

Attachment D

California Regional Water Quality Control Board
Lahontan Region

Notice of Activity Completion Form

To Certify Completion and Compliance with the
South Shore Waste Discharge Requirements
and

Apply for Recission of Coverage, Monitoring, and Reporting Requirements

Please type or print clearly in ink

1. **Activity Name:** (Enter name given to the activity, if any)

WDID Number:

2. **Date Activities Completed:**

3. **Landowner:**

Name of individual, company, or agency:	
Phone:	E-mail address (optional):

4. **Name and Phone Number of Contact Person(s):** (List the primary person(s) supervising/implementing on-site operations.)

Name:	Phone:
Name:	Phone:

I, the Landowner, agent thereof, or Land Manager, hereby certify under penalty of perjury that the timber harvest and/or vegetation management activities for the above-referenced activity (plan) were conducted in conformance with applications and submittals to the Water Board and all general conditions and category-specific conditions and criteria of the Waste Discharge Requirements, for which my project was enrolled.

Signature:

Date:

Upon receipt of this Notice of Completion, and prior to considering rescission, Water Board staff will review submittals and may inspect the project or plan area. All monitoring and reporting requirements for the project will remain in effect until the Water Board rescinds the waste discharge requirements.