

Arkansas Department of Environmental Quality
NPDES Branch, Water Division
5301 Northshore Drive
North Little Rock, AR 72118
(501) 682-0623

**NOTICE OF TERMINATION (NOT)
FOR DISCHARGERS OF STORMWATER RUNOFF ASSOCIATED WITH
CONSTRUCTION ACTIVITY
AUTHORIZED UNDER NPDES GENERAL PERMIT ARR150000**

Permit Tracking Number to be Terminated: ARR15 _____

I. PERMITTEE INFORMATION

Permittee Legal Name: _____	Permittee Type:
Permittee Mailing Address: _____	<input type="checkbox"/> STATE <input type="checkbox"/> PARTNERSHIP
City: _____	<input type="checkbox"/> FEDERAL <input type="checkbox"/> CORPORATION*
State: _____ Zip: _____	<input type="checkbox"/> SOLE PROPRIETORSHIP
Permittee Telephone Number: _____	<input type="checkbox"/> PUBLIC <input type="checkbox"/> OTHER
Permittee Fax Number: _____	
Email _____	*State of Incorporation: _____

II. CONSTRUCTION SITE INFORMATION

Project Name: _____	Project Contact Person: _____
Project County: _____	Project Physical Address: _____
Project City: _____	Zip: _____
Telephone Number: _____	

Have you established vegetation cover with 80% density?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Have all discharges associated with construction activities been eliminated?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Have you included pictures of vegetation coverage and stabilized areas?	<input type="checkbox"/> YES <input type="checkbox"/> NO
If the project is a large plan of development, have all certifications been collected consistent with Part I.B.16.C?	<input type="checkbox"/> YES <input type="checkbox"/> NO

****Please note that photos must be submitted in order to terminate permit coverage.****

III. PERMITTEE CERTIFICATION

“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 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.”

“In addition, I understand that by submitting this Notice of Termination that I am no longer authorized to discharge storm water by general permit, and that discharging pollutants in stormwater associated with construction activity to Waters of the State is unlawful under the Clean Water Act and the Arkansas Water and Air Pollution Control Act where the discharge is not authorized by an NPDES permit.”

Typed or Printed Name: _____	Title: _____
Signature: _____	Date: _____