

**PERMIT TRANSFER FORM**

Please select one of the following options:

A. Permittee (legal name) change

B. Facility name change

C. Responsible official name change

A       B       C       A & B       A & C       B & C       A & B & C

**PERMIT NUMBER:** \_\_\_\_\_

**AFIN NUMBER:** \_\_\_\_\_

**I. CURRENT PERMITTEE INFORMATION**

Permittee (legal name): \_\_\_\_\_

Facility Name: \_\_\_\_\_

Responsible Official Name (see Section IV below): \_\_\_\_\_

Is the permittee identified above, the owner of the facility?     Yes     No

If you mark No, please list the name of the owner: \_\_\_\_\_

**II. NEW PERMITTEE INFORMATION**

Permittee (legal name): \_\_\_\_\_

Facility Name (if different from Permittee Name): \_\_\_\_\_

Is the permittee identified above, the owner of the facility?     Yes     No

If you mark No, please list the name of the owner: \_\_\_\_\_

Responsible Official Name (see Section IV below): \_\_\_\_\_

Official Title of Responsible Officer: \_\_\_\_\_ Owner Type:

Permittee Address: \_\_\_\_\_  STATE     PARTNERSHIP

Permittee City: \_\_\_\_\_  FEDERAL     CORPORATION\*

Permittee State: \_\_\_\_\_ Zip: \_\_\_\_\_  SOLE PROPRIETORSHIP

Permittee Telephone No.: \_\_\_\_\_

Is the new permittee registered with the Arkansas Secretary of State?     Yes     No

If yes, please provide the full name of corporation if different than the legal permittee name listed above. \_\_\_\_\_

Facility Mailing Address: \_\_\_\_\_ Facility City: \_\_\_\_\_

\_\_\_\_\_ Facility State: \_\_\_\_\_ Zip: \_\_\_\_\_

Facility Contact Person Name: \_\_\_\_\_ Contact Person Title: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

Invoice Contact Person: \_\_\_\_\_ City: \_\_\_\_\_

Invoice Mailing Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Invoice Mailing Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Cognizant Official Name: \_\_\_\_\_ Cognizant Official Title: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

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**III. OWNERSHIP CHANGE AGREEMENT**

**Please note you must complete this Section (III.) only if the permit has a new owner or a new ownership.**

Please specify the closing date for this transaction: \_\_\_\_\_

**Current Permittee (Seller):** \_\_\_\_\_

Signature of Responsible Corporate Officer: \_\_\_\_\_  
Title of Responsible Corporate Officer: \_\_\_\_\_  
Printed Name of Responsible Corporate Officer: \_\_\_\_\_  
Date: \_\_\_\_\_

**New Permittee (Buyer):** \_\_\_\_\_

Signature of Responsible Corporate Officer: \_\_\_\_\_  
Title of Responsible Corporate Officer: \_\_\_\_\_  
Printed Name of Responsible Corporate Officer: \_\_\_\_\_  
Date: \_\_\_\_\_

**Disclosure Statement:**

Disclosure Statement must be submitted for new permittee. **Disclosure Statement is not required for Stormwater Permits.**

Is Disclosure Statement enclosed:     Yes             No

**Financial Assurance:**

Please note that if Financial Assurance is required for the current permittee then the new permittee may have to provide new Financial Assurance before the permit maybe transferred..

**Land Use Contract:**

For **land application permits** you must submit a new land use contracts for all the sites permitted under the current permit for land application. The new land use contract must be signed by the new permittee and land owner.

**IV. CERTIFICATION OF NEW PERMITTEE**

“I certify that the cognizant official designated in this Permit Transfer Form (Section II) is qualified to act as a duly authorized representative under the provisions of 40 CFR Part 122.22(b). If no cognizant official has been designated, I understand that the Department will accept reports signed by the applicant. 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 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.”

In addition, I certify that there will be no operational changes that warrant a permit modification. (Please note that if there are changes that warrant a permit modification, then you must submit a complete application, updated plans, design calculations and specifications, and the permit modification fee along with this Ownership Change Form. The transfer may be made effective prior to permit modification.)

Typed or Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_