

Attachment B1 – Notice of Intent

Section 1: Project Purpose¹ and Activity

A) Select the Proposed Project Purpose:

- Wildfire Mitigation
- Routine Operations and Maintenance
- Wildfire Recovery (Section IV.E.3.a.i)
- Other Response Activities (Section IV.E.3.a.ii)

B) Select the Activity Type(s):

- | | |
|--|---|
| <input type="checkbox"/> Vegetation Management | <input type="checkbox"/> Structural Conversion |
| <input type="checkbox"/> Herbicide Application | <input type="checkbox"/> Overhead Line Reconductoring |
| <input type="checkbox"/> Access Route Construction, Reconstruction, or Maintenance | <input type="checkbox"/> Undergrounding Powerlines |
| <input type="checkbox"/> Staging Areas and Laydown Yards | <input type="checkbox"/> Boardwalk Repairs or Replacement |
| <input type="checkbox"/> Pole/Tower Repair, Maintenance or Replacement | <input type="checkbox"/> Infrastructure Lowering, Maintenance, Replacement or Removal |
| <input type="checkbox"/> Substation Maintenance | |

C) Indicate which of the following applies to the proposed activity:

- Results in a discharge of dredge or fill materials
- Is being undertaken as an Urgent Response Activity
- Requires construction of new access routes:
 - Resulting in over 300 linear feet of soil disturbance
 - Resulting in soil disturbance within 500 feet of waters
- Results in greater than 0.5 acres of soil disturbance on slopes $\geq 30\%$ with a K factor ≥ 0.2
- Results in soil disturbance within 50 feet of waters
- Requires vegetation management within 100 feet of:
 - An impaired waterbody
 - A Class I or II watercourse

¹ Refer to General Order Attachment B2 for instructions on how to fill out this Notice of Intent.

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Section 2: Legally Responsible Party (Applicant) and Duly Authorized Representative Information

Discharger Information	Legally Responsible Party (required)	Authorized Representative (optional)
Name of Company		
Name of Contact		
Title of Contact		
Address		
City, State, Zip		
Phone Number(s)		
Email Address		

Section 3: Fees and Billing Information

Pay the application fee online or include a check, money order or cashier check, payable to the State Water Board, with your NOI. Provide contact information for where annual fee invoices should be mailed.

Information	Billing Information
Name of Company	
Name of Contact	
Title	
Address	
City, State, Zip	
Phone Number(s)	
Email Address	

Section 4: Other Agency Permits, Licenses, Agreements, Plans, and Email Correspondence

Attach application if final action not yet taken.

Permit Name	Has an application been submitted? (yes/no/NA)	If yes, has a permit been received? (yes/no)	Permit Type	ID Number (e.g. Corps file number)
Army Corps NWP Pre-Construction Notification (PCN)				
US Fish and Wildlife Service Incidental Take Permit				
National Marine Fisheries Service Incidental Take Permit				
Other Federal Permits				
California Department of Fish and Wildlife Lake and				

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Streambed Alteration Agreement (LSAA)				
State Water Board Construction Stormwater General Permit				
Coastal Development Permit				
Other NPDES Permit				
Other State Permits				
Local Permit(s)				

Section 5: Project Information
(supplemental information can be attached on separate pages)

Project Name:
Project Address (Include city (or nearest city), zip code, county, and Assessor's Parcel Number):
Coordinates (decimal degrees):
Construction Timeframe (Provide approximate start and end dates):
Will any ground disturbance take place between October 1 through April 30? Yes <input type="checkbox"/> No <input type="checkbox"/>
Is this a linear project (for example a powerline, pipeline, access route, highway, etc.)? Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, indicate length of project from end-to-end: _____ feet

Project Description/Purpose:

Section 6: Avoidance, Minimization
(supplemental information can be attached on separate pages)

Avoidance and Minimization:

Section 7: Justification for Deviation from Section IV.F. Conditions

For Section IV.F. Conditions that require justification if they cannot be met, please provide your justification here. See Attachment A2 for a list of applicable conditions.

Section 8: Temporary Impacts, Permanent Impacts, and Compensatory Mitigation

Temporary Impacts: Would your project result in temporary impacts to waters of the state? If yes, attach the restoration plan.

Total Temporary Impacts: _____ acres; _____ linear feet

Permanent Impacts: Would your project result in permanent impacts to waters of the state?

Total Permanent Impacts: _____ acres; _____ linear feet

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Table 2: Receiving Waters Information²

Impact Site ID	Waterbody Name	Impacted Aquatic Resource Type	Water Board Hydrologic Units	Receiving Waters	Receiving Waters Beneficial Uses	303(d) Listing Pollutant(s)

Table 3: Individual Direct Impact Information

Impact Site ID	Aquatic Resource Type	Latitude	Longitude	Permanent or Temporary Impact?	Acres	Linear Feet	Dredge or Fill/Excavation?

² Attach additional tables or add rows to the tables as needed. For receiving waters information (e.g., beneficial uses, watershed identification, etc.) refer to the Regional Water Basin Plans on the applicable Regional Water Board website or the [State Water Board's Plans and Policies website](https://www.waterboards.ca.gov/plans_policies/) (https://www.waterboards.ca.gov/plans_policies/).

Section 9: Documentation

Check any of the following documents that are applicable to your project and attach copies to your NOI.

- Fee Check or Online Payment Receipt
- Other Agency Correspondence, Permits and Permit Applications
- Map of Project Components and Waters of the State
- Drawings or Design Plans
- Delineation Report
- Erosion and Sediment Control Plan (Section IV.K)
- Vegetation Management Impact Offset Plan (Section IV.M)
- Temporary Impact Restoration Plan (Section IV.N)
- Compensatory Mitigation Plan (Section IV.O)
- Horizontal Directional Drilling Plan (Section IV.F.26)
- Pre-Project Photographs
- Proposed Dewatering Plan (Section IV.F.20)
- Stormwater Pollution Prevention Plan
- Additional Pages and/or Supplemental Information

For Internal Water Board Use
Only

Reviewer:

Date Received:

Reg Measure ID:

WDID:

Check Number:

Application Approval and Signatures on Next Page

Section 9: Legally Responsible Party and Duly Authorized Representative Signature

See NOI Instructions for Legally Responsible Party eligibility. *Legally Responsible Party Attestation*

I certify under penalty of law that this application and all attachments were prepared under my direction or supervision in accordance with a process designed to assure that qualified personnel properly gather and evaluate the information submitted. 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 for knowing violations.

Duly Authorized Representative assignment is as follows (optional):

The authorization shall specify that a person designated as a Duly Authorized Representative has responsibility for the overall operation of the regulated facility or activity, such as a person that is a manager, operator, superintendent, or another position of equivalent responsibility, or is an individual who has overall responsibility for environmental matters for the company. *Optional Duly Authorized Representative Assignment*

I hereby authorize _____ to act on my behalf as the Duly Authorized Representative in the processing of this NOI, and to furnish upon request, supplemental information in support of this NOI.
