# WASHINGTON STATE OFPARTMENT OF E.C.O.L.O.G.Y

#### **Transfer of Coverage**

#### Construction Stormwater General Permit

# This form transfers permit coverage for all or a portion of a site to one or more new operators

This is used to process two types of permit transfers: 1) Complete Transfer, or 2) Partial Transfer. Determine which type of transfer applies to your situation before filling out the form.

**1. Complete Transfer:** means the original permittee has sold or otherwise released control of the entire site to one or more owner/operators.

#### **Required Paperwork for Complete Transfer:**

- Either the current permittee or the new permittee(s) must submit a complete and accurate
  Transfer of Coverage Form (Attachment A) for each new operator to Ecology. The form
  must be signed by the current permittee and the new permittee.
- The current permittee must submit a Notice of Termination form (Attachment B) to Ecology.
  - The Notice of Termination form should be submitted <u>at the same time</u> as the signed Transfer of Coverage Form(s); <u>or after</u> the Transfer of Coverage form(s) is submitted to Ecology.
  - Ecology will not process Transfer of Coverage forms on sites that have already been granted termination (permit cancelled), unless the complete Transfer of Coverage form is:
    - Signed by both parties (new and old operators) within 30 days after the Notice of Termination form is received by Ecology, and
    - Submitted to Ecology within 60 days after the Notice of Termination form is received by Ecology.
- <u>2. Partial Transfer:</u> means the original permittee retains control over some portion of the site after selling or releasing control over a portion of the site.

#### Required Paperwork for Partial Transfer:

- Either the current permittee or the new permittee(s) must submit a complete and accurate
  Transfer of Coverage Form (Attachment A) for each new operator to Ecology. The form
  must be signed by the current permittee and the new permittee.
- For partial transfers, the original permittee should submit the Notice of Termination (Attachment B) only if they no longer own any portion of the site or if the portions they still own are fully stabilized.

#### For Your Information:

- When this form is 1) completed, 2) signed by the current and new permittee, and 3) submitted to Ecology; permit transfers are effective on the date specified at the top of the next page, unless Ecology notifies the current permittee and new permittee of it's intention to revoke coverage under the General Permit.
- The new permittee should keep a copy of the signed Transfer of Coverage form which serves as proof of permit coverage until Ecology sends documentation in the mail.
- Following the transfer, the new permittee must either: (1) use the Stormwater Pollution Prevention Plan (SWPPP) developed by the original operator and modified as necessary, or (2) develop and use a new SWPPP which meets the requirements of the Construction Stormwater General Permit.

#### Type of Permit Transfer (check one): Partial Transfer Complete Transfer Specific date that permit responsibility, coverage, and liability is transferred to new operator: **Current Operator/Permittee Information\*** \*For partial transfers: List total area of soil disturbance remaining under your operational control following transfer: \_\_\_\_\_ acres. List total size of project/site remaining under your operational control following transfer: \_\_\_\_\_ acres. Submitting this form meets the requirement to submit an updated application/NOI (General Permit Condition G9) Current Operator/Permittee Name Company Signature\_ Title Mailing Address City State Zip Phone No. Business Ext. Cell (Optional) E-mail (Optional) **New Operator/Permittee Information NEW OPERATOR/PERMITTEE** SITE OWNER\* Operator: means any party associated with a construction \*If different than New Operator/Permittee – if same, leave project that either has operational control over construction blank plans and specifications; OR has day-to-day operational control of activities which ensure compliance with permit conditions. Contact Name Phone No. Phone No. Owner's Name Title Title Company Company Name Unified Business Identifier (UBI) 9 digit number provided by Dept of Unified Business Identifier (UBI) 9 digit number provided by Dept of Revenue to business owners. Individuals without a UBI, enter none Revenue to business owners. Individuals without a UBI, enter none Mailing Address Mailing Address Citv State Zip + 4 Citv State Zip + 4 Email address (Optional) Fax No. Email address (Optional) Fax No. **ON-SITE CONTACT Person BILLING ADDRESS** Typically the Certified Erosion & Sediment Control Lead Contact Name Phone No. Contact Name Phone No. Title Title Company Name Company Name Mailing Address Mailing Address State Zip + 4 City State Zip + 4 City Cell Phone (Optional) Email Address (Optional) Fax Number

ATTACHMENT A: Permit Transfer for Permit No. WAR-

V. Site/Project Information				
Site/Project Name	Total siz	e of your site/project (that	you own/control):	acres.
Street Address or Location Description (If the project or site lacks a street address, indicate the general location of the site. For example, Intersection of Highways 61 and 34.)	(Provide project, infrastru	ea of soil disturbance for yethe estimated total area to including grubbing, excavorative installation. Note: 1	to be disturbed during t ation, grading, utilities a acre = 43,560 ft²)	the life of the and
Type of Construction Activity (check all that apply):  Single Family Multi-Family Residential Commercial Industrial Highway Utilities:  Other:	*If Y plan  How mate (estimate)  How mate (estimate)  Will any	nny cubic yards of recycled	velopment, etc)?  Ye soil disturbance for ent acres.  e will be poured?  d concrete will be used treated base, cement	es* No lire commonyd³ ?yd³
City (or nearest city):	Estimate	ed project start-up date (m	ım/dd/yy):	
County:	Estimate	ed project completion date	e (mm/dd/yy):	<u></u> .
Record the latitude and longitude of the <i>main entrance</i> to the site. For projects without a main entrance (pipelines, roads, etc.), record approximate center of site.  degrees, minutes, seconds  Latitude  * For assistance with latitude and longitude refer to: <a href="https://www.epa.gov/tri/report/siting">www.topozone.com</a> , <a href="https://cfpub1.epa.gov/npdes/stormwater/latlong.cfm">https://www.epa.gov/tri/report/siting</a> tool/index.htm.				
VI. Discharge/Receiving Water Information	<u> </u>			=
Discharge: Does your construction site's stormwater or dewatering water have the potential to discharge:  ☐ Directly into a surface water body/water bodies? ☐ Indirectly into a surface water body/water bodies (for example, via a storm drain system, roadside ditch, pipe, etc.)? ☐ Provide locations on the next page or on a separate sheet, if necessary. ☐ To ground with 100% infiltration, with no potential to reach surface waters under any condition?  Does your project include dewatering? ☐ Yes ☐ No				
You must include dewatering plans and discharge locat		our site Stormwater Polluti	on Prevention Plan.	
Location of Discharge into Receiving Waters				
Enter the water body name and latitude/longitude* of the point(s) where the site has the potential to discharge into a water body (enter all locations). Discharges to receiving waters may be direct or indirect through a storm drain system or ditch. Some large construction projects (subdivisions, roads, pipelines, etc.) may discharge into several water bodies. If the creek or tributary is unnamed, use a format such as "unnamed tributary to Bull Run Creek". (Attach a separate sheet if necessary.)				
Receiving Water Name		Latitude degrees, minutes, seconds	Longitud degrees, minutes	
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<sup>\*</sup>For assistance with latitude and longitude refer to: <a href="www.topozone.com">www.topozone.com</a>,
<a href="http://cfpub1.epa.gov/npdes/stormwater/latlong.cfm">http://cfpub1.epa.gov/npdes/stormwater/latlong.cfm</a> or <a href="http://www.epa.gov/tri/report/siting\_tool/index.htm">http://www.epa.gov/tri/report/siting\_tool/index.htm</a>

To the best of your knowledge, are any of the water bodies listed by on the 303(d)list, or does it have an approved TMDL for the state of the state				
Before signing certification statement below, please of coverage form is complete:	use the following checklist to ensure your			
☐ All spaces on this form have been completed (attach additional sheets if necessary).				
☐ The transfer form is signed by both the current permittee and the new permittee(s).				
☐ New Operator/Permittee: Before you submit this form to Ecology, please retain a copy for your records – this will serve as proof of permit coverage until documentation arrives from Ecology.				
☐ For a complete transfer (entire site), where the current permittee will retain no portion of the site, a complete Notice of Termination form (attached) is included with this submittal (or will be submitted following transfer).				
XI. Certification of New Permittee				
Based on my inquiry of the person or persons who manage the	ersonnel properly gather and evaluate the information submitted. e system or those directly responsible for gathering the owledge and belief, true, accurate, and complete. I am aware that			
Operator's Printed Name	Title			
Operator's Signature	Date			
P. O. Box 47	Unit – Construction			
f you have any questions, please call:				
<ul><li>Lincoln, Spokane, Grant, Adams, Whitman, Fra</li><li>360-407-6858 Joyce Smith for counties: Okano</li></ul>	ng, Island, San Juan /hatcom, Skagit, Snohomish, Ferry, Stevens, Pend Oreille,			

If you need this publication in an alternate format, please call the Water Quality Program at 360-407-6401. Persons with hearing loss can call 711 for Washington Relay Service. Persons with a speech disability can call 877-833-6341.

### **ATTACHMENT B: Notice of Termination Form**



# Notice of Termination Form Construction Stormwater General Permit

	Dormit # WAD	
١.	Permit # WAR	

Use this form to request termination of permit coverage

II. OPERATOR (Permittee)	III. BILLING ADDRESS
Contact Name Phone No. Cell Phone No.	Contact Name Phone No. Cell Phone No.
Title	Title
Company	Company Name
Mailing Address	Mailing Address
City State Zip	City State Zip
Email address Fax No.	Email address Fax No.
Alternate contact:	Alternate contact:
Name Phone No.	Name Phone No.
Email Cell Phone No.	Email Cell Phone No.
IV. SITE LOCATION/ADDRESS	
Site Name	Total area of soil disturbance for your site/project: acres
Street Address (or Location Description)	
City (or nearest city) Zip	County
V. CONSTRUCTION ACTIVITY- The site is eligible for termi	nation by one of the following methods:
The site has undergone final stabilization. The ope temporary BMPs, and eliminated all stormwater dis	rator has permanently stabilized all exposed soils, removed all scharges associated with construction activity.
	e not undergone final stabilization (Permit Condition S10.A.1) on G9), and the permittee no longer has operational control of ner Transfer of Coverage paperwork on:(date).
	nal stabilization (Permit Condition S10.A.1) have been sold I of the construction activity. We will not be submitting Please provide new owner contact info:
VI. CERTIFICATION OF PERMITTEE(S). Please read the certi	fication statement carefully before signing.
by the National Pollution Discharge Elimination System (NPDES) a no longer own or operate on this site. I understand that by submitti stormwater associated with construction activity by the general per Washington is unlawful under the Clean Water Act where the disch	ated with construction activity from the identified site that are authorized nd State Waste Discharge general permit have been eliminated, or that I ng this Notice of Termination that I am no longer authorized to discharge mit, and that discharging pollutants in stormwater to waters of the State of arge is not authorized by a NPDES permit. I also understand that the ee from liability for any violations of this permit or the Clean Water Act."
Operator Printed Name	Title
Operator Signature	 Date

#### Instructions for Notice of Termination Form

Submit a Notice of Termination Form to the Department of Ecology: when 1) all stormwater discharges from a construction site are eliminated and the site has undergone final stabilization, OR 2) the site has been sold or transferred to a different operator(s). The permit fees will continue until the permit is terminated.

**I. Permit Number** Enter the permit number for the facility.

II. Operator Give the name, address, and telephone number of the person who is responsible

for the permit.

III. Billing Address

Indicate where the final fee invoice should be sent.

IV. Site Location Enter the street address or location description, including the city or nearest city

and county for the construction site. Construction sites that do not have a street address must also provide a legal description in the space provided or as an

attachment.

V. Construction Activity Indicate:

1. That all stormwater discharges associated with construction activity are eliminated and final stabilization of all exposed soils is completed. Final stabilization means the establishment of a permanent vegetative cover, or equivalent permanent stabilization measures which prevent erosion.

2. That the permit has been transferred to another responsible party(ies) for management *and provide the information required on the Transfer of Coverage* 

form.

3. That all portions of the site that have not undergone final stabilization have been

sold.

VI. Certification of Permittee(s) Read this statement carefully. The operator or authorized representative of the

operator must print his or her name for clarity, then sign and date the document on the lines provided. Refer to General Condition G2 in the permit for signatory

requirements.

## Please sign and return this original document to the following address and retain a copy for your records:

Department of Ecology Stormwater Unit – Construction PO Box 47696 Olympia, WA 98504-7696

**Note**: Your site remains under permit and subject to all permit conditions until your termination is effective. Continue to comply with permit conditions <u>until the earlier of the following two dates</u>:

- 1) The date you receive written notification from Ecology that termination is effective; **OR**
- 2) The 31<sup>st</sup> day following Ecology's receipt of this form.

#### Questions? Call:

- 360-407-7451 Josh Klimek for city of Seattle or counties: Kitsap, Pierce, Thurston
- 360-407-7229 Elaine Worthen for counties: King, Island, San Juan
- 360-407-6437 Carrol Johnston for counties: Whatcom, Skagit, Snohomish, Ferry, Stevens, Pend Oreille, Lincoln, Spokane, Grant, Adams, Whitman, Franklin, Walla Walla, Columbia, Garfield, Asotin
- 360-407-6858 Joyce Smith for counties: Okanogan, Chelan, Douglas, Kittitas, Yakima, Benton, Klickitat, Skamania, Clark, Cowlitz, Wahkiakum, Lewis, Pacific, Grays Harbor, Mason, Jefferson, Clallam

If you need this publication in an alternate format, please contact us at 360-407-6401 or TTY (for the speech and hearing impaired) at 711 or 1-800-833-6388.