

Notice of Termination (NOT) WPDES General Permit Discharge

Form 3400-221 (2/17)

Notice: This Notice of Termination (NOT) form is authorized by s. NR 203.136(3), Wis. Adm. Code and s. 283.53, Wis. Stats. The landowner, responsible executive or municipal officer, manager, partner, proprietor, or duly authorized representative shall submit this form to the Department of Natural Resources (Department) to certify that the permittee no longer claims coverage under any specified WPDES general permit for discharge to the waters of the state of Wisconsin. Submittal of this form constitutes notice that the party identified in Section I of this form is no longer authorized to discharge wastewater associated with the specified WPDES general permit. Termination of coverage will be effective when confirmed by the Department to the permittee.

Please read all instructions on page 2 of this form before completing it. All necessary information must be provided on this form. Failure to complete this form correctly may result in rejection of this form by the Department. Personal information collected will be used for administrative purposes and may be provided to requesters to the extent required by Wisconsin's Open Records law (ss. 19.31 - 19.39, Wis. Stats.).

Please type or clearly print your answers to all questions.

Section I: WPDES Permittee Responsible for Pollutant Discharge

WPDES Permittee (first and last name and org., co. or entity)		Authorized Representative (first and last name and title)		
Mailing Address		City	State	ZIP Code
Email Address		Phone Number (area code)	Alternative Phone Number	

Section II: Project or Facility Site Information

Project or Facility Site Name		WPDES Permit #	Facility Identification (FID)				
Location Address/Description		City	State	ZIP Code	County		
GPS Location: (decimal degrees)	Latitude	Longitude	Township	Range	Section	Quarter	Quarter-Quarter
			N	<input type="radio"/> E <input type="radio"/> W			

Section III: Termination Information

Reason for Termination Request

NOTE: If the facility was sold or transferred, please fill out a Transfer of Coverage (Form 3400-222). If you moved your activities to a new site, please reapply for WPDES general permit coverage for the new project or facility site.

Section IV: Certification & Signature

For this form and all required information and attachments, I certify under penalty of law that these documents and all attachments were prepared under my direction or supervision 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.

Additionally, I understand that by submitting this Notice of Termination form, the site described herein is no longer authorized to discharge and does not discharge wastewater associated with the specified WPDES general permit; and that discharging pollutants in wastewater associated with the specified WPDES general permit to the waters of the state of Wisconsin is unlawful where the discharge is not authorized by a WPDES permit.

NOTE: This form must be signed by a landowner, responsible executive or municipal officer, manager, partner, proprietor, or other duly authorized representative as described in the instructions of page 2. Failure to properly complete and sign this form will result in its rejection.

Printed Name of WPDES Permittee/Authorized Representative

Title

Signature of WPDES Permittee/Authorized Representative

Date Signed

Mail this completed form to the appropriate Wisconsin Department of Natural Resources office in the region where the facility is located. See the instructions on page 2 of this form for regional office addresses.

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Instructions

Section I: WPDES Permittee Responsible for Pollutant Discharge

A permittee is defined as a person holding fee title, an easement or interest in the property or responsible executive or municipal officer, manager, partner, or proprietor with authority that allows the person to undertake permitted activities on the property. Please provide the legal name of the person, company, organization, or any other entity that is the landowner, responsible executive or municipal officer, manager, partner, or proprietor and the legal name of the person who is the delegated signatory to be a duly authorized representative regulated under the specified WPDES general permit. The mailing address and phone number given should be for the landowner, responsible executive or municipal officer, manager, partner, proprietor or duly authorized representative.

Section II: Project or Facility Site Information

Provide the name and location of the facility or project site as it appears on the Department general permit coverage letter. Additionally, provide the WPDES permit number for the pollutant discharge at the project or facility site and, if known, provide the Facility Identification (FID) number.

Section III: Termination Information

Provide some details about the reason for this termination request. If you moved your activities to a new site, you will need to reapply for WPDES general permit coverage. If new owners or operators are continuing activity at this site, you will need to fill out a Transfer of Coverage (Form 3400-222). The WPDES general permit coverage is not transferable to any person except after notice to the Department.

Section III: Certification & Signature

State regulations (s. 283.37, Wis. Stats) provide for severe penalties for submitting false information on this form. State regulations require this form to be signed as follows:

1. For a corporation, by a principal executive officer of at least the level of vice president or by the principal executive officer's authorized representative responsible for the overall operation of the point source for which a permit is sought.
2. For a limited liability company, by a member or manager.
3. For a partnership, by a general partner.
4. For a sole proprietorship, by the proprietor.
5. For a unit of government, by a principal executive officer, ranking elected official or other duly authorized representative.

Sign the form, print or type the name of the individual signing the form and the date of signature.

Mailing Address

Unless otherwise directed, mail this completed form to the Wisconsin Department of Natural Resources office associated with the county of the facility site or discharge location as follows:

Northern Region (NOR)				
Ashland	Douglas	Langlade	Rusk	WDNR Northern Regional Headquarters Attn: Wastewater GP Program 810 W Maple St Spooner, WI 54801 715-635-2101
Barron	Florence	Lincoln	Sawyer	
Bayfield	Forest	Oneida	Taylor	
Burnett	Iron	Polk	Vilas	
		Price	Washburn	
Northeast Region (NER)				
Brown	Green Lake	Marquette	Outagamie	WDNR Northeast Regional Headquarters Attn: Wastewater GP Program 2984 Shawano Ave Green Bay, WI 54313 920-662-5100
Calumet	Kewaunee	Menominee	Shawano	
Door	Manitowoc	Oconto	Waupaca	
Fond du Lac	Marinette	Oneida Reservation	Waushara	
			Winnebago	
West Central Region (WCR)				
Adams	Crawford	La Crosse	Portage	WDNR West Central Regional Headquarters Attn: Wastewater GP Program 1300 W Clairemont Ave Eau Claire, WI 54701 715-839-3700
Buffalo	Dunn	Marathon	St. Croix	
Chippewa	Eau Claire	Monroe	Trempealeau	
Clark	Jackson	Pepin	Vernon	
	Juneau	Pierce	Wood	
South Central Region (SCR)				
Columbia	Grant	Jefferson	Rock	WDNR South Central Regional Headquarters Attn: Wastewater GP Program 3911 Fish Hatchery Rd Fitchburg, WI 53711 608-275-3266
Dane	Green	LaFayette	Sauk	
Dodge	Iowa	Richland		
Southeast Region (SER)				
Kenosha	Ozaukee	Sheboygan	Washington	WDNR Southeast Regional Headquarters Attn: Wastewater GP Program 2300 N Dr. Martin Luther King Jr. Dr Milwaukee, WI 53212 414-263-8500
Milwaukee	Racine	Walworth	Waukesha	