



NOTICE OF INTENT
FOR DISCHARGERS OF STORMWATER RUNOFF
ASSOCIATED WITH REGULATED SMALL MUNICIPAL SEPARATE STORM SEWER SYSTEMS
AUTHORIZED UNDER NPDES GENERAL PERMIT ARR040000

I. PERMITTEE INFORMATION

New [] Renewal [X] (Permit Tracking Number ARR04 0020)

Regulated Small MS4 Name: University of Arkansas at Little Rock
Mailing Address: 2801 S. University Ave.
Actual Street Address: Same
City: Little Rock
State: AR Zip: 72204
Owner Type: [X] STATE
[PUBLIC] [OTHER]
Urbanized Area Yes
County(ies): Pulaski

Enter the Latitude and Longitude of the approximate center of the Small MS4 (A map must be included.):

Small MS4 Latitude: 34 degrees 43.213 minutes seconds
Small MS4 Longitude: 92 degrees 20.349 minutes seconds

II. PERMITTEE CONTACT INFORMATION

Name: Vince Rodgers Telephone: 501-371-7602
Title: EHS Manager Email Address: varodgers@ualr.edu

III. INVOICE MAILING INFORMATION

Invoice Contact Person: Maurine Moen City: Little Rock
Invoice Mailing Company: UALR State: AR Zip: 72204
Invoice Mailing Address: 2801 S. University Ave - Physical Plant Telephone: 501-371-7602

IV. CERTIFICATION OF PERMITTEE (See Part 5.7 of the general permit)

For a municipality, State, Federal, or other public agency: By either a principal executive officer or ranking elected official. For purposes of Part VI.H of the general permit, a principal executive officer of a Federal agency includes (i) the chief executive officer of the agency, or (ii) a senior executive officer having responsibility for the overall operations of a principal geographic unit of the agency (e.g., Regional Administrator of EPA).

"I certify that the cognizant official designated in this Notice of Intent is qualified to act as a dully authorized representative under the provisions of 40 CFR 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."

Responsible Official Printed Name: David Millay Title: Physical Plant Director
Responsible Official Signature: [Signature] Date: 8-17-09

V. PERMIT REQUIREMENT VERIFICATION

- Submittal of Complete Renewal NOI? [] Yes [] No
Submittal of Complete Stormwater Management Program? [] Yes [] No
Submittal of MS4 map? [] Yes [] No