variable			PES	ALL
Benefin	7	01861-40-1	Variable			HER	ALL
Bensulide	N/A	741-58-2	Variable			HER	ALL
Bentazon	8, 10	25057-89-0	Variable			HER	ALL
Bifenthrin	10	82567-04-3	Variable			PES	ALL
Chloroneb	N/A	2675-77-6	Variable			PES	ALL
Dithiopyr	N/A	97886-45-8	Variable			HER	ALL
Ethofumesate	N/A	26259-45-0	Variable			HER	ALL
Ethoprop	10	13194-48-4	Variable			PES	ALL
Etridiazole	8	02593-15-9	Variable			PES	ALL
Fenoxaprop	10	73519-55-8	Variable			HER	ALL
Flutalonil	N/A	6632-96-5	Variable			PES	ALL
Fosetyl-Al	N/A	39148-24-8	Variable			PES	ALL
Glyphosate	7	01071-83-6	Variable			HER	ALL
Halosulfuron	N/A	100784-20-1	Variable			HER	ALL
Lambda Cyhalothron	10	91465-08-6	Variable			PES	ALL
MCPA	7	94-74-6	Variable			HER	ALL
MCPP	8	7085-19-0	Variable			HER	ALL
Mefenoxam	N/A	70630-17-0	Variable			PES	ALL

This completes Section I of the SPDES Industrial Application Form NY-2C. Section II, which requires specific information for each of the outfalls at your facility, and Section III, which requires sampling information for each of the outfalls at your facility, must also be completed and submitted with this application.

**INDUSTRIAL APPLICATION FORM NY-2C
Section I - Permittee and Facility Information**

Facility Name: Belleayre Resort At Catskill	SPDES Number: NY-027-0679
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19. Industrial Chemical Survey (ICS)

Complete all information for those substances your facility has used, produced, stored, distributed, or otherwise disposed of in the past five (5) years at or above the threshold values listed in the instructions. Include substances manufactured at your facility, as well as any substances that you have reason to know or believe present in materials used or manufactured at your facility. Do not include chemicals used only in analytical laboratory work, or small quantities of routine household cleaning chemicals. Enter the name and CAS number for each of the chemicals listed in Tables 6-10 of the instructions, and the table number which lists the chemical. You may use ranges (e.g. 10-100 lbs., 100-1000 lbs., 1000-10000 lbs., etc.) to describe the quantities used on an annual basis as well as for the amount presently on hand. For those chemicals listed in Tables 6, 7, or 8 which are indicated as being potentially present in the discharge from one or more outfalls at the facility, indicate which outfalls may be affected in the appropriate column below, and include sampling results in Section III of this application for each of the potentially affected outfalls. Make additional copies of this sheet if necessary.

Name of Substance	Table	CAS Number	Average Annual Usage	Amount Now On Hand	Units (gallons, lbs, etc)	Purpose of Use (see codes in Table 2 of instructions)	Present in Discharge? (Outfall(s)?)
MSMA	N/A	2163-80-6	Variable			HER	All
Oxadiazon	10	19666-30-9	Variable			HER	All
Prodiamine	10	290991-21-2	Variable			HER	All
Propamocarb	NL	24579-73-5	Variable			PES	All
Propiconazole	10	60207-90-1	Variable			PES	All
PCNB	7	00082-68-8	Variable			PES	All
Siduron	8	01982-49-6	Variable			HER	All
Triclopyr	10	55335-06-3	Variable			HER	All
Trifloxystrobin	N/A	141517-21-7	Variable			PES	All
Trifluralin	7	01582-09-8	Variable			HER	All
Vinclozolin	10	50471-44-8	Variable			PES	All
Nitrogen, Nitrate	7						
Phosphorus, Total	7	07723-14-0					

This completes Section I of the SPDES Industrial Application Form NY-2C. Section II, which requires specific information for each of the outfalls at your facility, and Section III, which requires sampling information for each of the outfalls at your facility, must also be completed and submitted with this application.

State Pollutant Discharge Elimination System (SPDES)
INDUSTRIAL APPLICATION FORM NY-2C
 For New Permits and Permit Modifications to Discharge Industrial Wastewater and Storm Water

Section II - Outfall Information

Please type or print the requested information.

Facility Name: Belleayre Resort At Catskill	SPDES Number: NY-027-0679
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1. Outfall Number and Location

Outfall No.: 001 Design Point 1a		
Latitude 42 ° 8 ' 42.1 "	Longitude 74 ° 32 ' 0.2 "	Receiving Water Todd Mountain Brook (NYSDEC # 815-762)

2. Type of Discharge and Discharge Rate (List all information applicable to this outfall)

	Volume/Flow	Units				Volume/Flow	Units		
		MGD	GPM	Other (specify)			MGD	GPM	Other (specify)
a. Process Wastewater					f. Noncontact Cooling Water				
b. Process Wastewater					g. Remediation System Discharge				
c. Process Wastewater					h. Boiler Blowdown				
d. Process Wastewater					i. Storm Water <input checked="" type="checkbox"/>				
e. Contact Cooling Water					j. Sanitary Wastewater				
k. Other discharge (specify):									
l. Other discharge (specify):									

3. List process information for the Process Wastewater streams identified in 2.a-d above:

a. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
b. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
c. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
d. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		

4. Expected or Proposed Discharge Flow Rates for this outfall:

a. Total Annual Discharge MG	b. Daily Minimum Flow MGD	c. Daily Average Flow 0.01 MGD	d. Daily Maximum Flow MGD	e. Maximum Design flow rate MGD
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State Pollutant Discharge Elimination System (SPDES)
INDUSTRIAL APPLICATION FORM NY-2C
 For New Permits and Permit Modifications to Discharge Industrial Wastewater and Storm Water
Section II - Outfall Information

Please type or print the requested information.

Facility Name: Belleayre Resort At Catskill	SPDES Number: NY-027-0679
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1. Outfall Number and Location

Outfall No.: 002 Design Point 2		
Latitude 42 ° 8 ' 34.0 "	Longitude 74 ° 31 ' 55.6 "	Receiving Water Todd Mountain Brook (NYSDEC # 815-762)

2. Type of Discharge and Discharge Rate (List all information applicable to this outfall)

	Volume/Flow	Units				Volume/Flow	Units		
		MGD	GPM	Other (specify)			MGD	GPM	Other (specify)
a. Process Wastewater					f. Noncontact Cooling Water				
b. Process Wastewater					g. Remediation System Discharge				
c. Process Wastewater					h. Boiler Blowdown				
d. Process Wastewater					i. Storm Water <input checked="" type="checkbox"/>				
e. Contact Cooling Water					j. Sanitary Wastewater				
k. Other discharge (specify):									
l. Other discharge (specify):									

3. List process information for the Process Wastewater streams identified in 2.a-d above:

a. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
b. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
c. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
d. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		

4. Expected or Proposed Discharge Flow Rates for this outfall:

a. Total Annual Discharge MG	b. Daily Minimum Flow MGD	c. Daily Average Flow 0.06 MGD	d. Daily Maximum Flow MGD	e. Maximum Design flow rate MGD
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State Pollutant Discharge Elimination System (SPDES)
INDUSTRIAL APPLICATION FORM NY-2C
 For New Permits and Permit Modifications to Discharge Industrial Wastewater and Storm Water
Section II - Outfall Information

Please type or print the requested information.

Facility Name: Belleayre Resort At Catskill	SPDES Number: NY-027-0679
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1. Outfall Number and Location

Outfall No.: 003 Design Point 3		
Latitude 42 ° 8 ' 39.7"	Longitude 74 ° 31 ' 54.3"	Receiving Water Todd Mountain Brook (NYSDEC # 815-762)

2. Type of Discharge and Discharge Rate (List all information applicable to this outfall)

	Volume/Flow	Units				Volume/Flow	Units		
		MGD	GPM	Other (specify)			MGD	GPM	Other (specify)
a. Process Wastewater					f. Noncontact Cooling Water				
b. Process Wastewater					g. Remediation System Discharge				
c. Process Wastewater					h. Boiler Blowdown				
d. Process Wastewater					i. Storm Water <input checked="" type="checkbox"/>				
e. Contact Cooling Water					j. Sanitary Wastewater				
k. Other discharge (specify):									
l. Other discharge (specify):									

3. List process information for the Process Wastewater streams identified in 2.a-d above:

a. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
b. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
c. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
d. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		

4. Expected or Proposed Discharge Flow Rates for this outfall:

a. Total Annual Discharge	b. Daily Minimum Flow	c. Daily Average Flow	d. Daily Maximum Flow	e. Maximum Design flow rate
MG	MGD	0.002 MGD	MGD	MGD

State Pollutant Discharge Elimination System (SPDES)
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Section II - Outfall Information

Please type or print the requested information.

Facility Name: Belleayre Resort At Catskill	SPDES Number: NY-027-0679
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1. Outfall Number and Location

Outfall No.: 004 Design Point 4	Latitude 42 ° 8 ' 43.2 " Longitude 74 ° 31 ' 39.9 "	Receiving Water Emory Brook (NYSDEC # 815-763)
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2. Type of Discharge and Discharge Rate (List all information applicable to this outfall)

	Volume/Flow	Units				Volume/Flow	Units		
		MGD	GPM	Other (specify)			MGD	GPM	Other (specify)
a. Process Wastewater					f. Noncontact Cooling Water				
b. Process Wastewater					g. Remediation System Discharge				
c. Process Wastewater					h. Boiler Blowdown				
d. Process Wastewater					i. Storm Water <input checked="" type="checkbox"/>				
e. Contact Cooling Water					j. Sanitary Wastewater				
k. Other discharge (specify):									
l. Other discharge (specify):									

3. List process information for the Process Wastewater streams identified in 2.a-d above:

a. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
b. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
c. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
d. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		

4. Expected or Proposed Discharge Flow Rates for this outfall:

a. Total Annual Discharge	b. Daily Minimum Flow	c. Daily Average Flow	d. Daily Maximum Flow	e. Maximum Design flow rate
MG	MGD	0.09 MGD	MGD	MGD

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Please type or print the requested information.

Facility Name: Belleayre Resort At Catskill	SPDES Number: NY-027-0679
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1. Outfall Number and Location

Outfall No.: 005 Design Point 5		
Latitude 42 ° 8 ' 38.1 "	Longitude 74 ° 31 ' 33.7 "	Receiving Water Emory Brook (NYSDEC # 815-763)

2. Type of Discharge and Discharge Rate (List all information applicable to this outfall)

	Volume/Flow	Units				Volume/Flow	Units		
		MGD	GPM	Other (specify)			MGD	GPM	Other (specify)
a. Process Wastewater					f. Noncontact Cooling Water				
b. Process Wastewater					g. Remediation System Discharge				
c. Process Wastewater					h. Boiler Blowdown				
d. Process Wastewater					i. Storm Water <input checked="" type="checkbox"/>				
e. Contact Cooling Water					j. Sanitary Wastewater				
k. Other discharge (specify):									
l. Other discharge (specify):									

3. List process information for the Process Wastewater streams identified in 2.a-d above:

a. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
b. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
c. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
d. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		

4. Expected or Proposed Discharge Flow Rates for this outfall:

a. Total Annual Discharge MG	b. Daily Minimum Flow MGD	c. Daily Average Flow 0.02 MGD	d. Daily Maximum Flow MGD	e. Maximum Design flow rate MGD
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State Pollutant Discharge Elimination System (SPDES)
INDUSTRIAL APPLICATION FORM NY-2C
 For New Permits and Permit Modifications to Discharge Industrial Wastewater and Storm Water
Section II - Outfall Information

Please type or print the requested information.

Facility Name: Belleayre Resort At Catskill	SPDES Number: NY-027-0679
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1. Outfall Number and Location

Outfall No.: 006 Design Point 5a	Latitude 42 ° 8 ' 35.7 "	Longitude 74 ° 31 ' 30.3 "	Receiving Water Emory Brook (NYSDEC # 815-763)
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2. Type of Discharge and Discharge Rate (List all information applicable to this outfall)

	Volume/Flow	Units				Volume/Flow	Units		
		MGD	GPM	Other (specify)			MGD	GPM	Other (specify)
a. Process Wastewater					f. Noncontact Cooling Water				
b. Process Wastewater					g. Remediation System Discharge				
c. Process Wastewater					h. Boiler Blowdown				
d. Process Wastewater					i. Storm Water <input checked="" type="checkbox"/>				
e. Contact Cooling Water					j. Sanitary Wastewater				
k. Other discharge (specify):									
l. Other discharge (specify):									

3. List process information for the Process Wastewater streams identified in 2.a-d above:

a. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
b. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
c. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
d. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		

4. Expected or Proposed Discharge Flow Rates for this outfall:

a. Total Annual Discharge MG	b. Daily Minimum Flow MGD	c. Daily Average Flow 0.03 MGD	d. Daily Maximum Flow MGD	e. Maximum Design flow rate MGD
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State Pollutant Discharge Elimination System (SPDES)
INDUSTRIAL APPLICATION FORM NY-2C
 For New Permits and Permit Modifications to Discharge Industrial Wastewater and Storm Water
Section II - Outfall Information

Please type or print the requested information.

Facility Name: Belleayre Resort At Catskill	SPDES Number: NY-027-0679
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1. Outfall Number and Location

Outfall No.: 007 Design Point 6	Latitude 42 ° 8 ' 32.6 "	Longitude 74 ° 31 ' 25.3 "	Receiving Water Emory Brook (NYSDEC # 815-763)
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2. Type of Discharge and Discharge Rate (List all information applicable to this outfall)

	Volume/Flow	Units				Volume/Flow	Units		
		MGD	GPM	Other (specify)			MGD	GPM	Other (specify)
a. Process Wastewater					f. Noncontact Cooling Water				
b. Process Wastewater					g. Remediation System Discharge				
c. Process Wastewater					h. Boiler Blowdown				
d. Process Wastewater					i. Storm Water <input checked="" type="checkbox"/>				
e. Contact Cooling Water					j. Sanitary Wastewater				
k. Other discharge (specify):									
l. Other discharge (specify):									

3. List process information for the Process Wastewater streams identified in 2.a-d above:

a. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
b. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
c. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
d. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		

4. Expected or Proposed Discharge Flow Rates for this outfall:

a. Total Annual Discharge	b. Daily Minimum Flow	c. Daily Average Flow	d. Daily Maximum Flow	e. Maximum Design flow rate
MG	MGD	0.17 MGD	MGD	MGD

State Pollutant Discharge Elimination System (SPDES)
INDUSTRIAL APPLICATION FORM NY-2C
 For New Permits and Permit Modifications to Discharge Industrial Wastewater and Storm Water
Section II - Outfall Information

Please type or print the requested information.

Facility Name: Belleayre Resort At Catskill	SPDES Number: NY-027-0679
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1. Outfall Number and Location

Outfall No.: 008 Design point 6a		
Latitude 42 ° 8 ' 31.7 "	Longitude 74 ° 31 ' 21.5 "	Receiving Water Emory Brook (NYSDEC # 815-763)

2. Type of Discharge and Discharge Rate (List all information applicable to this outfall)

	Volume/Flow	Units				Volume/Flow	Units		
		MGD	GPM	Other (specify)			MGD	GPM	Other (specify)
a. Process Wastewater					f. Noncontact Cooling Water				
b. Process Wastewater					g. Remediation System Discharge				
c. Process Wastewater					h. Boiler Blowdown				
d. Process Wastewater					i. Storm Water <input checked="" type="checkbox"/>				
e. Contact Cooling Water					j. Sanitary Wastewater				
k. Other discharge (specify):									
l. Other discharge (specify):									

3. List process information for the Process Wastewater streams identified in 2.a-d above:

a. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
b. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
c. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
d. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		

4. Expected or Proposed Discharge Flow Rates for this outfall:

a. Total Annual Discharge MG	b. Daily Minimum Flow MGD	c. Daily Average Flow 0.11 MGD	d. Daily Maximum Flow MGD	e. Maximum Design flow rate MGD
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State Pollutant Discharge Elimination System (SPDES)
INDUSTRIAL APPLICATION FORM NY-2C
 For New Permits and Permit Modifications to Discharge Industrial Wastewater and Storm Water
Section II - Outfall Information

Please type or print the requested information.

Facility Name: Belleayre Resort At Catskill	SPDES Number: NY-027-0679
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1. Outfall Number and Location

Outfall No.: 009 Design Point 7		
Latitude 42 ° 8 ' 56.2 "	Longitude 74 ° 31 ' 2.1 "	Receiving Water Unnamed Tributary to Emory Brook (NYSDEC # 815-765)

2. Type of Discharge and Discharge Rate (List all information applicable to this outfall)

	Volume/Flow	Units				Volume/Flow	Units		
		MGD	GPM	Other (specify)			MGD	GPM	Other (specify)
a. Process Wastewater					f. Noncontact Cooling Water				
b. Process Wastewater					g. Remediation System Discharge				
c. Process Wastewater					h. Boiler Blowdown				
d. Process Wastewater					i. Storm Water <input checked="" type="checkbox"/>				
e. Contact Cooling Water					j. Sanitary Wastewater				
k. Other discharge (specify):									
l. Other discharge (specify):									

3. List process information for the Process Wastewater streams identified in 2.a-d above:

a. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
b. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
c. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
d. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		

4. Expected or Proposed Discharge Flow Rates for this outfall:

a. Total Annual Discharge MG	b. Daily Minimum Flow MGD	c. Daily Average Flow 0.33 MGD	d. Daily Maximum Flow MGD	e. Maximum Design flow rate MGD
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State Pollutant Discharge Elimination System (SPDES)
INDUSTRIAL APPLICATION FORM NY-2C
 For New Permits and Permit Modifications to Discharge Industrial Wastewater and Storm Water
Section II - Outfall Information

Please type or print the requested information.

Facility Name: Belleayre Resort At Catskill	SPDES Number: NY-027-0679
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1. Outfall Number and Location

Outfall No.: 010 Design Point 8	Latitude 42 ° 8 '55.9 "	Longitude 74 ° 30 ' 55.9 "	Receiving Water Unnamed Tributary to Emory Brook (NYSDEC # 815-765)
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2. Type of Discharge and Discharge Rate (List all information applicable to this outfall)

	Volume/Flow	Units				Volume/Flow	Units		
		MGD	GPM	Other (specify)			MGD	GPM	Other (specify)
a. Process Wastewater					f. Noncontact Cooling Water				
b. Process Wastewater					g. Remediation System Discharge				
c. Process Wastewater					h. Boiler Blowdown				
d. Process Wastewater					i. Storm Water <input checked="" type="checkbox"/>				
e. Contact Cooling Water					j. Sanitary Wastewater				
k. Other discharge (specify):									
l. Other discharge (specify):									

3. List process information for the Process Wastewater streams identified in 2.a-d above:

a. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
b. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
c. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
d. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		

4. Expected or Proposed Discharge Flow Rates for this outfall:

a. Total Annual Discharge	b. Daily Minimum Flow	c. Daily Average Flow	d. Daily Maximum Flow	e. Maximum Design flow rate
MG	MGD	0.28 MGD	MGD	MGD

State Pollutant Discharge Elimination System (SPDES)
INDUSTRIAL APPLICATION FORM NY-2C
 For New Permits and Permit Modifications to Discharge Industrial Wastewater and Storm Water
Section II - Outfall Information

Please type or print the requested information.

Facility Name: Belleayre Resort At Catskill	SPDES Number: NY-027-0679
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1. Outfall Number and Location

Outfall No.: 011 Design Point 9		
Latitude 42 ° 9 ' 0.0 "	Longitude 74 ° 30 ' 36.8 "	Receiving Water Emory Brook (NYSDEC # 815-763)

2. Type of Discharge and Discharge Rate (List all information applicable to this outfall)

	Volume/Flow	Units				Volume/Flow	Units		
		MGD	GPM	Other (specify)			MGD	GPM	Other (specify)
a. Process Wastewater					f. Noncontact Cooling Water				
b. Process Wastewater					g. Remediation System Discharge				
c. Process Wastewater					h. Boiler Blowdown				
d. Process Wastewater					i. Storm Water <input checked="" type="checkbox"/>				
e. Contact Cooling Water					j. Sanitary Wastewater				
k. Other discharge (specify):									
l. Other discharge (specify):									

3. List process information for the Process Wastewater streams identified in 2.a-d above:

a. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
b. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
c. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
d. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		

4. Expected or Proposed Discharge Flow Rates for this outfall:

a. Total Annual Discharge MG	b. Daily Minimum Flow MGD	c. Daily Average Flow 0.12 MGD	d. Daily Maximum Flow MGD	e. Maximum Design flow rate MGD
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State Pollutant Discharge Elimination System (SPDES)
INDUSTRIAL APPLICATION FORM NY-2C
 For New Permits and Permit Modifications to Discharge Industrial Wastewater and Storm Water
Section II - Outfall Information

Please type or print the requested information.

Facility Name: Belleayre Resort At Catskill	SPDES Number: NY-027-0679
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1. Outfall Number and Location

Outfall No.: 012 Design Point 10	Receiving Water Unnamed Tributary to Emory Brook (NYSDEC # 815-765)		
Latitude 42 ° 8 ‘ 57.6 “	Longitude 74 ° 30 ‘ 19.5 “		

2. Type of Discharge and Discharge Rate (List all information applicable to this outfall)

	Volume/Flow	Units				Volume/Flow	Units		
		MGD	GPM	Other (specify)			MGD	GPM	Other (specify)
a. Process Wastewater					f. Noncontact Cooling Water				
b. Process Wastewater					g. Remediation System Discharge				
c. Process Wastewater					h. Boiler Blowdown				
d. Process Wastewater					i. Storm Water <input checked="" type="checkbox"/>				
e. Contact Cooling Water					j. Sanitary Wastewater				
k. Other discharge (specify):									
l. Other discharge (specify):									

3. List process information for the Process Wastewater streams identified in 2.a-d above:

a. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
b. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
c. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
d. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		

4. Expected or Proposed Discharge Flow Rates for this outfall:

a. Total Annual Discharge MG	b. Daily Minimum Flow MGD	c. Daily Average Flow 0.40 MGD	d. Daily Maximum Flow MGD	e. Maximum Design flow rate MGD
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State Pollutant Discharge Elimination System (SPDES)
INDUSTRIAL APPLICATION FORM NY-2C
 For New Permits and Permit Modifications to Discharge Industrial Wastewater and Storm Water

Section II - Outfall Information

Please type or print the requested information.

Facility Name: Belleayre Resort At Catskill	SPDES Number: NY-027-0679
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1. Outfall Number and Location

Outfall No.: 013 Design Point 11		
Latitude 42 ° 9 ' 0.8 "	Longitude 74 ° 30 ' 10.6 "	Receiving Water Unnamed Tributary to Emory Brook (NYSDEC # 815-765)

2. Type of Discharge and Discharge Rate (List all information applicable to this outfall)

	Volume/Flow	Units				Volume/Flow	Units		
		MGD	GPM	Other (specify)			MGD	GPM	Other (specify)
a. Process Wastewater					f. Noncontact Cooling Water				
b. Process Wastewater					g. Remediation System Discharge				
c. Process Wastewater					h. Boiler Blowdown				
d. Process Wastewater					i. Storm Water <input checked="" type="checkbox"/>				
e. Contact Cooling Water					j. Sanitary Wastewater				
k. Other discharge (specify):									
l. Other discharge (specify):									

3. List process information for the Process Wastewater streams identified in 2.a-d above:

a. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
b. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
c. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
d. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		

4. Expected or Proposed Discharge Flow Rates for this outfall:

a. Total Annual Discharge MG	b. Daily Minimum Flow MGD	c. Daily Average Flow 0.23 MGD	d. Daily Maximum Flow MGD	e. Maximum Design flow rate MGD
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State Pollutant Discharge Elimination System (SPDES)
INDUSTRIAL APPLICATION FORM NY-2C
 For New Permits and Permit Modifications to Discharge Industrial Wastewater and Storm Water
Section II - Outfall Information

Please type or print the requested information.

Facility Name: Belleayre Resort At Catskill	SPDES Number: NY-027-0679
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1. Outfall Number and Location

Outfall No.: 014 Design Point 12	Latitude 42 ° 8 ‘ 47.3“	Longitude 74 ° 29 ‘ 43.5“	Receiving Water Unnamed Tributary to Emory Brook (NYSDEC # 815-765)
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2. Type of Discharge and Discharge Rate (List all information applicable to this outfall)

	Units				Units		
	MGD	GPM	Other (specify)		MGD	GPM	Other (specify)
a. Process Wastewater				f. Noncontact Cooling Water			
b. Process Wastewater				g. Remediation System Discharge			
c. Process Wastewater				h. Boiler Blowdown			
d. Process Wastewater				i. Storm Water <input checked="" type="checkbox"/>			
e. Contact Cooling Water				j. Sanitary Wastewater			
k. Other discharge (specify):							
l. Other discharge (specify):							

3. List process information for the Process Wastewater streams identified in 2.a-d above:

a. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
b. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
c. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
d. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		

4. Expected or Proposed Discharge Flow Rates for this outfall:

a. Total Annual Discharge MG	b. Daily Minimum Flow MGD	c. Daily Average Flow 0.01 MGD	d. Daily Maximum Flow MGD	e. Maximum Design flow rate MGD
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State Pollutant Discharge Elimination System (SPDES)
INDUSTRIAL APPLICATION FORM NY-2C
 For New Permits and Permit Modifications to Discharge Industrial Wastewater and Storm Water
Section II - Outfall Information

Please type or print the requested information.

Facility Name: Belleayre Resort At Catskill	SPDES Number: NY-027-0679
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1. Outfall Number and Location

Outfall No.: 015 Design Point 16		
Latitude 42 ° 8 ' 39.1 "	Longitude 74 ° 29 ' 54.3 "	Receiving Water Crystal Spring Brook (NYSDEC # 862-649)

2. Type of Discharge and Discharge Rate (List all information applicable to this outfall)

	Volume/Flow	Units				Volume/Flow	Units		
		MGD	GPM	Other (specify)			MGD	GPM	Other (specify)
a. Process Wastewater					f. Noncontact Cooling Water				
b. Process Wastewater					g. Remediation System Discharge				
c. Process Wastewater					h. Boiler Blowdown				
d. Process Wastewater					i. Storm Water <input checked="" type="checkbox"/>				
e. Contact Cooling Water					j. Sanitary Wastewater				
k. Other discharge (specify):									
l. Other discharge (specify):									

3. List process information for the Process Wastewater streams identified in 2.a-d above:

a. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
b. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
c. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
d. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		

4. Expected or Proposed Discharge Flow Rates for this outfall:

a. Total Annual Discharge MG	b. Daily Minimum Flow MGD	c. Daily Average Flow 0.05 MGD	d. Daily Maximum Flow MGD	e. Maximum Design flow rate MGD
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State Pollutant Discharge Elimination System (SPDES)
INDUSTRIAL APPLICATION FORM NY-2C
 For New Permits and Permit Modifications to Discharge Industrial Wastewater and Storm Water
Section II - Outfall Information

Please type or print the requested information.

Facility Name: Belleayre Resort At Catskill	SPDES Number: NY-027-0679
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1. Outfall Number and Location

Outfall No.: 016	Latitude 42 ° 8 '42.2 "	Longitude 74 ° 40 '40.0 "	Receiving Water Unnamed Tributary to Emory Brook (NYSDEC # 815-765)
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2. Type of Discharge and Discharge Rate (List all information applicable to this outfall)

	Volume/Flow	Units				Volume/Flow	Units		
		MGD	GPM	Other (specify)			MGD	GPM	Other (specify)
a. Process Wastewater					f. Noncontact Cooling Water				
b. Process Wastewater					g. Remediation System Discharge				
c. Process Wastewater					h. Boiler Blowdown				
d. Process Wastewater					i. Storm Water <input checked="" type="checkbox"/>				
e. Contact Cooling Water					j. Sanitary Wastewater				
k. Other discharge (specify):									
l. Other discharge (specify):									

3. List process information for the Process Wastewater streams identified in 2.a-d above:

a. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
b. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
c. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
d. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		

4. Expected or Proposed Discharge Flow Rates for this outfall:

a. Total Annual Discharge MG	b. Daily Minimum Flow MGD	c. Daily Average Flow 0.002 MGD	d. Daily Maximum Flow MGD	e. Maximum Design flow rate MGD
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State Pollutant Discharge Elimination System (SPDES)
INDUSTRIAL APPLICATION FORM NY-2C
 For New Permits and Permit Modifications to Discharge Industrial Wastewater and Storm Water
Section II - Outfall Information

Please type or print the requested information.

Facility Name: Belleayre Resort At Catskill	SPDES Number: NY-027-0679
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1. Outfall Number and Location

Outfall No.: 017	Latitude 42 ° 8 ' 31.1 "	Longitude 74 ° 31 ' 49.1 "	Receiving Water Todd Mountain Brook (NYSDEC# 815-762)
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2. Type of Discharge and Discharge Rate (List all information applicable to this outfall)

	Volume/Flow	Units				Volume/Flow	Units		
		MGD	GPM	Other (specify)			MGD	GPM	Other (specify)
a. Process Wastewater					f. Noncontact Cooling Water				
b. Process Wastewater					g. Remediation System Discharge				
c. Process Wastewater					h. Boiler Blowdown				
d. Process Wastewater					i. Storm Water <input checked="" type="checkbox"/>				
e. Contact Cooling Water					j. Sanitary Wastewater				
k. Other discharge (specify):									
l. Other discharge (specify):									

3. List process information for the Process Wastewater streams identified in 2.a-d above:

a. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
b. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
c. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		
d. Name of the process contributing to the discharge			Process SIC code:
Describe the contributing process	Category	Quantity per day	Units of measure
	Subcategory		

4. Expected or Proposed Discharge Flow Rates for this outfall:

a. Total Annual Discharge MG	b. Daily Minimum Flow MGD	c. Daily Average Flow 0.001 MGD	d. Daily Maximum Flow MGD	e. Maximum Design flow rate MGD
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**INDUSTRIAL APPLICATION FORM NY-2C
Section II - Outfall Information**

Facility Name: Belleayre Resort At Catskill	Outfall No.: 1a,2,3,4,5,5a,6,6a7,8,9,10,11,12,16 SPDES Number: NY-027-0679
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5. Is this a seasonal discharge?

YES - Complete the following table.
 NO - Go to Item 6 below.

Operations contributing flow (list)	Discharge frequency		Flow				
	Batches per year	Duration per batch	Flow rate per day		Total volume per discharge	Units	Duration (Days)
			LTA	Daily Max			

6. Water Supply Source (indicate all that apply)

	Name or owner of water supply source	Volume or flow rate	Units (check one)		
Municipal Supply			MGD	GPD	GPM
Private Surface Water Source			MGD	GPD	GPM
Private Supply Well	K Well Field, Q Well Field, and Irrigation Wells	K-157, Q-45 Irrig-36	MGD	<input checked="" type="checkbox"/> GPD	GPM
Other (specify)			MGD	GPD	GPM

7. Outfall configuration: (Surface water discharges only)

A. Where is the discharge point located with respect to the receiving water?

In the streambank:
 In the stream:
 Within a lake or ponded water:
 Within an estuary: Attach Supplement C, MIXING ZONE REQUIREMENTS FOR DISCHARGES TO ESTUARIES.
 Discharge is equipped with diffuser: Attach description, including configuration and plan drawing of diffuser, if used.

B. If located in a stream, approximately what percentage of stream width from shore is the discharge point located?

10% 25% 50% Other:

C. If located in a stream, describe the stream geometry in the general vicinity of the discharge point, under low flow conditions:

Stream width	Stream depth	Stream velocity	Are the results of a mixing/diffusion study attached? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Feet	Feet	Feet/Sec	

**INDUSTRIAL APPLICATION FORM NY-2C
Section II - Outfall Information**

Facility Name: Belleayre Resort At Catskill	Outfall No.: SPDES Number: NY-027-0679
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11. Is the discharge from this outfall treated to remove process wastes, water treatment additives, or other pollutants?

YES - Complete the following table. Treatment codes are listed in Table 4.

NO - Go to Item 12 below.

Treatment process	Treatment Code(s)	Treatment used for the removal of:	Design Flow Rate (include units)

12. Does this facility have either a compliance agreement with a regulating agency, or have planned changes in production, which will materially alter the quantity and/or quality of the discharge from this outfall?

YES - Complete the following table.

NO - Go to Section III on the following page.

Description of project	Subject to Condition or Agreement in existing permit or consent order? (List)	Change due to production increase?	Completion Date(s)	
			Required	Projected

This completes Section II of the SPDES Industrial Application Form NY-2C. Section I, which requires general information regarding your facility, and Section III, which requires sampling information for each of the outfalls at your facility, must also be completed and submitted with this application.

**INDUSTRIAL APPLICATION FORM NY-2C
Section III - Sampling Information**

Facility Name:
Belleayre Resort At Catskill

SPDES No.:
NY-027-0679

Outfall No.:
001

1. Sampling Information - Conventional Parameters

Provide the analytical results of at least one analysis for every pollutant in this table. If this outfall is subject to a waiver as listed in Table 5 of the instructions for one or more of the parameters listed below, provide the results for those parameters which are required for this type of outfall.

PLEASE PRINT OR TYPE IN THE UNSHADED AREAS ONLY. You may report some or all of this information on separate sheets (using the same format) instead of completing this page.

Pollutant	Effluent data				Intake data (optional)						
	a. Maximum daily value		b. Maximum 30 day value		c. Long term average		d. Number of analyses		e. Units		
	1. Concentration	2. Mass	1. Concentration	2. Mass	1. Concentration	2. Mass	a. Concentration	b. Mass	1. Concentration	2. Mass	
a. Biochemical Oxygen Demand, 5 day (BOD)	N/A										
b. Chemical Oxygen Demand (COD)	N/A										
c. Total Suspended Solids (TSS)	10.0										
d. Total Dissolved Solids (TDS)	7.0										
e. Oil & Grease	N/A										
f. Chlorine, Total Residual (TRC)	N/A										
g. Total Organic Nitrogen (TON)	N/A										
h. Ammonia (as N)	N/A										
i. Flow	Value	Monitor	Value		Value					Value	
j. Temperature, winter	Value	N/A	Value		Value					Value	
k. Temperature, summer	Value	N/A	Value		Value					Value	
l. pH	Minimum 6.5	Maximum 8.5	Minimum	Maximum						Minimum	Maximum

2. Sampling Information - Priority Pollutants, Toxic Pollutants, and Hazardous Substances

a. Primary Industries: i. Does the discharge from this outfall contain process wastewater? Yes - Go to Item ii. below. No - Go to Item b. below.

ii. Indicate which GC/MS fractions have been tested for: Volatiles: Acid: Base/Neutral: Pesticide:

b. All applicants: i. Do you know or have reason to believe that any of the pollutants listed in Tables 6, 7, or 8 of the instructions are present in the discharge from this outfall? Yes - Concentration and mass data attached. No - Go to Item ii. below.

ii. Do you know or have reason to believe that any of the pollutants listed in Table 9 or Table 10 of the instructions, or any other toxic, harmful, or injurious chemical substances not listed in Tables 6-10, are present in the discharge from this outfall? Yes - Source or reason for presence in discharge attached. No

INDUSTRIAL APPLICATION FORM NY-2C
Section III - Sampling Information

Facility Name:
Belleayre Resort At Catskill

SPDES No.:
NY-027-0679

Outfall No.:
Estimated Values for all

3. Projected Effluent Quality - Priority Pollutants, Toxic Pollutants, and Hazardous Substances

Provide analytical results of at least one analysis for each pollutant that you know or have reason to believe is present in this discharge, as well as for any GC/MS fractions and metals required to be sampled from Section III Forms, Item 2.a on the preceding page.

Pollutant and CAS Number	Effluent data				Units			Intake data (optional)		Believed present, no sampling results available	
	a. Maximum daily value		b. Maximum 30 day value (if available)		c. Long term average value (if available)	d. Number of analyses	a. Concentration	b. Mass	d. Number of analyses		
	(1)Concentration	(2) Mass	(1)Concentration	(2) Mass					(1)Concentration		(2) Mass
Total Phosphorus CAS Number: 07723-14-0					TMDL	201.1	*Value from Direct Calculation sheet (154.7) plus 30% to account for range of variation in annual rainfall and loadings.				1 of 3
2, 4-D CAS Number: 94-75-7	25						monthly	ug/L			
2, 4-DP CAS Number: 120-36-5	25						monthly	ug/L			
Acephate CAS Number: 30560-19-1	25						monthly	ug/L			
Bendiocarb CAS Number: 22781-23-3	25						monthly	ug/L			
Benefin CAS Number: 1861-40-1	8						monthly	ug/L			
Bensulide CAS Number: 741-58-2	25						monthly	ug/L			
Bentazon CAS Number: 25057-89-0	25						monthly	ug/L			
Chloroneb CAS Number: 2675-89-0	5						monthly	ug/L			
Dithiopyr CAS Number: 97886-45-8	25						monthly	ug/L			
Ethofumesate CAS Number: 26225-79-6	25						monthly	ug/L			
Ethoprop CAS Number: 13194-48-4	25						monthly	ug/L			
Etridiazole CAS Number: 2593-15-9	25						monthly	ug/L			

INDUSTRIAL APPLICATION FORM NY-2C
Section III - Sampling Information

Facility Name:
Belleayre Resort At Catskill Park

SPDES No.:
NY-027-0679

Outfall No.:
Estimated Values for all

3. Projected Effluent Quality - Priority Pollutants, Toxic Pollutants, and Hazardous Substances

Provide analytical results of at least one analysis for each pollutant that you know or have reason to believe is present in this discharge, as well as for any GC/MS fractions and metals required to be sampled from Section III Forms, Item 2.a on the preceding page.

Pollutant and CAS Number	Effluent data				Units			Intake data (optional)		Believed present, no sampling results available
	a. Maximum daily value	b. Maximum 30 day value (if available)	c. Long term average value (if available)	d. Number of analyses	a. Concentration	b. Mass	a. Long term average value	d. Number of analyses		
	(1)Concentration (2) Mass	(1)Concentration (2) Mass	(1)Concentration (2) Mass				(1)Concentration (2) Mass			
Fenoxaprop CAS Number: 66441-23-4	25			monthly	ug/L					
Flutalonil CAS Number: 66332-96-5	25			monthly	ug/L					
Fosetyl-Al CAS Number: 39148-24-8	25			monthly	ug/L					
Glyphosate CAS Number: 1071-83-6	25			monthly	ug/L					
Halosulfuron CAS Number: 100784-20-1	25			monthly	ug/L					
MCPA CAS Number: 94-74-6	0.44			monthly	ug/L					
MCPP CAS Number: 7085-19-0	0.44			monthly	ug/L					
Mefenoxam CAS Number: 70630-17-0	25			monthly	ug/L					
MSMA CAS Number: 2163-80-6	25			monthly	ug/L					
Oxadiazon CAS Number: 19666-30-9	25			monthly	ug/L					
Prodiamine CAS Number: 29091-21-2	25			monthly	ug/L					
Propamocarb CAS Number: 24579-73-5	25			monthly	ug/L					
Quintozene CAS Number: 82-68-8	PQL			monthly	ug/L					

INDUSTRIAL APPLICATION FORM NY-2C
Section III - Sampling Information

Facility Name: **Belleayre Resort At Catskill Park** SPDES No.: **NY-027-0679**

Outfall No.: **Estimated Values for all**

3. Projected Effluent Quality - Priority Pollutants, Toxic Pollutants, and Hazardous Substances

Provide analytical results of at least one analysis for each pollutant that you know or have reason to believe is present in this discharge, as well as for any GC/MS fractions and metals required to be sampled from Section III Forms, Item 2.a on the preceding page.

Pollutant and CAS Number	Effluent data				Units				Intake data (optional)			Believed present, no sampling results available
	a. Maximum daily value (1)Concentration	b. Maximum 30 day value (if available) (1)Concentration	c. Long term average value (if available)		a. Concentration	b. Mass	d. Number of analyses	d. Number of analyses	a. Long term average value (1)Concentration	(2) Mass		
			(1)Concentration	(2) Mass						(1)Concentration	(2) Mass	
CAS Number: Siduron 1982-49-6	25				ug/L		monthly					
CAS Number: Triclopyr 55335-06-3	25				ug/L		monthly					
CAS Number: Trifloxystrobin 141517-21-7	1.8				ug/L		monthly					
CAS Number: Trifluralin 1582-09-8	1.2				ug/L		monthly					
CAS Number: Vinclozolin 50471-44-8	25				ug/L		monthly					
CAS Number:												
CAS Number:												
CAS Number:												
CAS Number:												
CAS Number:												
CAS Number:												
CAS Number:												
CAS Number:												

