

## NOTICE OF TERMINATION TO CANCEL COVERAGE UNDER NDPDES GENERAL PERMIT FOR STORMWATER DISCHARGES ASSOCIATED WITH INDUSTRIAL ACTIVITY (NDR05-0000)

NORTH DAKOTA DEPARTMENT OF ENVIRONMENTAL QUALITY DIVISION OF WATER QUALITY SFN 62496 (04/24)

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Date Received://	-
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GENERAL INFORMATION  Name of Facility	Permit ID Number				
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Facility Address/Location					
Name of Facility Owner or Operator	Facility Contact Name	Contact Telephon	Contact Telephone Number		
Mailing Address	City	State/Province	Zip Code		
Owner Email Address					
Brief Description of Why Coverage is No	Longer Necessary				
Indicate Which Condition Has Been Met	Before Submitting the NOT.				
All stormwater discharges associated	d with industrial activity have been eliminated	d at the facility.			
The facility has been issued an indivi	idual NDPDES permit to discharge stormwa	ter associated with industr	ial activity.		
The facility has submitted a No Expo	sure Certification form to the Department of	Environmental Quality.			
CERTIFICATION STATEMENT					
Return Completed Form to:  North Dakota Dept. of Env. Quality Division of Water Quality, 3rd floor 4201 Normandy Street	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered 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 for knowing violations.				
Telephone: 701.328.5210	Printed Name of Owner	Title			
	Signature of Owner	Date			