STATE OF UTAH, DEPARTMENT OF ENVIRONMENTAL QUALITY, DIVISION OF WATER QUALITY Mailing Address: P.O. Box 144870, Salt Lake City, Utah 84114-4870								
Physical Address: 195 North 1950 West (801) 536-4300								
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: _		Sta	ate: 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	e for primary industry :	activity of this establishm	ant.				
	Location of UPDES	Records for this estab	lishment (check one):	епт:				
	Same as Est	ablishment Name (Ope	rator) address:					
	Other:		•					
			nt (check all that apply):					
	_	and other insect pests Algae Control						
		nimal Control						
		ppy Pest Control						
	Receiving Waters:		~					
	A map is pr	ovided for the location(s) of pesticide application	;				
	A descriptio	n of the locations of pes	ticide application sites; a	s 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).								
unnamed water body(s).								
Count	Cit	W-4. D-1						
County	City	Water Body	Hydrologic Unit Code (if available)	Lat and Long of Unnamed Water Body (if available)				

County	City	Water Body	Hydrologic Unit Code (if available)	Lat and Long of Unnamed Water Body (if available)			
547							
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 o	office use only:						
