



Nevada Division of Environmental Protection

Bureau of Water Pollution Control

901 S. Stewart Street, Suite 4001, Carson City, Nevada 89701
Ph: 775-687-9418 Fax: 775-687-4684

On-site Sewage Disposal System General Permit Notice of Termination

Submission of this Notice of Termination (NOT) constitutes notice that the party identified below is no longer authorized to discharge domestic sewage to waters of the State under the On-site Sewage Disposal System (OSDS) General Permit. Any questions should be directed to the OSDS Program at (775) 687-9492. Submit form to the address shown above.

I. PERMIT INFORMATION - ALL SECTIONS MUST BE COMPLETED

A.) Check the applicable OSDS General Permit and provide the Permit ID#

[ ] GNEVOSDS09S [ ] GNEVOSDS09L [ ] OTHER

II. FACILITY OWNER/OPERATOR INFORMATION

Name: Phone:
Address:
City: State: ZIP Code:

III. FACILITY/SITE LOCATION INFORMATION

Name: Phone:
Address:
City: State: ZIP Code:

IV. CERTIFICATION

I hereby certify that the OSDS has been abandoned in full compliance with NDEP guidance document: Facility Abandonment Closure Plans WTS-20 (revised November 2012). Furthermore, I certify that I am familiar with the information contained in this termination notice, and that to the best of my knowledge and ability such information is true, complete, and accurate.

Print Name: Title:

Signature: Date:

# OSDS Notice of Termination Form

## Instructions

### Who May File a Notice of Termination Form

Permittees who are presently covered under an On-site Sewage Disposal System (OSDS) General Permit may submit a Notice of Termination (NOT) form when their facilities no longer discharge domestic sewage to waters of the State. Any questions should be directed to the OSDS Program at (775) 687-9492.

### Where to File NOT Form:

Nevada Division of Environmental Protection  
Bureau of Water Pollution Control  
901 S. Stewart Street, Suite 4001  
Carson City, NV 89701-5249

### Completing the Form

Type or print using upper-case letters in the appropriate areas only. Abbreviate if necessary to stay within the number of characters allowed for each item. Use only one space for breaks between words, but not for punctuation marks unless they are needed to clarify your response. If you have any questions about this form, telephone or write the OSDS Program at (775) 687-9492.

### Section I Permit Information

Enter the existing OSDS General Permit number assigned to the facility or site identified in Section III. If you do not know the permit number, telephone or write the OSDS Program. Indicate your reason for submitting this NOT by checking the appropriate box and submitting comments if necessary.

### Section II Facility Owner/Operator Information

Give the legal name of the person, firm, public organization, or any other entity that owns or operates the facility or site described in this application. The name of the owner/operator may or may not be the same name as the facility. The operator of the facility is the legal entity that controls the facility's operation, rather than the plant or site manager. Enter the complete address and telephone number of the owner/operator.

### Section III Facility/Site Location Information

Enter the official or legal name of the facility/site. In addition, provide the complete address, including city, state, and ZIP code.

### Section IV Certification

Federal statutes provide for severe penalties for submitting false information on this application form. The owner/operator must sign this document: a private individual, a corporate officer, a general partner, a proprietor, a principal executive, or a ranking elected official.