



## Los Angeles Regional Water Quality Control Board

## **BOARD ORDER TRANSFER REQUEST FORM**

Board Order No	CI No
Facility Address	
I requested the transfer of the existing waste discharge date), contained in the above-referenced Board Order	
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 waste discharge from this facility. I certify that:	the Board Order and will be billed an annual fee fo
1. I have reviewed the Report of Waste Discharge at	nd 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 th of waste discharge or any future change in the fac	is facility, any change in the amount, type of manne illity owner or operator.
Signature (New Owner/Authorized Representative)	Company Name, if appropriate
Print Name (New Owner/Authorized Representative)	Telephone No. Date
Title	Email
Mailing Address	
Facility Contact Peron	Telephone No. Email
Facility Contact Mailing Address	