Recertification Notice of Intent (NOI)
Landfill Sediment Pond Discharge General Permit ARG160000

You must **complete, certify, and sign this Recertification Notice of Intent (NOI) form** and return it to the Department in order to continue permit coverage under the General Permit ARG160000. You must submit this form **no later than January 31, 2020.** Please keep a copy of this form for your records once completed and signed.

Permit Tracking Number: ARG160017 AFIN: 66-00226
Permittee Name: City of Fort Smith

If any changes need to be made to the information shown below, please update the new information in the corrections section below and/or attach documentation.

	Current Information in ADEQ's Database	Corrections (if needed)
Facility Address:	City of Fort Smith Sanitation Dept. 5900 Commerce Road Fort Smith, AR 72916	
Responsible Official:	Jimmy Reed	Alan Spangler
Responsible Official Email:	jreed@FortSmithAR.gov	Aspangler@fortsmithar.gov
Cognizant Official:	Charity A Middleton	Jimmy Reed
Cognizant Official Email:	cmiddleton@fortsmithar.gov	JReed@fortsmithar.gov
Contact Person:	Jimmy Reed	Alan Spangler
Contact Email	jreed@FortSmithAR.gov	Aspangler@fortsmithar.gov
Phone Number	479-784-2460	479-784-2461

1. Are the mailing and invoice addresses the same? Yes ☒ No ☐ N/A ☐
   If "No" please provide invoice address →
2. Have you attached an updated disclosure statement*? Yes ☐ No ☒ N/A ☐

** A disclosure statement IS NOT required for Governmental entities, consisting only of subdivisions or agencies of the federal government, agencies of the state government, counties, municipalities, or duly authorized regional solid waste authorities as defined by law. This does not include improvement districts or any other subdivision of government which is not specifically instituted by an act of the General Assembly.*

Outfall Currently Listed in ADEQ's Database**

Outfall 001: Latitude: 35° 18' 15.06" N; Longitude: 94° 21' 39.9" W

** Only one outfall may be listed. If a change to the above outfall is needed, please be sure to provide the correct coordinates, and an explanation of the required changes.

Additional Comments:

"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 gather 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."

I certify that I have read and will comply with all the requirements of the renewal Landfill Sediment Pond Discharge General Permit (ARG160000).

Responsible Official Name: Alan Spangler **Responsible Official Title:** Landfill Manager

Responsible Official Signature: **Date:** 07/05/2019

Return the NOI form to the address below or send it electronically to water.permit.application@adeq.state.ar.us:

Office of Water Quality, Permits Branch
Arkansas Department of Environmental Quality
5301 Northshore Drive
North Little Rock, AR 72118-5317