NOI Notice of Intent (NOI) to Discharge Pesticides on or Near Waters of the State Under the UPDES General Permit No. UTG-170000

Submission of this Notice of Intent constitutes notice that the party(s) identified in this form intends to be authorized by UPDES General Permit No. UTG-170000 issued for pesticide discharges associated with pest control in the State of Utah. Becoming a permittee obligates such discharger to comply with the terms and conditions of the permit. ALL NECESSARY INFORMATION MUST BE PROVIDED ON THIS FORM.

OPERATOR INFORMATION:

NOI Submission Date: ________________ General Permit Expiration Date: ________________

Establishment Name (Operator): __________________________ Phone: __________________________

Responsible Contact Person: __________________________ Phone: __________________________

Physical Address: __________________________

Mailing Address: __________________________

City: __________________________ State: ____ Zip: __________________________

Email Address: __________________________

If the pesticide application takes place on any Indian country land, coverage is not available under this permit. Please contact Dave Rise of the EPA at (406) 457-5012, or Lisa Luebke at (303) 312-6256.

6-digit NAICS code for primary industry activity of this establishment: ________________

Location of UPDES Records for this establishment (check one):

☐ Same as Establishment Name (Operator) address:

☐ Other:

Pesticide Use Patterns for this establishment (check all that apply):

☐ Mosquitoes and other insect pests

☐ Weed and Algae Control

☐ Nuisance Animal Control

☐ Forest Canopy Pest Control

Receiving Waters:

☐ A map is provided for the location(s) of pesticide application;

☐ A description of the locations of pesticide application sites; as a minimum, county, city, and major water body(s) below for this use, the hydrologic unit code (HUC) if available, the name of major water body(s), and latitude and longitude of any major unnamed water body(s).

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<th>Lat and Long of Unnamed Water Body (if available)</th>
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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. I further certify that the applicant has sufficient title, right or interest in the property where the proposed activity occurs.

Signature: ___________________________ Date: ___________________________

Printed Name: (Person Responsible for, or Supervising the Pesticide Application)

______________________________

Title: ____________________________

Email Address: _____________________

This space for office use only: