IOWA DEPARTMENT OF NATURAL RESOURCES
WATER QUALITY BUREAU

PETITION FOR WAIVER

To obtain a waiver to an administrative rule adopted by the DNR a petitioner must provide comprehensive justification that satisfies all of the criteria in Iowa Code section 17A.9A and Iowa Administrative Code Chapter (IAC) 7 IAC 2504, and either 567 IAC 60.2(5)*"b"*, 567 IAC 60.3(6)*"e"*(1), 567 IAC 43.3(2)*"b"*, 567 IAC 39.8, or 567 IAC 49.4. This includes, but is not limited to, the following criteria:

1. The application of the rule would pose an undue hardship on the person for whom the waiver is requested.
2. The waiver from the requirements of a rule in the specific case would not prejudice the substantial legal rights of any person.
3. The provisions of a rule subject to a petition for a waiver are not specifically mandated by statute or another provision of law.
4. Substantially equal protection of public health, safety, and welfare will be afforded by a means other than that prescribed in the particular rule for which the waiver is requested.

This form will assist you in providing the information that is necessary for the DNR to grant a waiver. The form must be submitted to the DNR and must contain an adequate amount of factual and concise information. The obligation rests with the petitioner to provide the evidence which establishes that all of the criteria are satisfied. The DNR may require additional information to further support the waiver request.

Petitions will be comprehensively evaluated by the DNR. The DNR reserves the right to place any condition on the waiver. If information is not inclusive, concise, or does not adhere to the justifications and/or proof the petitioner has submitted, the waiver may be denied. Upon review, the DNR will grant or deny the waiver in writing.

Waivers are temporary unless evidence is shown that a temporary waiver would be impracticable. Once the waiver expires, the rule will be enforceable. There is no automatic renewal of a waiver. The term of a waiver is 1 (one) year, unless the permittee can justify a longer term or permanent time frame. The DNR may renew a waiver at its discretion. Please note that the DNR is not allowed to waive or alter a statutory requirement.

Within 30 days of submission of this petition, petitioners must provide notice by certified mail of the pending petition, including a concise summary of its contents, to all persons to whom notice is required by any provision of law. A written statement shall be provided to the DNR attesting that the required notice has been provided. The DNR may give notice to other persons.

PERMIT/PROGRAM

A waiver is being requested for the following permit/program: (Select only one applicable permit/program box. Submit a separate request for each specific waiver and permit/program area.)

☐ National Pollution Discharge Elimination System (NPDES) - include justification pertaining to 567 IAC 60.3(6)*"e"*(1)
☐ Wastewater Construction - include justification pertaining to 567 IAC 60.2(5)*"b"*
☐ Water Supply Operations - include justification pertaining to 567 IAC 43.3(2)*"b"*
☐ Water Supply Construction - include justification pertaining to 567 IAC 43.3(2)*"b"*, 567 IAC 39.8, or 567 IAC 49.4

To obtain a waiver pertaining to 567 IAC Chapter 69, private sewage disposal systems, please go to the Private Sewage Disposal and Septage webpage on the Iowa DNR website.

Submit this request electronically to the email address associated with the program in which the waiver is requested.
National Pollution Discharge Elimination System (NPDES): npdes.mail@dnr.iowa.gov
Wastewater Construction: wastewater-engineering@dnr.iowa.gov or assigned program staff
Water Supply Operations or Construction: watersupply-engineering@dnr.iowa.gov or assigned program staff

Contact Information

Petitioner Information

Name: _____

Address: _____

City, State, Zip: _____

Email: _____ Telephone: _____

Facility Information

Name: _____ Facility ID/Permit #: _____

Address: _____

City, State, Zip: _____

Email: _____ Telephone: _____

Petitioner Justification

Each question must be answered using evidence which establishes that all of the criteria are satisfied. Additional attachments may be provided.

1. Describe the specific requested waiver:

2. Cite the specific Administrative Rule from which the waiver is requested:

3. List relevant facts which justify the waiver:

4. Why would a denial of this waiver request pose an undue hardship? Clear and convincing evidence must be provided on why the rule would pose and undue hardship for whom the waiver was requested. Please include specifies in your answer, such as the number of samples a certified lab can process in a week, site specific spatial constraints, etc.

5. If the waiver is granted, would it prejudice the substantial legal rights of any person? ☐ Yes ☐ No. If yes, describe how.

6. Is the provision of rule subject to this petition for a waiver specifically mandated by statue or another provision of law? This includes both state law and federal law.

7. How will substantially equal protection of public health, safety, and welfare be afforded by a means other than that prescribed in the particular rule for which the waiver is requested? Attach additional information to support your justification.

8. What additional permits are held by the facility?

9. What operations are included in the waiver request? If this waiver request is for a construction permit, the answer may be Not Applicable.

10. When is the facility in operation, yearly or seasonal? If seasonal, describe the duration of operations. If this waiver request is for a construction permit, the answer may be Not Applicable.

11. In the past 5 years has the facility been issued a Notice of Violation (NOV)? ☐ Yes ☐ No. If yes, explain:

12. In the past 5 years has the facility been issued an Administrative Consent Order? ☐ Yes ☐ No. If yes, explain:

13. In the past 5 years has the facility been in a court of law? ☐ Yes ☐ No. If yes, explain:

14. Has the facility been involved in contested case proceedings? ☐ Yes ☐ No. If yes, explain. Include the case number of any related contested case.

15. Are there any public agencies, political subdivisions of the state or federal government, person or entity which may be affected by the granting of the proposed waiver? ☐ Yes ☐ No. If yes, you must provide the name(s), address(es),telephone number(s), and other relevant contact information.

16. What persons have knowledge of relevant facts related to the proposed waiver? Provide names, addresses, telephone numbers, and other relevant contact information. Signed releases authorizing these individuals to furnish the Department with relevant information shall be included with this petition.

17. Pursuant to 561 IAC 10.5, a waiver shall not be permanent. Is a temporary waiver impractical for the facility?

☐ Yes ☐ No. If yes, describe why a temporary waiver would be impracticable and describe the requested time period for the waiver. If this waiver request is for a construction permit, the answer may be Not Applicable.

18. Do you know how the DNR has treated similar situations? ☐ Yes ☐ No. describe how similar situations were handled:

19. If this petition is for a wastewater construction permit waiver, the petitioner must attach an engineering and technical justification for a wastewater design standards waiver. This justification must be completed by a professional engineer licensed in the state of Iowa and shall be certified by the engineer's certification statement: seal and signature. ☐ Engineering and technical justification attached ☐ Not Applicable

PETITIONER CERTIFICATION

The DNR shall grant or deny a petition for a waiver with 120 days of the receipt of the petition. Failure of the DNR to grant or deny a petition within the required time period shall be deemed a denial of that petition by the DNR. A waiver is void if the material facts are not true or if facts have been withheld. The DNR reserves the right to cancel a waiver at any time if the DNR finds that the facts as stated in the request are not true, material facts have been withheld, the alternative means of compliance provided in the waiver have failed to achieve the objectives of the statute, or the requester has failed to comply with the conditions of the waiver.

By signing this petition, I certify that all information listed on this petition and the attached additional information is factual and accurate.

Signature: _____ Date: _____

Name: _____ Position: _____