



**DIVISION OF
ENVIRONMENTAL QUALITY**

Sarah Huckabee Sanders
GOVERNOR

Shane E. Khoury
SECRETARY

OFFICE OF WATER QUALITY (OWQ) PERMIT TRANSFER FORM

PERMIT NUMBER: _____

SELECT ALL OF THE FOLLOWING THAT APPLY:

☐ Permittee (legal name) change [CHANGE OF OWNERSHIP]

☐ Permittee (legal name) change [NAME CHANGE ONLY]

☐ Facility name change

☐ Responsible official name change

I. CURRENT PERMITTEE INFORMATION

Permittee (legal name): _____

Facility Name: _____

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

If No, list owner name: _____

II. NEW PERMITTEE INFORMATION

Permittee (legal name): _____

Facility Name (if different from Permittee Name): _____

Is the Permittee the owner of the facility? ☐ Yes ☐ No If No, list owner name: _____

Facility Contact Person: _____

Permittee Type:

Facility Contact Title: _____

☐ Cooperative ☐ Corporation

Facility Contact Email: _____

☐ Federal Gov. ☐ State Gov.

Facility Contact Phone: _____

☐ Local Government

Permittee Mailing Address: _____

☐ General Partnership

Permittee City: _____

☐ Limited Liability Company (LLC)

Permittee State: _____

Zip: _____

☐ Limited Partnership (LP, LLP, LLLP)

☐ Solely Owned Proprietorship

Is the new Permittee (legal name) registered with the Arkansas Secretary of State? ☐ Yes ☐ No

If yes, the Permittee (legal name) above must EXACTLY match the name registered with the Arkansas Secretary of State. Proof of Good Standing from the State of Incorporation must be submitted with this form.

Invoice Contact Person: _____

City: _____

Invoice Mailing Address: _____

State: _____ Zip: _____

Phone: _____

Cognizant Official Name¹: _____ Cognizant Official Title: _____

Phone Number: _____ E-mail: _____

¹ Duly Authorized Representative as outlined in 40 C.F.R. § 122.22(b)

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III. OWNERSHIP CHANGE AGREEMENT

Please note you must complete Section III only if this permit transfer is for a change of ownership.

Please specify the closing date for this transaction: _____

Current Permittee (Seller): _____

Printed Name of Responsible Official²: _____

Title of Responsible Official: _____

Signature of Responsible Official²: _____

Date: _____

Would you like to be notified when the transfer of the subject permit is complete? ☐ Yes* ☐ No

*If "yes", please provide E-mail: _____ Phone Number: _____

New Permittee (Buyer): _____

Printed Name of Responsible Official²: _____

Title of Responsible Official: _____

Signature of Responsible Official²: _____

Date: _____

²Responsible Official must meet the application signatory requirements of 40 C.F.R. § 122.22

<https://www.ecfr.gov/current/title-40/section-122.22>

For a Cooperative, Corporation, LLC, LP, or similar entity, the Responsible Official must be a Responsible Corporate Officer.

For a General Partnership or Solely Owned Proprietorship, the Responsible Official must be a general partner or the proprietor.

For a Governmental entity, the Responsible Official must be the ranking elected official or a principal executive officer.

Trust Fund Requirements:

If this facility is subject to the trust fund requirements (Ark. Code Ann. §8-4-203(b)(1)(B)), the permittee must also submit the DEQ Trust Fund Requirements form with this transfer form. A form may be obtained from the DEQ website:

<https://www.adeg.state.ar.us/water/permits/npdes/individual/pdfs/ndstw-trust-fund-certification-form.pdf>

Land Use Contract and Waste Management Plan:

For **land application permits** you must submit the waste management plan along with 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. The waste management plan must be prepared and certified by an Arkansas Licensed Professional Engineer, or when applicable, an authorized Natural Resources Conservation Service (NRCS) engineer or technician.

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IV. DISCLOSURE STATEMENT & PROOF OF GOOD STANDING

A Disclosure Statement must be submitted for the new permittee, unless the permittee meets one of the exemptions listed on the disclosure statement form. **A Disclosure Statement is not required for Stormwater General Permits.** A form may be obtained from the DEQ website:

<https://www.adeq.state.ar.us/adeq-disclosure-statement.pdf>

Is a Disclosure Statement enclosed: ☐ Yes ☐ No

If the new permittee is a Cooperative, Corporation, LLC, or LP, enclose proof of good standing with the Arkansas Secretary of State and from the Secretary of State of the state of incorporation, if applicable.

Is proof of good standing enclosed: ☐ Yes, Arkansas only ☐ Yes, Arkansas and State of Incorporation

☐ No, please describe the reason _____

V. CERTIFICATION OF NEW PERMITTEE (Responsible Official)

"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 C.F.R. § 122.22(b). If no cognizant official has been designated, I understand that the Division will accept reports signed only 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.)

Responsible Official Name: _____ Title: _____

Email: _____ Phone: _____

Responsible Official Signature: _____ Date: _____

Responsible Official must meet the application signatory requirements of 40 C.F.R. § 122.22

<https://www.ecfr.gov/current/title-40/section-122.22>

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