



CONSTRUCTION STORMWATER DISCHARGE TERMINATION APPLICATION INSTRUCTIONS

Public Works

405-671-2874

4500 N.E. 4th Street

Del City OK 73117

Fax: 405-671-2887

Community Services

405-670-7314

3701 S.E. 15th Street

Del City OK 73115

Fax: 405-670-7368

www.cityofdelcity.com

All applications must be completed in full, including all required supporting documentation. Incomplete applications may be returned to the applicant, leading to substantial delay in processing.

Be sure to read these instructions carefully before proceeding!

Application Form:

1. Be sure to complete the form in its entirety.

When to File the Notice of Termination Form:

Permittees who are presently covered under an issued NPDES or SWQ/OPDES general permit for storm water discharges associated with industrial activity may submit a **Notice of Termination (NOT)** form when their facilities no longer have any storm water discharges associated with industrial activity as defined in the storm water regulations at 40 CFR 122.26(b)(14), or when they are no longer the operator of the facilities. For a construction site, when the site has been finally stabilized (i.e., a uniform perennial vegetative cover with a density of at least 70% of the native background cover has been established for all unpaved areas and areas not covered by permanent structures or where permanent structures or where equivalent permanent stabilization measures such as riprap or gabions have been used), and all storm water discharges from construction activities that are authorized by general permit (GP-005A) are eliminated, or they are no longer the operator of the facility, a NOT must be submitted that is signed in accordance with part VI.G of the general permit. If you need assistance contact the Storm Water Quality office of The City of Del City at 671-2874.

Permit Information:

Enter the existing Del City Construction Stormwater Discharge permit number assigned to the facility or site identified.

Facility Operator Information:

Give the legal name of the person, firm, public organization or any other entity that operates the facility or site described in this application. The name of the operator may or may not be the same name as the facility. The operator of the facility is the legal entity that controls the facility's operation, rather than the plant or site manager.

Facility /Site Location Information:

Enter the facility's or site's official or legal name and street address.

Check the box showing whether you are requesting termination of your permit or the facility is or has changed owner or operator. If changing owner/operator, please fill out the Transfer application.

Certification:

The Notice of Termination form must be signed by a responsible party as follows:

For a Corporation: by a responsible officer, which means:

- (1) president, secretary, treasurer, or vice president of the corporation in charge of a principal business function;
- (2) the manager of one or more manufacturing, production, or operating facilities employing 250 persons or having gross annual sales or expenditures exceeding \$25 million (in second-quarter 1980 dollars) if authority to sign documents has been assigned or delegated to the manager in accordance with corporate procedures.

For a partnership or sole proprietorship: by a general partner or the proprietor.

For a municipality, state, Federal, or other public facility: by either principal executive officer or ranking elected official.



Construction Stormwater Discharge (CSD) Permit Termination Application

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Submission of this Notice of Termination constitutes notice of the party identified in the Current Facility / Site Operator Information of this form is no longer authorized to discharge stormwater associated with construction activities under the City of Del City Stormwater Quality Management Program.

Construction Stormwater Discharge Permit No.: _____

CURRENT FACILITY / SITE OPERATOR INFORMATION:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Phone: No. _____ Cell: _____ Fax: _____

E-mail Address: _____

Please check one: You are no longer the operator of the facility The CSD is being terminated

FACILITY LOCATION:

Project Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Latitude: _____ Longitude: _____

Quarter: _____ Section: _____ Township: _____ Range: _____

Applicant Certification

I certify under penalty of law that all storm water discharges associated with industrial/construction activity from the identified facility that are authorized by a SWQ/OPDES general permit have been eliminated or that I am no longer the operator of the facility or the construction site. I understand that by submitting this notice of termination, I am no longer authorized to discharge storm water associated with industrial or construction activity under this general permit, and that discharging pollutants in storm water associated with industrial or construction activity to waters of the state is unlawful under SWQ/OPDES where the discharge is not authorized by an SWQ/OPDES permit. I also understand that the submittal of this notice of termination does not release an operator from liability for any violations of this permit or SWQ/OPDES rules and procedures. _____ (initial)

I hereby submit this application for a Construction Storm Water Discharge Permit Termination.

APPLICANT SIGNATURE

DATE