STATEWIDE INDUSTRIAL GENERAL PERMIT

DISCHARGER'S GUIDE TO THE STORM WATER MULTIPLE APPLICATION AND REPORT TRACKING SYSTEM (SMARTS) DATABASE

NOTICE OF TERMINATION





Last Revised: February 2024

Stormwater Industrial General Permit Notice of Termination (NOT):

Dischargers with an active Waste Discharge Identification Number or No Exposure Certification ID Number shall request termination of coverage under the Industrial General Permit when:

(a) the operation of the facility has been transferred to another entity,

(b) the facility has ceased operations, completed closure activities, and removed all industrial related pollutants, or

(c) the facility's operations have changed and are no longer subject to the Industrial General Permit.

Prior to submitting a NOT, the Discharger must complete and submit all outstanding reports. Until a valid NOT is processed by the Regional Water Quality Control Board (Regional Water Board), the Discharger remains responsible for compliance with the Industrial General Permit and payment of accrued annual fees.

A NOT may only be certified by the Legally Responsible Person (LRP) or Duly Authorized Representative (DAR) for the Facility. A Data Entry Person (DEP) may fill out the Notice of Termination but does not have authority to certify it.

1. Log into <u>SMARTS</u> (https://smarts.waterboards.ca.gov)

Browser Requirements: SMARTS best works with Google Chrome or Microsoft Edge. Use of other browsers may cause unexpected errors



Notice of Termination Guidance Last Revision: February 2024

2. Select Active Applications

From the main menu, select "Active Applications"

Stormwa	nter Multiple Application and Report Tracking System	Callerpa Enternet Cov Q You are logged in as Solvator Chaparto, if this account does not belong to you, please log out.
Start a New Appli	Cation Cation File Reports	Account Management Document Ready for Certification
	Pending Applications	Submitted Applications
	View and continue applications that are in progress or have been returned.	Manage active and terminated applications processed by the State Water Board. (Submit a Change of Information, amend a Stormwater Pollution Prevention Plan, convert to a No Exposure Certification, view inspections and reports, etc.)
	Documents Ready for Certification	File Reports
	For the Legally Responsible Person and Duly Authorized Representative(s): View, certify, and submit documents to the State Water Board.	View previously submitted reports and submit new reports to ensure permit compliance.
	Account Management	Recertify Existing Application
	Perform administrative tasks associated with your account. (Update organization info, manage Legally Responsible Person, manage linked users, manage Compliance Groups, we outstanding invoices, self-certity as a QSD, etc.)	Recertify an annual No Exposure Certification or coverage under a reissued General Permit.
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3. Select WDID/App ID

Identify and select the "WDID/ Application ID" number to open the application.

	Stormwate	er Multiple Applicat	ion and Report	Tracking Syster	m Water Boards	CalEPA Galterna Environmental Protection Agency	<u>Q</u>	You are logged in as Salvador Chaparro. If this account does not belong to you, please log out.		
	Start a New Applicat	ion - Active	Applications	File Report	\$	Account Management	R	ecertify Existing Applications	Documents Read	y for Certification
1	Aain Menu > Active Applications									
	/iew Terminated R	ecords								
				14	 < 1 (1 of 1) → 	Display 20 🗸 per page				
	WDID/App ID 🗘	Permit Type 🗘	Application Type 🗢	Application Subtype 🗘	Status 🗘	Owner/Operator 🗢		Facility/Site 🗘	Delink	File NOT/LCTN
(560110	Phase II Small MS4	NOI	Traditional	Active	Test Org 1001 I Street Sacramento CA 95814		Phase II Small MS4 - Sacramento -	Delink	File NOT
				14	 (1 of 1) 	Display 20 🗸 per page				
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4. NOTs

Select the "NOTs" tab.

Water Boards Storm	water Multiple Application &	k Report Tracking System	12						Help	Logout
	You are logged-in as: Salvador Cha If this account does not belong to you, ple	aparro ase log out.	Navigate To:	~						
Operator Information [B	ack To Search Results]									
The application is organized into d	fferent tabs. Please complete all applicable ta	ibs before submitting the form. If you w	ant to complete the application at a later	time, please click on "Save & Exit".						
WDID/App ID: Status: Order No: Permit Type:	5S34I025848 - 459002 Active 2014-0057-DWC0 Industrial - NOI	Operator: Facility:	Test 1001 I St Sacramento CA 95814 Test 1001 I St Sacramento CA 95814			8	Certified Date: Processed Date: 4OT Effective Date: Previous ID: Compliance Option:	07/22/2015 07/22/2015 -		
Operator Info Facility Info A	ddl. Facility Info Billing Info Attachmer	nts Certification Requirements	Reports Inspections Violations	Enforcement Actions Admin Changes	Tasks Print Note	s Status Histo	ory Linked User	NOTS COIS		
Operator Information Populate	Contact Info: Select	~								
Operator Name:	Test	*2		Contact First Name:	RWQCB		•			
Street Address:	1001 I St	*2		Contact Last Name:	Test]•			
Address Line 2:		2		Title:]			
City:/State:/Zip::	Sacramento CA V 95814 *	2		Phone:	999-999-9999	*Ext:	(999-999-9999)			
Type:	City/Town Agency V	2		E-mail:	r5s_stormwater@w	aterboards.ca.	gov	* (abc@xyz.com)		
Federal Tax ID:	99-9999999	2		Apply for NEC						
Save & Exit Save & Continu Fields marked with * are mandat	e ory fields.									
			© 2022 State of	California. Conditions of Use, Privacy Policy,						

Select "Add New NOT".

Operative Into Eacility Into AddL Facility Into AddL Facility Into Billing Info Attachments Certification Requirements Reports Inspections Violations Enforcement Actions Admin Changes Tasks Print Notes Status History Linked Users NDTS COIS

5. NOT Form

Fill out the "NOT Form" tab.

- Select one of the basis for filing the Notice of Termination and fill out applicable information.
- Once the form is complete, select "Save & Next".

NOT Form NOT Attachments NOT Certify/Review NOT Sta	tus NOT Print Back To NOI Summary			
Basis of Termination (Must select one option below)				
O Closed Facility: The facility is closed and all closure, moving and	clean-up activities are complete			
Date of Closure: 🛛 🕲 (n	um/dd/yyyy) *			
Are you moving to a new location in Cali	fornia? O Yes O No *			
If Yes, start date at new location:	(mm/dd/yyyy)			
Will you file new NEC or NOI? Yes	O No *			
New Facility Information				
Business Name:		First Name:		
Street Address:		Last Name:		
Line #2:		Tde:		
City/State/Zip:	CA 🗸	Phone:		(999-999-9999)
		Email:		(abc@xyz.com)
Regulated by Another Permit: Discharge of storm water associat NPDES Permit No:	ed with industrial activity is specifically regulated by another general or individual NPDES permit. * Date coverage began:			
New Operator/Owner:				
Date facility/site was transferred to new o	peratoriowner: a (mmiddlyyyy)*			
Have you notified the new operator/own	er of the storm water NPDES permit requirements? O Yes O No *			
New Operator/Owner Information				
Business Name:	•	First Name:	•	
Street Address:	•	Last Name:	•	
Line #2:		Title:		
City/State/Zip:	CA V	Phone	* (000-000-000	9)Ext:
		Email:	* (abc@xyz.co	m)
O Notice of Non-Applicability				
C - English Dave Not Discharge Units	ad No Direbases Technical Record			
A. Pacinty Dees Not Discharge - Opto Discharge - Upto Discharge is Nat Madalasiash: Ca	ad No Discharge Technical Report			
C o. Discharge is Not Hydrologically Co	nnected to waters of the US - Opicalo No Discharge Hechnical Report			
C. Facility Not Required by Federal H	egulation to be Regulated by an Industrial Activities Storm Water NPUES Permit			
Other:				
Delete				
Reason For Delete:				
		11.		
	Delete			
·				
Back Save & Next) Fields marked wer are mandatory fields.				

6. NOT Attachments

The "NOT Attachments" tab allows uploads of supporting documentation and/or photographs as required by the Industrial General Permit (section II.C.).

NOT Form NOT Attachments NOT Certil	fy/Review NOT Status NOT Print	Peek TO NOT Semmary							
Please click on "Upload Attachment" button	ease click on "Upload Attachment" button to upload the corresponding files. Upload Attachment								
When uploading multiple photographs, it is pre-	eferred, but not required, to upload one	OF file containing manuple photographs.							
Attachment ID File Typ	pe File Title	File Description	Date Attached	Part No	Upload By	Delete			
Back Next						,			
Fields marked with * are mandatory fields.									

Fill in the file information and click "Upload Files".

NOT Form NOT An	tachments NOT Cert oad Attachment* butte	ilyiReview NOT Status NOT Print Back on to upload the corresponding files.	k To NOI Summary				
Attachme	Attachment File Type Attachment Title File Description Part No. Document Date Confidential? File Name						
Select	٥.			Part of		0	Choose File No file chosen
Upload Files	ancel Add New Row						
When uploading multi	ple photographs, it is p	referred, but not required, to upload one PDF file	e containing multiple photographs.				
Attachment ID	File Type	0 File Title 0	File Description	Do	cument Date Part No.	Date Attached	Upload By Delete
No records found.							
Back Next							
Fields marked with	are mandatory fields.						
			© 2019 State of California. Conditions of U	se. Privacy Policy,			

The user can select the "NOT Attachments" tab to refresh the screen and see that the attachment properly uploaded. Once the user has checked that it uploaded correctly select "Next".

Note: The maximum file size is 75 MB and the file name cannot be longer than 30 characters and does not contain any special characters or symbols.

NOTICE OF TE	RMINATION							
Please enter or upda	ate the application detail	is completely a	nd submit the application.					
WDID:	58291025869	Operator:	Test 1001 I Street Sacramento CA 95814	NOT Status:	Not Submitted			
Permit Type:	Industrial	Facility:	Mine Not vours street Auburn CA 95814	NOT Submitted Date:				
				NOT Return Date:				
				NOT Approved/Denied Date:				
NOT For NOT	Attachments NOT C	ertify/Review	NOT Status NOT Print Back To N	II Summary				
Please click on "U	pload Attachment" bu	tton to upload	the corresponding files. Upload Atta	hment				
When uploading mu	ultiple photographs, it is	preferred, but r	not required, to upload one PDF file conta	ning multiple photographs.				
Attachment ID	File Type		File Title	File Description		Date Atlached	Part No	Upload By Delete
1621559	Photograph		Photos	Photos demonstrating the facility is closed and no industr occurring and facility is clean	al activity is	04/06/2016	1/1	dischargers Delete
Back Next Fields marked with	are mandatory fields		© 2016 State	f California. <u>Conditions of Use</u> . <u>Privacy Policy</u>				

7.NOT Certify/Review

The "NOT Certify/Review" tab provides a completion check on the proposed Notice of Termination:

	NOT Form NOT Attachments NOT Certify/Review NOT Status NOT Print Back To NOI Summary
	Before certifying the Notice of Termination, the system must verify that all required sections have been completed. To perform this check, click the button below:
٩	Perform Completion Check
	Back Next
	Fields marked with are mandatory fields.

The "Perform Completion Check" function provides the user with a notification of any errors that must be corrected prior to submission of the Notice of Termination¹ (e.g. photos or report were uploaded incorrectly).

After the completion check errors are identified, run the Perform Completion Check again. If no errors display, continue to certify the NOT.

Any user may perform this check but only the LRP or a DAR may certify the NOT. A Data Entry Person (DEP) may notify the LRP or DAR the NOT application is complete and ready for certification by selecting "Submit to LRP/DAR". Records marked with the status "Not Submitted-Certification Required" may be certified by the LRP or DAR in the "Documents Ready for Certification" located in the SMARTS main menu.

The LRP or DAR must review the prepared NOT for information accuracy, prior to continuing to the "Certification" tab to perform the completion check.

The LRP or DAR must have the signed electronic authorization form on file before the NOT may be certified. If the form is not on file, select "Print E-Authorization Form," sign with original wet signature preferably in blue ink, then mail into one of the addresses on the form.

(https://www.waterboards.ca.gov/water_issues/programs/stormwater/industrial.html#e_reporting)

¹ **NOTE:** This completion check will also review for any outstanding reports (e.g. annual reports). The reports will need to be completed and submitted in the system prior to the Notice of Termination being submitted. For help on completing reports in SMARTS, please see our <u>Industrial</u> <u>Stormwater Program webpage</u>:

LRP/ DAR Certification

There are two options for the LRP/ DAR and to submit the NOT:

- a. The LRP/DAR may access the "Documents Ready for Certification" SMARTS menu option if notified by the DEP.
 - Select the NOT to certify by checking the box next to the Application ID in the NOTs table
 - Check the box next to the certification statement, answer the security questions, and enter the user account password
 - Click "Certify Selected" to submit the NOT

Application	s						
Select	Application ID	Permit Type	Operator/Owner Name & Address	Facility/Site Name & Address	Application PDF		
	Text Org Text Traditional Waiver 1 Application PDE 100111 Street Sacramento CA 95814 7777 LSWeet San Francisco CA 90001						
Certification	& Submission Checklis	at					
I certify under penalty of two hat his documents and all attachments wave prepared under my direction or supervision in accordance with a system designed to assume hat usualinde penceed property gather and evaluate he information in the set of the penceed reservery (responsible of patienting he information). The set of the penceed reservery (responsible of patienting he information) to the set of the penceed reservery (responsible of patienting he information). The set of the penceed reservery (responsible of patients) here the set of the penceed reservery (responsible of patients) here the set of the penceed reservery (responsible of patients) here the set of the penceed reservery (responsible of patients) here the set of the penceed reservery (responsible of patients) here the set of the penceed reservery (responsible of patients) here the set of the penceed reservery (responsible of patients) here the set of the patients (responsible of the patients) here the set of the penceed reservery (responsible of the patients) here the set of the patients (responsible of the patients) here the set of the penceed reservery (responsible of the patients) here the set of the patients (responsible of the patients) here the set of the patients) here the set of the patients (responsible of the patients) here the set of the patients) here the set of the patients (responsible of the patients) here the set of the patients (responsible of the patients) here the set of the patients (responsible of the patients) here the set of the patients (responsible of the patients) here the set of the patients (responsible of the patients) here the set of the patients (responsible of the patients) here the set of the patient (responsible of the patients) here the set of the patient (responsible of the patients) here the set of the patient (responsible of the patients) here the set of the patient (responsible of the patients) here the set of the patient (responsible of the patient) here the set of the patient (responsible of the patient) here							
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- b. If the NOT is not listed in the "Documents Ready for Certification" SMARTS menu option, the LRP/DAR may access the application directly.
 - Log in and go to "Active Applications" in the main menu.
 - Open the Application ID you are terminating coverage for.
 - Click on the "NOT" tab.
 - Select the NOT ID,
 - Select "NOT Certify/Review" tab and select "Perform Completion Check."
 - Check the certification boxes, enter the answer to the security question and password, and click the "Certify Notice of Termination" button.

NOT Attachments NOT Cattgr/Revery NOT Status NOT Print Back To NOI Summary Corritication & Submission Checklist: Certification & Submission Checklist: Status Not more pressons who manage the system, or those persons directly responsible for gathering the information, the information indicate 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, the information indicate is, to the best of my knowledge and beliet, true, scurate, and complete. Jam aware that my user Dand password constitute my electronic signature and any information indicate I am electronically certifying contains my signature. I understand that my electronic signature is the legal equivalent of my handwritten signature. My signature on this form certifies that my electronic signature is to the legal equivalent of my handwritten signature on this form certifies that my electronic signature is the legal equivalent of my handwritten signature compromised. Image:		,		<u>,</u>	
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Certification & Submission check list Select Caussion Text Select Caussion Text Construction & Submission check list Construction & Construction & Submission check list Construction & Construction & Construction Constr	Certification & Submissio	on Checklist :			
Select Question Text Incriting under penalty of law that this document and all attachments were prepared under the direction or supervision in accordance with a system designed to assue that qualified personnel properly obtinitied is, to the best of tray knowledge and belief, true, accurate, and complete. I an aware that there are significant penalties for submitting take information, including the possibility of file and upossibility obtinities is the lead equivalent that may electronic signature in on this form certifies that my electronic signature in on this form certifies that my electronic signature in on this form certifies that my electronic signature in on this form certifies that my electronic signature in one submitted. Based on while the line of the designation. It will not certify that I will not delegate or this form certifies that my electronic signature in one submitted. Based on while the designation. It will not certify that I will not delegate or this form certifies that my electronic signature in one submitted. Based on while the delegate such authority. I will do so formally in writing and electronically notify the State Water Board using SMART32 of such delegation within to days of electronic signature is not unauthorized use, and that will contact the State Water Board using SMART32 of such delegation within to days of discovery. If I suspect that my electronic signature is not unauthorized use, and that will contact the State Water Board using SMART32 of such delegation within the days of discovery. If I suspect that my use that the set of the state Water Board using SMART32 of such delegation within the days of discovery. If I suspect that my electronic signature is not prevised that my electronic signature is not prevised and that my electronic signature is not prevised. Certified By: First Name: Last Name: Dale Dale Dale	Certification & Submission c	check list			
	Select Question Text				
In an also aware that my user ID and password constitute my electronic signature and any information in indicate I am electronically certifying contains my signature. I understand that my electronic signature is the legal equivalent of my handwritten signature. We signature on this form certifies that my electronic signature is the legal equivalent of my handwritten signature is the legal equivalent of the my handwritten signature is the legal equivalent of the my handwritten signature is the legal equivalent of the my handwritten signature is the legal equivalent of the my handwritten signature is the legal equivalent of the my handwritten signature is the legal equivalent of the legal equival equivalent of the legal equivalent of the legal equivalent of	I certify under penalt gather and evaluate t submitted is, to the b imprisonment for know	ty of law that this document and all att the information submitted. Based on r best of my knowledge and belief, true, rowing violations.	achments were prep ny inquiry of the per- accurate, and compl	ared under the direction or s son or persons who manage lete. I am aware that there ar	supervision in accordance with a system designed to assure that qualified personnel properly the system, or those persons directly responsible for gathering the information, the information e significant penalties for submitting false information, including the possibility of fine and
Certified By: First Name: Test Date Date D4/06/2016 Please answer your security question before certifying the document. What is your mother's maiden name? Please entertime account Certify Notice of Termination Certify Notice of Termination Certify Certify Cater button, the status of the document is updated to Not Submitted - certification required. You can later certify it in bulk by going to Applications submitted to LRP for certification (NOI, NOT, Annual Report, Ad Hoc Report, COI) in Pening Documents link in the Main Menu. Back Next Host	I am also aware that signature is the legal share it with any othe the delegation. I furth electronic signature	my user ID and password constitute n al equivalent of my handwritten signatu ter person. Should I wish to delegate s her certify that I will protect my electro has been lost, stolen, or otherwise co	ny electronic signatu ire. My signature on uch authority, I will d onic signature from u mpromised.	re and any information I ind this form certifies that my el lo so formally in writing and nauthorized use, and that I	icate I am electronically certifying contains my signature. I understand that my electronic ectronic signature is for my own use. that i will keep it confidential, and that I will not delegate or electronically notify the State Water Board using SMARTS2 of such delegation within 10 days of will contact the State Water Board, within two business days of discovery, if I suspect that my
First Name: Lat Name: Title: Test Date Detase somewer your security question before certifying the document. Marki syour mother's malden name? Please answer your society and status of the document. Image: Certify Notice of Termination Certify Notice of Termination Certify Notice of Termination Certify Notice of Termination Certify Certify Later builton, the status of the document is updated to Not Submitted - certification required. You can later certify it in bulk by going to Applications submitted to LRP for certification (NOI, NOT, Annual Report, Ad Hoc Report, COI) in Perioding Documents link in the Main Menu. Back Next	Certified By:				
Tile: Test Date 04/06/2016 Please answer your security question before certifying the document.	First Name:		Last Name:		
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© 2016 State of California <u>Conditions of Use</u> <u>Privacy Policy</u>			© 2016 St	ate of California. Conditions of	f Use Privacy Policy

8.A confirmation screen will then confirm submission of the Notice of Termination in SMARTS.

NOTICE (OF TERMINATION						
Please enter	or update the application deta	ails completely an	d submit the	application			
WDID:	55291025869	Operator:	Test 1001 Street	t Sacramento CA 95814		NOT Status:	Submitted to Waterboard
Permit Type	: Industrial	Facility:	Mine	01 05011		NOT Submitted Date:	04/06/2016
	Not yours :		NOT YOURS SE			NOT Return Date:	
						NOT Approved/Denied Da	late:
Your NOT is	Certified and Successfully	submitted to wa	iter board.				
NOT Form	NOT Attachments NOT	Certify/Review	NOT Status	NOT Print Back To NOI Sum	nmary		
The electron	ic "Notice of Termination" has	s been succesfully	y received by	y the State Water Resources Contro	ol Board's database. Th	e confirmation information	n for this certification is as follows:
		Appl	lication ID	528720			
			Туре	Industrial			
		Submission/Ce	ertify Date	04/06/2016			
		Certi	fier Name				
		Cer	tifier Title	Test			
Please print	out this screen as proof of ce	ertification. If you r	need to corre	act any information, please contact th	the Regional Board rep	resentative.	
All records n	nust be retained for 5 years fr	rom the date of the	e report or m	nonitoring activity.			
Back	Next	•					
Fields marke	d with * are mandatory field	IS.					
1.				© 2016 State of Califo	ornia. Conditions of Use	Privacy Policy	

Regional Water Board staff reviews the submitted Notice of Termination and the Legally Responsible Person or Duly Authorized Representative is notified via email of their decision

NOTE: It is the responsibility of the discharger to submit the NOT to request cancellation of permit coverage. For outstanding invoices, if the NOT is submitted within 90 days of the original invoice date, the invoice will be canceled upon approval by the local Regional Water Board. If the NOT is submitted after the 90-day grace period or is denied, the invoice is valid and payable in full.

Questions about the status of the termination, contact the local Regional Water Board. To determine your Regional Water Board, refer to the Waste Discharge Identification (WDID) number and search for the corresponding Regional Water Board on the Stormwater Contacts webpage.

For example:

WDID number: <u>55</u>29I025869 is Region 5 Sacramento WDID: <u>4</u> 19I025869 is Region 4

The first one or two numbers of the WDID number serves as the identifier for the region the facility is located within. Coordinate this identifier with the <u>Regional</u> <u>Boards contact information webpage</u>:

(http://www.waterboards.ca.gov/water_issues/programs/stormwater/contact.shtml)