

Notice: Pursuant to s. 283.84, Wis. Stats., and ch. NR 217 Wis. Adm. Code, this form must be completed by any WPDES permittee that is using water quality trading as a method of complying with a permit limitation. Failure to complete this form would not result in penalties. Personal information collected will be used for administrative purposes and may be provided to requesters to the extent required by Wisconsin's Open Records Law (ss. 19.31 - 19.39, Wis. Stats.).

Applicant Information				
Permittee Name Albany Wastewater Treatment Facility		Permit Number WI- 0021199		Facility Site Number
Facility Address 206 N Water Street			City Albany	State WI
			ZIP Code 53502-0342	
Project Contact Name (if applicable) Lonnie Gill		Address 206 N. Water St.		City Albany
				State WI
				ZIP Code 53502
Project Name Village of Albany Phosphorus Trading				
Receiving Water Name Sugar River		Parameter(s) being traded Phosphorus		HUC 12(s) 070900040605
Is the permittee in a point or nonpoint source dominated watershed? (See PRESTO results - http://dnr.wi.gov/topic/surfacewater/presto.html)				
			<input type="radio"/> Point source dominated	
			<input checked="" type="radio"/> Nonpoint source dominated	

Credit Generator Information	
Credit generator type (select all that apply):	<input type="checkbox"/> Permitted Discharge (non-MS4/CAFO) <input type="checkbox"/> Urban nonpoint source discharge <input type="checkbox"/> Permitted MS4 <input checked="" type="checkbox"/> Agricultural nonpoint source discharge <input type="checkbox"/> Permitted CAFO <input type="checkbox"/> Other - Specify: _____
Are any of the credit generators in a different HUC 12 than the applicant?	<input checked="" type="radio"/> Yes; HUC 12: 070900040601, 070900040602 <input type="radio"/> No <input type="radio"/> Unsure
Are any of the credit generators downstream of the applicant?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unsure
Will a broker/exchange be used to facilitate trade?	<input type="radio"/> Yes; Name: _____ <input type="radio"/> No <input checked="" type="radio"/> Unsure

Point to Point Trades (Traditional Municipal / Industrial Discharge, MS4, CAFO)				
Discharge Type	Permit Number	Name	Contact Address	Is the point source credit generator currently in compliance with their permit requirements?
<input type="radio"/> Traditional <input type="radio"/> MS4 <input type="radio"/> CAFO				<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unsure
<input type="radio"/> Traditional <input type="radio"/> MS4 <input type="radio"/> CAFO				<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unsure
<input type="radio"/> Traditional <input type="radio"/> MS4 <input type="radio"/> CAFO				<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unsure
<input type="radio"/> Traditional <input type="radio"/> MS4 <input type="radio"/> CAFO				<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unsure
<input type="radio"/> Traditional <input type="radio"/> MS4 <input type="radio"/> CAFO				<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unsure

Notice of Intent to Conduct Water Quality Trading

Form 3400-206 (1/14)

Page 2 of 2

Point to Nonpoint Trades (Non-permitted Agricultural, Non-Permitted Urban, etc.)

List the practices that will be used to generate credits:

- Whole Field Management
- Companion Crops (perennial vegetation)
- Conservation Easement (perennial vegetation)

Method for quantifying credits generated: Monitoring
 Modeling, Names: SnapPlus
 Other: _____

Projected date credits will be available: 07/01/2021

The preparer certifies all of the following:

- I am familiar with the specifications submitted for this application, and I believe all applicable items in this checklist have been addressed.
- I have completed this document to the best of my knowledge and have not excluded pertinent information.

Signature of Preparer <i>De Miller</i>	Date Signed 7/3/19
-------------------------------------------	-----------------------

Authorized Representative Signature

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision. Based on my inquiry of those persons directly responsible for gathering and entering the information, the information is, to the best of my knowledge and belief, 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.

Signature of Authorized Representative <i>Kim A. Stevens</i>	Date Signed 7/8/19
-----------------------------------------------------------------	-----------------------