Notice of Termination ("NOT") for Coverage under a General National Pollutant Discharge Elimination System (NPDES) Permit

Submission of this NOT constitutes notice that the owner/operator identified below is no longer authorized to discharge under the NPDES General Permit program.

Mail the completed form with original signatures to:
Nevada Division of Environmental Protection
Bureau of Water Pollution Control
901 S. Stewart St., Suite 4001
Carson City, NV 89701

I. PERMIT INFORMATION

Are you filing this NOT due to a change in ownership or operator? Yes ☐ No ☐

If yes, stop here. Please refer to the respective General Permit Part "Transfer of Ownership or Control" for appropriate procedures in completing your change of ownership/operator.

Have all operations associated with this permit been terminated in accordance with applicable permit conditions? Yes ☐ No ☐

If No, provide reason for submission of this Notice of Termination:


Permit Identification Number (e.g. PGP-xxxx, DDP-xxxx, CSW-xxxx, ISW-xxxx, or MSW-xxxx): _______ - _______

Date of Termination: ________________________________

II. SITE OWNER/OPERATOR INFORMATION

Name: ____________________________________________ Phone: ____________________________

Address: ________________________________________

City: __________________________ State: ________________ ZIP Code: ___

Email address: ________________________________

901 S. Stewart Street, Suite 4001 • Carson City, Nevada 89701 • p: 775.687.4670 • f: 775.687.5856 • ndep.nv.gov
III. NEW SITE OWNER/OPERATOR INFORMATION (If applicable)

Name: ___________________________ Phone: ___________________________
Address: ___________________________
City: ___________________ State: _______________ ZIP Code: __________
Email address: ___________________________

Has a new NOI been submitted? Yes ☐ No ☐  If yes, what is the new Site ID Number?
(e.g. PGP-xxxx, DDP-xxxx, CSW-xxxx, ISW-xxxx, or MSW-xxxx): _____-_____

IV. FACILITY/SITE LOCATION INFORMATION

Name: ___________________________ Phone: ___________________________
Address: ___________________________
City: ___________________ State: _______________ ZIP Code: __________
APN: ___________________________

V. CERTIFICATION

“I hereby certify that I am familiar with the information contained in the application and that to the best of my knowledge and ability such information is true, complete, and accurate.”

Print Name: ___________________________ Date: ___________________________
Signature: ___________________________
Instructions to Complete the Notice of Termination (NOT) of Coverage under a NPDES General Permit

Who May File a Notice of Termination (NOT) Form?
Permittees who are presently covered under a Nevada-issued National Pollutant Discharge Elimination System (NPDES) General Permit may submit a Notice of Termination (NOT) form when their site/facilities no longer have any discharges activity as defined in the applicable permit, or when they are no longer the operator of the site.

Section I. Permit Information:
If you are filing this NOT because of a change in ownership, stop here, and refer to the appropriate General Permit Part: “Transfer of Ownership or Control” for appropriate procedures in completing your change of ownership/or operator.

If all applicable discharges at the facility or site identified in Section III have been terminated, check the “Yes” box. If you are filing the NOT for some other reason, please check the “No” box and indicate the reason for filing the NOT in the space below the boxes.

Enter your existing NPDES General Permit Identification Number (e.g. CSW-xxxx) assigned to the facility/site identified in Section III. If you do not know the permit number, contact NDEP’s Bureau of Water Pollution Control for assistance. Enter the date of termination.

Section II. Facility or Site Owner/Operator Information:
Give the legal name of the person, firm, public organization, or any other entity that owns or operates the site described in this NOT. The operator of the facility is the legal entity that controls the site's operation, rather than the plant or site manager. Do not use a colloquial name. Enter the complete contact information of the owner/operator, including mailing address, telephone number and email address.

Section III. New Facility or Site Owner/Operator Information(if applicable):
Give the legal name of the new person, firm, public organization, or any other entity that will own or operate the construction site described in this section. The new operator of the facility is the legal entity that will control the site's operation, rather than the plant or site manager. Do not use a colloquial name. Enter the complete contact information of the new owner/operator, including mailing address, telephone number and email address. The new owner operator should also indicate whether a new NOI has been submitted to NDEP. If this has been done, the new Site Identification Number (e.g. CSW-xxxx) should be added.

Section IV. Facility/Site Location Information:
Enter the site's official or legal name and complete address, including city, state and ZIP code, phone number and Assessor’s Parcel Number (“APN”) or Latitude and Longitude for site location.

Section V. Certification:
Federal statutes provide for severe penalties for submitting false information on this application form.
Federal 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 (ii) the manager of one or more manufacturing, production, or operating facilities employing more than 250 persons or having gross annual sales or expenditures exceeding $25 million (in second-quarter 1980 dollars), if authority to sign documents has been assigned or delegated to the manager in accordance with corporate procedures;
- For a partnership or sole proprietorship: by a general partner or the proprietor; or
- For a municipality, State, Federal, or other public facility: by either a principal executive officer or ranking.
- All documents submitted to this office must have an original signature(s). Photocopied and faxed documents will not be approved.