## **ATTACHMENT A GRAZING WAIVER NOTICE OF INTENT** SECTION I. FACILITY OPERATOR INFORMATION Name: Contact E-mail: Mailing Address: City: State: Zip Code: Contact Person: Contact Phone: SECTION II LANDOWNER INFORMATION (IF OPERATOR IS NOT THE OWNER) Contact E-mail: Name: Mailing Address: City: State: Zip Code: Contact Person: Contact Phone: SECTION III. FACILITY INFORMATION \* Please fill out an additional sheet if Ranch Lands are not contiguous A. Facility Name: County: I<u>IIIIIIIIIIIIII</u> Mailing Address: Contact E-mail: City: State: Zip Code: CIA Contact Person: Contact Phone: Degree/minutes/seconds **Decimal Form Provide Latitude and Longitude** only if facility does not have a Latitude: | | | ° | | | ' | | " 1 | 1.1 | 1 | 1 | 1 | 1 valid street address Longitude: | | | | ° | | | ' | " B. Total Size of Herd: C. Operation Type: (check one) D. Start & End Date of Current Operations: I<u>IIIII</u>I animals 1. [ ] Cattle 2. [ ] Goat \_/\_\_/ 3. [ ] Sheep 4. [ ] Other (list) SECTION IV. ADDRESS FOR CORRESPONDENCE Send Correspondence to [ ] Facility Operator Mailing Address (Section I) [ ] Landowner Mailing Address (Section II)

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**SECTION V. RECEIVING WATER INFORMATION** 

## SECTION VI. IMPLEMENTATION OF WAIVER OF WDRs CONDITIONS A. CONDITIONS OF WAIVER FOR DISCHARGES FROM GRAZING OPERATIONS (check if true) [ ] Facility is currently operating in compliance with Waiver Standards C. RANCH WATER QUALITY PLAN (check if true) [ ] A Ranch Water Quality Plan has been prepared and is maintained on site. D. COMPLIANCE REPORTING (check if true) [ ] A Compliance Reporting Plan has been prepared, will be sent to the Water Board on November 15, 2008 and yearly thereafter [ ] A Compliance Reporting Plan is being prepared and will be sent to the Water Board on November 15, 2008 and yearly thereafter SECTION VIII. LANDOWNER NOTIFICATION if the Discharger is not the owner of the facility, the Discharger must certify that the owner of the facility has been notified of this waiver and its requirements Discharger's Printed Name:\_\_\_\_\_\_\_ Signature:\_\_\_\_\_\_ Title: \_ Date: SECTION VII. CERTIFICATION "I certify under penalty of law that this document and all attachments were prepared under my direction and supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. In addition, I certify that the provisions of the waiver, including the implementation of a Grazing Management Plan, will be complied with." Printed Name: Signature:

Date: \_\_\_\_

Title: \_\_\_\_\_