Attachment G

Notice of Termination

Permit Tracking # _____ (**For Agency Use)**

Submit to:

Alaska Department of Environmental Conservation
Wastewater discharge Authorization Program
555 Cordova St.
Anchorage AK, 99501

APDES Program Notice of Termination
Of Wastewater Discharge

Submission of this Notice of Termination constitutes notice that the party identified in Section 2 of this form is no longer authorized to discharge under the associated APDES Permit. See page 3 for instruction on filling out this form.

Section 1. Permit Information

Discharge Type:

Permit ID: Date Discharge Terminated:

Section 2. Owner Information

Name:

Mailing Address:

City: State: Zip:

Phone: Fax:

Email:

Section 3. Facility Information

Name:

Mailing Address:

City: State: Zip:

Phone: Fax:

Facility Location
(For mobile operations submit the final location at which operations will cease):

Latititude: Longitude: Determined By: ☐ GPS ☐ Map ☐ Internet

Section 4. Reason For Termination

Check the appropriate box indicating the reason for terminating coverage.

☐ Operations have ceased at the facility and there are no longer discharges associated with the conditions of the referenced permit.

☐ Discharges from this facility have been covered by a different permit.
If checked please list permit used to cover this discharge:

☐ Other (Specify):

Section 5. Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature

Title

Printed Name

Date

Notice of Termination of Wastewater Discharges Form Instructions

This form should be used when discharges are being terminated. If the facility is changing ownership, use the "Name Change and/or Permit Transfer" form. A request to terminate an APDES permit must be in writing and must contain facts or reasons for the request in accordance with 18 AAC 83.130 (a). Upon receipt of this form, DEC will determine if the request meets the requirements as described in 18 AAC 83.140. If DEC approves the termination, the Department will notify the permittee that the permit will be terminated. This termination will be effective 30 days after notice is sent to the permittee in accordance with 18 AAC 83.130 (j). Until that time, the permittee is obligated to meet all requirements of the permit.

Section 1. Permit Information

1) Identify the type of discharge (e.g. domestic, seafood processing, etc.)
2) Fill in the Permit ID associated with the discharge.
3) Provide the date that the discharge will cease.

Section 2. Owner Information

1) Fill in the name of the Owner or Responsible Party for the facility.
2) Fill in the contact information for the Owner or Responsible Party.

IMPORTANT NOTE: The Responsible Party must be one of the following:

- for a corporation, a president, secretary, treasurer, or vice-president, or a manager whose authority is described in 18 AAC 83.385 (APDES) or 18 AAC15.030 (other wastewater discharges);
- for a partnership or sole proprietorship, the general partner or proprietor;
- for a municipality or other public entity, a principal executive officer or ranking elected official with appropriate authority.

Before submitting this form, please review the conditions of your wastewater permit or authorization to ensure compliance with any additional signature requirements.

Section 3. Facility Information

1) Fill in the name of the facility.
2) Fill in the contact information for the facility.

Section 4. Reason For Termination

1) Check the box that indicates the reason for termination.
2) If discharges are being covered by another permit, provide the Permit ID.
3) If "Other" is marked, specify the reason for termination.

Section 5. Certification

Signature and title of Responsible Party or duly authorized representative must be obtained before DEC will accept this Notice of Termination.

Submit to:

Alaska Department of Environmental Conservation
Wastewater Discharge Authorization Program
555 Cordova St.
Anchorage AK, 99501
For information, call 907-269-6285.