

## NOTICE OF NON-APPLICABILITY

OF COVERAGE UNDER THE NPDES GENERAL PERMIT NO. CAS000001  
FOR DISCHARGES OF STORM WATER  
ASSOCIATED WITH INDUSTRIAL ACTIVITY

Submission of this Notice of Non-Applicability constitutes notice that the owner/operator of the facility identified on this form is not required to comply with NPDES General Permit NO. CAS000001. Only discharges that have not filed an NOI should file this form. If you have an NOI but you wish to terminate coverage, you must file a Notice of Termination form with your Regional Water Board office. If you are unsure whether or not your facility is required to comply with the General Permit, please contact the Regional Water Quality Control Board at **(213) 576-6600**. When completed, mail this form to: **Regional Water Quality Control Board, 320 W. 4<sup>th</sup> Street, suite 200, Los Angeles, CA 90013.**

- I. **OWNER/OPERATOR** If you are not the current owner/operator, check this box  and provide your name and address.

COMPANY NAME \_\_\_\_\_ CONTACT PERSON \_\_\_\_\_  
STREET ADDRESS \_\_\_\_\_ TITLE \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE \_\_\_\_\_  
TYPE OF BUSINESS CONDUCTED AT FACILITY \_\_\_\_\_

- II. **FACILITY/SITE INFORMATION** (if different from above)

COMPANY NAME \_\_\_\_\_ CONTACT PERSON \_\_\_\_\_  
STREET ADDRESS \_\_\_\_\_ TITLE \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE \_\_\_\_\_  
TYPE OF BUSINESS CONDUCTED AT FACILITY \_\_\_\_\_

- III. **BASIS OF NON-APPLICABILITY**

- \_\_\_\_\_ 1. The facility is closed and all clean-up, closure, and moving activities are complete.  
Date of closure \_\_\_\_/\_\_\_\_/\_\_\_\_
- \_\_\_\_\_ 2. There is no exposure of industrial activities to storm water. (Applies to the following SIC codes: 20, 21, 22, 23, 2434, 25, 265, 267, 27, 283, 285, 30, 31 (except 311), 323,34 (except 3441), 35, 36, 37 (except 373), 38, 39, and 4221-4225).  
SIC CODE \_\_/\_\_/\_\_/\_\_ (MANDATORY)
- \_\_\_\_\_ 3. Storm water associated with industrial activities does not discharge to waters of the United States.  
\_\_\_\_\_ a. All industrial storm water is always retained on site.  
\_\_\_\_\_ b. All industrial storm water is treated and disposed of with processed wastewater.  
\_\_\_\_\_ c. All industrial storm water is discharged to a municipal sanitary sewer system or municipal combined sewer system.  
\_\_\_\_\_ d. All industrial storm water is discharged to evaporation ponds or percolation ponds offsite.

\_\_\_\_\_ 4. The facility is not required by federal regulations to be covered by a storm water permit because it is not engaged in an industrial activity covered by the regulations.

SIC CODE (if known) \_\_\_/\_\_\_/\_\_\_/\_\_\_/

\_\_\_\_\_ 5. Discharge of industrial storm water from the facility is subject to another NPDES general permit or to an individual NPDES permit.

NPDES Permit No. \_\_\_\_\_

\_\_\_\_\_ 6. There is a new owner/operator of the identified facility.

Date of owner/operator transfer \_\_\_/\_\_\_/\_\_\_ Has the new owner/operator been notified of NPDES General Permit requirements? Yes\_\_\_No\_\_\_

**NEW OWNER/OPERATOR INFORMATION**

**COMPANY NAME** \_\_\_\_\_ **CONTACT PERSON** \_\_\_\_\_

**STREET ADDRESS** \_\_\_\_\_ **TITLE** \_\_\_\_\_

**CITY** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIP** \_\_\_\_\_ **PHONE** \_\_\_\_\_

\_\_\_\_\_ 7. I am not and have never been the owner/operator of the identified facility.

\_\_\_\_\_ 8. Other (Please explain) non-applicability.

**IV. CERTIFICATION**

I certify under penalty of law that the identified facility is not required to be permitted under NPDES General Permit No. CAS000001 or that I am not the owner/operator of the facility. I understand that discharging storm water associated with industrial activity to waters of the United States is unlawful under the Clean Water Act where discharge is not authorized by a NPDES permit. I also understand that submittal of this Notice of Non-Applicability does not release an owner/operator from liability for any violations of the General Permit or Clean Water Act.

**PRINTED NAME** \_\_\_\_\_ **TITLE** \_\_\_\_\_

**SIGNATURE** \_\_\_\_\_ **DATE** / / \_\_\_\_\_

\_\_\_\_\_  
**STATE AND REGIONAL BOARD USE ONLY**  
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