

Nevada Division of Environmental Protection Bureau of Water Pollution Control

NOTICE OF INTENT To be Covered under Nevada General Permit <u>GNEVOSDS09</u>					
Owner					
City	State_	Zip		Telephone ()	
Project Name:					
Location of OSD	S System: (required))			
City	Longitudo	State	County	Township	_Zip Range
					ĸange
 Category 2 - Ac Category 3 - Ni Certification: "I certify under pena accordance with a s submitted. I also co the project site from persons who manage submitted is, to the 	eptic tank and dispositivanced treatment an trogen reduction system alty of law that this docu- ystem designed to ass infirm that an Operation the start of activities, a ge the system, or those	Id/or recircula em Iment and all a ure that qualifie and that the OS persons direct and belief, true,	ttachments were ed personnel prop ance (O&M) mar DS will be compl ly responsible for , accurate, and co	prepared under my perly gathered and o nual has been comp iant. Based on my i gathering the infor pmplete. I am aware	y direction or supervision in evaluated the information bleted, will be maintained at inquiry of the person or mation, the information e that there are significant hs."
c .					
A copy of the permit will be mailed to you along with your discharge authorization:					
Send completed form to: Nevada Division of Environmental Protection Bureau of Water Pollution Control 901 S. Stewart Street, Suite 4001 Carson City, Nevada 89701-5249					