



NOTICE OF TERMINATION (NOT)
for AZPDES General Permits for Domestic Wastewater or Biosolids Preparation

Submitting this NOT constitutes notice that the signer is terminating coverage under an AZPDES General Permit (AZGP) for discharges of domestic wastewater or for biosolids preparation for the authorization number indicated. Unless notified otherwise by ADEQ, authorization to discharge to waters of the U.S. under this permit terminates at midnight on the day the NOT is received by ADEQ. To terminate your project, fax or submit a complete and accurate NOT to:

Arizona Department of Environmental Quality
Surface Water Section — Permits Unit
1110 West Washington, 5415A-1; Phoenix, Arizona 85007
FAX: (602) 771-4528

TYPE OF AZGP COVERAGE: _____ Infrequent Discharger _____ Minor WWTPs _____ Biosolids

I. PERMIT INFORMATION

DAC Authorization Number: _____ Name of Facility: _____
Name of signer on Notice of Intent (NOI) submitted to ADEQ: _____
Business / Agency of signer on NOI submitted to ADEQ: _____

II. COVERAGE IS BEING TERMINATED BECAUSE: (check those applicable to your situation)

- The discharge and/or biosolids preparation has been terminated.
- No discharge and/or biosolids preparation was conducted.
- The discharge and/or biosolids preparation is covered under another AZPDES individual or general permit.
If checked, provide the permit number: _____
- You are no longer the Owner/Operator of the facility or activity.
If checked, provide the following information concerning the new Operator/Owner:
Name and Firm/Agency: _____
Contact Person: _____ Phone: _____
Address/Location: _____
City: _____ State: |__|__| Zip Code: _____
(Note: The new owner must submit an NOI to obtain coverage)

III. MONITORING REPORT (Submit all applicable reports)

Have all Discharge Monitoring Reports (DMR) and/or Biosolids Annual Reports been submitted? Yes No
If no, attach completed Discharge Monitoring Report (DMR) Form(s) and/or applicable Biosolids Annual Report.

IV. CERTIFICATION

"I certify under penalty of law that either all discharges and/ or biosolids operations associated with this facility have been terminated or that I am no longer the responsible person for such discharges and/or biosolids operations. I understand that by submitting this NOT, I am no longer authorized to discharge and/or operate biosolids treatment under the AZPDES General Permit(s), and further, that such discharge is unlawful unless authorized under an AZPDES permit. I also understand that submittal of this NOT does not release persons from liability for any violations of this permit or of the Clean Water Act."

Printed Name: _____ Title: _____
Business / Agency: _____ Phone: _____
Signature: _____ Date: _____