

NOTICE OF TERMINATION

for NPDES General Permit to Discharge Storm Water Associated with

Construction Activity

Use this form to end permit coverage once all soil disturbance activities have been completed and final stabilization of exposed soils has occurred. **Please print in ink or type.**

Name

Phone No.

I. Permittee

Legal Name

II. Legally Authorized Representative

(Person completing this form if different from Permittee)

Phone No.

Company			Company			
Mailing Address			Mailing Address			
City	State	Zip Code	City	State	Zip Code	
Facility/File ID (located on face page of permit)			Title			
III. Site Loc	ation/Address		IV. Stat	tus of Construction	n Activity	
Site Name				All soil disturbance activities by the permittee have been completed.		
Street Address (or Location Description)			The site has undergone final stabilization of all exposed soils through vegetation or other measures and all			
Section	Township	Range		stormwater discharges from construction activities that are authorized by this permit are eliminated.		
City (or nearest City) Zip Code			All temporary erosion and sediment controls have been removed and properly disposed, unless local ordinance			
County			requires otherwise in the completion of the project. Date above items were completed:			
	DI .		ertification			
this NPDES ger authorized to di- waters of the Ur	penalty of law that all stoneral permit have been elscharge stormwater assonited States is unlawful usubmittal of this Notice	rmwater discharges a iminated. By submit ciated with constructi nder the Clean Water	ssociated with co ting this Notice of ion activity under r Act where the d	of Termination, I understant this general permit, and this this general permit, and the discharge is not authorized	his site that are authorized by	
Signature of L	egally Authorized Rep	resentative		Date		
Name of Lega	lly Authorized Represe	entative (Type or P	rint)	_		



Instructions for Completing the Notice of Termination Form for NPDES General Permit to Discharge Stormwater Associated with Construction Activity

This Notice of Termination Form is for a permittee that currently is assigned coverage under Oregon's NPDES general permit for the discharge of stormwater associated with construction activity. Use this form to end permit coverage once all soil disturbance activities have been completed and final stabilization of exposed soils has occurred. **Please print in ink or type.**

I. Permittee

Complete as indicated. The permittee is the name of the company or person as it appears on the permit. Only the permittee or the permittee's legally authorized representative has authority to terminate permit coverage.

Note: If you are not the current permittee but should be, you need to transfer the permit. Please use the Transfer of Ownership form at

http://www.deq.state.or.us/wq/wqpermit/permitfaqs.htm#q12 or contact DEQ at one of the offices listed below.

II. Legally Authorized Representative

Complete as indicated if different from the Permittee. This is the person that is completing the form and certifying that soil disturbance activities have been completed and final stabilization of exposed soils has occurred.

III. Site Address/ Location

Complete as indicated. If a street address is not yet available, enter a description of the location, including township, section, and range. Also provide the city (or nearest city) and county for the construction site.

IV. Construction Activity

Check the "boxes" to indicate that all stormwater discharges associated with construction activity have been eliminated, final stabilization of the site is complete, and temporary erosion and sediment control measures have been properly disposed. Also, provide the date of completion for these activities. Your permit will not be terminated if these activities have not been completed.

Certification

This statement should be read carefully by the permittee, owner or legally authorized representative. The person signing this form must print or type their name for clarity then sign and date the document on the lines provided.

Form Submittal & For More Information

Submit this form to the appropriate regional office. There is no fee required for this action. If you have any questions, please contact one of the regional offices listed below.

DEQ Northwest Region

2020 SW 4th Ave., Suite 400 Portland, OR 97201-4987 (503) 229-5263 or 1-800-452-4011

DEQ Western Region

750 Front St. NE, Suite 120 Salem, OR 97301-1039 (503) 378-8240 or 1-800-349-7677

DEQ Eastern Region

700 SE Emigrant, Suite 330 Pendleton, OR 97801 (541) 276-4063 or 1-800-452-4011