



Colorado River Basin Regional Water Quality Control Board

BOARD ORDER CHANGE OF OWNERSHIP REQUEST FORM

Board Order \_\_\_\_\_ WDID \_\_\_\_\_

Facility Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

I request the transfer of the existing waste discharge requirements on \_\_\_\_\_ (effective date), contained in the above-referenced Board Order in accordance with the following:

TRANSFER FROM:

TRANSFER TO:

Former Facility Name \_\_\_\_\_

New Facility Name \_\_\_\_\_

Former Property Owner \_\_\_\_\_

New Property Owner \_\_\_\_\_

Former Operator \_\_\_\_\_

New Operator \_\_\_\_\_

I understand that I am responsible for compliance with the Board Order and will be billed an annual fee for the waste discharge from this facility. I certify that: 1) I have reviewed the Report of Waste Discharge and the Board Order; 2) the facility construction and discharges from the site have not substantially changed; and 3) I will notify the Board of any material change in this facility, any change in the amount, type or manner of waste discharge or any future change in the facility owner or operator.

Signature (New Owner/Operator) \_\_\_\_\_

Company name, if appropriate \_\_\_\_\_

Print Name (New Owner/Operator) \_\_\_\_\_

Telephone No. \_\_\_\_\_ Date \_\_\_\_\_

Mailing Address \_\_\_\_\_

Facility Contact Person \_\_\_\_\_ Telephone No. \_\_\_\_\_ email address \_\_\_\_\_

(FOR REGIONAL BOARD USE ONLY)

Transfer recommended \_\_\_\_\_ Transfer Recorded Date \_\_\_\_\_

NANCY WRIGHT, CHAIR | PAULA RASMUSSEN, EXECUTIVE OFFICER