NOT		rth 1950 West, P.O. Box 144870, Salt	UALITY, DIVISION OF WATER QUALITY Lake City, Utah 84114-4870
	Notice of Terminatior	n (NOT) for Storm Water Discharges A	Associated with Construction Activity Under the SEE <u>REVERSE FOR INSTRUCTIONS</u>
Submission of t authorized to di	his Notice of Termination scharge storm water purs	n constitutes notice that the owner/operator ide uant to the Construction General Permit or Co	entified in Section II of this form or in the NOI is no longer mmon Plan Permit from the site identified in Section III.
I. Permit NC	T Information		
UPDES Storm	Water (SW) General	Permit Number to be terminated:	
Select one of ch	neckboxes and fill out t	ransfer information if required:	
<u>COMPLI</u>	E TED PROJECT:	The project is finished and final stabiliz permit conditions.	zation has been achieved on the entire site according to
<u>NEW OW</u>	<u>/NER RESPONSIBL</u>	submitted to transfer the existing NOI t	required if an "Ownership Transfer Form" has been o a new owner. Only use this form if the new owner has n coverage for the entire site and the old owner is now
<u>SOLD LC</u>)TS /PARTIAL NOT:	Provide information on the new owner w responsible for their obtaining their own temporarily stabilized before being sold	the developer must periodically update the active lot list. who has purchased the lots and notify them that they are permit if construction is not complete. Lots must be at least to the final homeowner. Additional lots may be listed on the ve and the NOI updated to remove these lots.
If NEW OW	NER RESPONSIBLE	E or SOLD LOTS is checked fill out new	owner information below (additional lots on back of form):
		Contact person	
		Address	
		City Telephone Number	State Email Address
		If sold lot: Lot number to remove	Acres to remove:
II. Facility O	wner Information (the	same as was entered on the NOI who is se	eeking termination of permit responsibilities)
			Phone:
Name:			
Name: Address:			
Address:		State:	Zip:
Address:			Zip:
Address: City: III. Facility St	ite/Location Information	on (the same as was entered on the NOI)	
Address: City: III. Facility S Name:	ite/Location Informatio	on (the same as was entered on the NOI)	Phone:
Address: City: III. Facility S Name: Address:	ite/Location Information	on (the same as was entered on the NOI)	Phone: County:
Address: City: III. Facility S Name: Address: City:	ite/Location Informatio	on (the same as was entered on the NOI)	Phone: County:
Address:	ite/Location Informatio	on (the same as was entered on the NOI) State:	Phone: County: Zip:
Address: City: III. Facility S Name: Address: City: IV. Certificat I certify under	ite/Location Information	on (the same as was entered on the NOI)State:	Phone: County: Zip: with the applicable permit requirements (Construction
Address: City: III. Facility S Name: Address: City: IV. Certificat I certify under General Permithe NOI, wher	ite/Location Information ition: penalty of law that eit t or Common Plan Per e I was an operator, ha	on (the same as was entered on the NOI)State:	Phone: County: Zip: with the applicable permit requirements (Construction iated with construction activity from the facility identified in am no longer an operator at the construction site and a new
Address:	tion: penalty of law that eit t or Common Plan Per e I was an operator, ha ssumed operational con	on (the same as was entered on the NOI) State: her: a) the site is stabilized in accordance mit) and all storm water discharges associ ve ceased or have been eliminated or b) I ntrol for those portions of the construction	Phone: County: Zip: with the applicable permit requirements (Construction iated with construction activity from the facility identified in am no longer an operator at the construction site and a new a site where I previously had operational control. I
Address:	tion: penalty of law that eit t or Common Plan Per e I was an operator, ha ssumed operational con t by submitting this no	on (the same as was entered on the NOI)State:	Phone: County: Zip: Zip: with the applicable permit requirements (Construction iated with construction activity from the facility identified in am no longer an operator at the construction site and a new in site where I previously had operational control. I ized to discharge storm water associated with construction
Address:	tion: penalty of law that eit t or Common Plan Per e I was an operator, ha ssumed operational con tt by submitting this no this general permit, an	on (the same as was entered on the NOI)State: her: a) the site is stabilized in accordance mit) and all storm water discharges associ- ve ceased or have been eliminated or b) I ntrol for those portions of the construction otice of termination, I am no longer author d that discharging pollutants in storm water	Phone: County: Zip: with the applicable permit requirements (Construction iated with construction activity from the facility identified in am no longer an operator at the construction site and a new a site where I previously had operational control. I
Address: City: III. Facility S Name: Address: City: IV. Certificat I certify under General Permit the NOI, wher operator has a understand tha activity under State is unlaw: that the submit	tion: penalty of law that eit t or Common Plan Per e I was an operator, ha ssumed operational con at by submitting this no this general permit, an ful under the State of U	on (the same as was entered on the NOI)State:	Phone:
Address:	tion: penalty of law that eit t or Common Plan Per e I was an operator, ha ssumed operational con at by submitting this no this general permit, an ful under the State of U ttal of this notice of ter	on (the same as was entered on the NOI)State:	Phone:
Address: City: III. Facility S Name: Address: City: IV. Certificat I certify under General Permit the NOI, wher operator has a understand tha activity under State is unlaw: that the submit Quality Act. Print Name:	tion: penalty of law that eit t or Common Plan Per e I was an operator, ha ssumed operational con t by submitting this no this general permit, an ful under the State of U ttal of this notice of ter	ben (the same as was entered on the NOI)State:	Phone:County:Zip: _
Address:	tion: penalty of law that eit t or Common Plan Per re I was an operator, ha ssumed operational con tt by submitting this no this general permit, an ful under the State of U ttal of this notice of ter	on (the same as was entered on the NOI)State:	Phone:

Instructions for Completing Notice of Termination (NOT) Form

Who May File A Notice Of Termination (NOT) Form

Permittees who are presently covered under the State issued Utah Pollutant Discharge Elimination System (UPDES) General Storm Water Permit for Construction Activity or Common Plan Permit may submit a notice of termination (NOT) form when their facilities no longer have any storm water discharges associated with industrial activity (construction activity) as defined in the storm water regulations at UAC R317-8-3.9(6)(d)10 or (e)1, or when they are no longer the legal owner or person responsible for the project and the facilities.

Where to File NOT Form

Mail:Division of Water Quality
195 North 1950 West
P.O. Box 144870
Salt Lake City, Utah 84114-4870Fax: (801) 536-4301Email: wqinfodata@utah.gov

Section I – Permit/Site Information

Enter the existing UPDES Storm Water General Permit number assigned to the permitted site. If you do not know the permit number, contact the Division of Water Quality at (801) 536-4300. Select the checkbox that most appropriately describes why you are terminating permit coverage. If the permit has already been transferred to a new owner or operator then you do not need to submit this form.

Section II - Facility Operator Information

This form must be filled out and submitted by the owner or lessee listed on the notice of intent (NOI) that was submitted in the original NOI. In this section give the legal name of the person, firm, public organization, or any other entity that is filed as the owner at the facility or site described in this application that desires to terminate coverage. As the owner's agent, the general contractor can also fill out and submit the NOT. Enter the complete address and telephone number of the owner or operator.

Section III - Facility/Site Location Information

Enter the facility's or site's official or legal name and complete address, including city, state and ZIP code of the facility.

Section IV - Certification

State statues provide for severe penalties for submitting false information on this application form. State regulations require this application to be signed as follows:

For a corporation: by a responsible corporate officer, which means: (i) president, secretary, treasurer, or vice-president of the corporation in charge of a principal business function, or any other person who performs similar policy or decision making functions, or if authority to sign documents has been assigned or delegated to a manager in accordance with corporate procedures; or by a duly authorized representative (See for the CGP Appendix G.16, or for the Common Plan permit part 5.16).

For a partnership or sole proprietorship: by a general partner or the proprietor, respectively; or

For a municipality, State, Federal, or other public facility: by either a principal executive officer or ranking elected official.

Additional Space for Sold Lots:

Lot Number and Acres	Owner Info		
	Company/Individual Name		
	Contact person		
Lot #	Address		
Acres:	City	State	
	Telephone Number	Email address	
	Company/Individual Name		
	Contact person		
Lot #	Address		
Acres:	City	State	
	Telephone Number	Email address	
	Company/Individual Name		
	Contact person		
Lot #	Address		
Acres:	City	State	
	Telephone Number	Email address	

For office use only: Enter the contact information of user who transcribed the information from the paper form into the CGP application Name:

Organization:

Email:

Phone: