

NOTICE OF TERMINATION – GENERAL PERMIT NUMBER ALG870000

NPDES PERMIT NUMBER ALG870000 IS A GENERAL PERMIT AUTHORIZING DISCHARGES FROM THE APPLICATION OF PESTICIDES

**Mail to: Alabama Department of Environmental Management
Water Division
Post Office Box 301463
Montgomery, Alabama 36130-1463**

PLEASE COMPLETE ALL QUESTIONS. RESPOND WITH "N/A" AS APPROPRIATE. INCOMPLETE OR INCORRECT ANSWERS, OR MISSING SIGNATURES WILL DELAY PROCESSING. IF SPACE IS INSUFFICIENT, CONTINUE ON AN ATTACHED SHEET(S) AS NECESSARY. ATTACH OTHER INFORMATION AS NEEDED. PLEASE TYPE OR PRINT LEGIBLY IN INK.

I. NPDES PERMIT NUMBER

ALG87

II. OPERATOR INFORMATION

Operator Name	
Operator Mailing Address	Operator Phone Number
City, State, Zip	Operator E-mail Address
Contact Name and Title	Contact Phone Number

III. BASIS FOR TERMINATION

Please check only one:

- A new operator has taken over responsibility for the pest treatment. For this termination request to be granted, the Name, Phone Number, Address and Contact of the succeeding operator must be listed, and the succeeding operator must obtain new or modify existing permit coverage:
- _____
- Discharges from the application of pesticides for which permit coverage was obtained have ceased, or there is not or will no longer be a pesticide discharge.
- Permit coverage has been obtained under an individual or alternative general permit for all pesticide discharges requiring NPDES permit coverage. Please provide the individual or alternative general permit number: #####.

IV. CERTIFICATION OF OPERATOR RESPONSIBLE OFFICIAL

I certify under penalty of law that I have met at least one of the reasons for terminating permit coverage listed in Section III above. I understand that by submitting this Notice of Termination, I am no longer authorized to discharge pesticides to waters of the State. This document and all attachments were prepared under my direction and supervision in accordance with a system designed to ensure 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 or imprisonment. Additionally, I understand that the submittal of the Notice of Termination does not release a pesticide operator from liability for any violations of ADEM Admin. Code ch. 335-6-6 and the Alabama Water Pollution Control Act.

Name (type or print) _____ Official Title _____

Signature _____ Date Signed _____