

ATTACHMENT C - NOTICE OF TERMINATION FORM

This **NOTICE OF TERMINATION** form shall be completed to terminate coverage under the Groundwater General Permit, NPDES Permit CAG912002.

This form shall be signed in accordance with Attachment D section 5.2 and sent via email to RB2-NPDES.GW@waterboards.ca.gov (please copy the permit case manager indicated at https://www.waterboards.ca.gov/sanfranciscobay/water_issues/programs/general_permit_s.html).

| | | |
|-----------------------------------|----------------|-------------|
| Company / Owner Name (Discharger) | CIWQS Place ID | |
| Facility Street Address | City | State CA |
| Last Date of Discharge | | |
| Contact Person Name | Title | |
| Email | Phone Number | |
| Signature | Date | |

Check here if the Discharger has performed PFAS treatment and is including the PFAS Monitoring Summary Report with this form. See MRP section 6.4 for details.