

**NOTICE OF TERMINATION FOR
 A GENERAL OR INDIVIDUAL NATIONAL POLLUTANT DISCHARGE ELIMINATION
 SYSTEM PERMIT FOR STORMWATER DISCHARGES ASSOCIATED WITH
 CONSTRUCTION ACTIVITIES**

- OR -

AN EROSION AND SEDIMENT CONTROL PERMIT

- OR -

**AN EROSION AND SEDIMENT CONTROL GENERAL PERMIT FOR EARTH DISTURBANCE
 ASSOCIATED WITH OIL AND GAS EXPLORATION, PRODUCTION, PROCESSING OR
 TREATMENT OPERATIONS OR TRANSMISSION FACILITIES**

Regulatory Requirement: This form serves to fulfill the obligations referenced in 25 Pa. Code §102.7 (related to Permit Termination).

Applicability: A permittee and co-permittee (if co-applicant) presently covered under an Individual National Pollutant Discharge Elimination System (NPDES) Permit for Stormwater Discharges Associated with Construction Activities, the General NPDES Permit for Stormwater Discharges Associated with Construction Activities (PAG-02), an Erosion and Sediment Control Permit (ESCP), or an Erosion and Sediment Control General Permit for Earth Disturbance Associated with Oil and Gas Exploration, Production, Processing, or Treatment Operations or Transmission Facilities (ESCGP) shall submit this Notice of Termination (NOT) form to the Department of Environmental Protection (Department) or conservation district for permit applications submitted **after November 19, 2010**.

Per 25 Pa. Code §102.7, the NOT form is to be submitted once the following have been achieved: permanent stabilization, per 25 Pa. Code §102.22(a)(2), of earth disturbance activities; removal of all erosion and sediment control best management practices (BMPs) per the approved Erosion and Sediment Control Plan; and, implementation of post construction stormwater management (PCSM) BMPs per the approved PCSM Plan or site restoration/reclamation via the approved Reclamation/Restoration Plan.

A copy of the project's record drawings/as-builts shall be attached to this NOT. The permittee shall retain a copy of the record drawings/as-builts and shall also provide a copy, as part of the approved PCSM Plan, to the person(s) identified in Appendix B, as being responsible for the long-term operation and maintenance of the PCSM BMP(s). Additional copies of this NOT and record drawings/as-builts shall also be provided to the local municipality.

1.	PERMIT INFORMATION: Permit No.: _____												
2.	EARTH DISTURBANCE SITE LOCATION: Facility/Development Name: _____ Address: _____ Municipality: _____ County: _____ Latitude: ____°/ ____'/ ____" Longitude: ____°/ ____'/ ____" U.S.G.S. Quad Map Name: _____												
3.	PERMITTEE/CO-PERMITTEE INFORMATION: <table style="width: 100%; border: none;"> <thead> <tr> <th style="text-align: center; width: 50%;">PERMITTEE</th> <th style="text-align: center; width: 50%;">CO-PERMITTEE (if co-applicant)</th> </tr> </thead> <tbody> <tr> <td>Name: _____</td> <td>Name: _____</td> </tr> <tr> <td>Address: _____</td> <td>Address: _____</td> </tr> <tr> <td>City: _____</td> <td>City: _____</td> </tr> <tr> <td>State: _____ Zip Code: _____</td> <td>State: _____ Zip Code: _____</td> </tr> <tr> <td>Telephone Number: _____</td> <td>Telephone Number: _____</td> </tr> </tbody> </table>	PERMITTEE	CO-PERMITTEE (if co-applicant)	Name: _____	Name: _____	Address: _____	Address: _____	City: _____	City: _____	State: _____ Zip Code: _____	State: _____ Zip Code: _____	Telephone Number: _____	Telephone Number: _____
PERMITTEE	CO-PERMITTEE (if co-applicant)												
Name: _____	Name: _____												
Address: _____	Address: _____												
City: _____	City: _____												
State: _____ Zip Code: _____	State: _____ Zip Code: _____												
Telephone Number: _____	Telephone Number: _____												
4.	LONG-TERM OPERATION AND MAINTANENCE AND RESTORATION/RECLAMATION: This project involves: (check the appropriate box) <input type="checkbox"/> - Installation and subsequent long-term operation and maintenance of PCSM BMPs. OR <input type="checkbox"/> - Restoration or reclamation activities per 25 Pa. Code §102.8(n). <i>Note: For projects solely involving restoration or reclamation activities, proceed to Section 7.</i>												
5.	FINAL CERTIFICATION OF LICENSED PROFESSIONAL: This section is to be completed by a licensed professional as defined in 25 Pa. Code §102.1. <i>I, _____, do hereby certify pursuant to the penalties of 18 Pa. C.S.A. § 4904 to the best of my knowledge, information and belief, that the accompanying record drawings accurately reflect the as-built conditions, are true and correct, and are in conformance with Chapter 102 of the rules and regulations of the Department of Environmental Protection and that the project site was constructed in accordance with the approved PCSM Plan, all approved plan changes and accepted construction practices.</i> <div style="display: flex; justify-content: space-between;"> <div style="width: 70%;"> <p><i>Name and Official Title of Licensed Professional</i></p> <p>_____</p> <p>_____</p> <p><i>Signature:</i> _____</p> </div> <div style="width: 25%; text-align: center; vertical-align: middle;"> <p>Licensed Professional Seal</p> </div> </div>												

6. PROOF OF INSTRUMENT FILING WITH THE RECORDER OF DEEDS OFFICE:

Per 25 Pa. Code §102.8(m)(2), the instrument will assure disclosure of the PCSM BMP(s) and the related obligations in the ordinary course of a title search of the subject property. The recorded instrument must identify the PCSM BMP(s), provide for the necessary access related to long-term operation and maintenance of the PCSM BMP(s) and provide notice that the responsibility for long-term operation and maintenance of the PCSM BMP(s) is a covenant that runs with the land that is binding upon and enforceable by subsequent grantees.

For either Commonwealth or federally-owned property, a covenant that runs with the land is not required until the transfer of the land containing the PCSM BMP(s) occurs. Upon said transfer, the deed must then comply with 25 Pa. Code § 102.8(m)(2).

a. Is the project on Commonwealth or federally-owned property? Yes No

If the answer to question a., above, is Yes, proceed to Section 7. If the project is not on Commonwealth or federally-owned property, continue with this Section and attach copies of the notice provided to all landowners who have bought or accepted ownership or other legal responsibility for parcels containing PCSM BMPs. In addition, as required by 25 Pa. Code §102.7 (b)(5), a copy of the completed, signed, and notarized PCSM Instrument Filing Notice (DEP form # 3150-PM-BWEW0556, as amended) and a copy of the Recorder of Deeds Office receipt must be attached to this NOT as proof of instrument filing along with completed Appendices A and B. If a PCSM Instrument Filing Notice (DEP form # 3150-PM-BWEW0556, as amended) was not utilized to record the required documents, attach the entire package of recorded documents to this NOT as proof of instrument filing along with completed Appendices A and B.

I certify, under penalty of law, that I have recorded an instrument with the Recorder of Deeds Office which will assure disclosure of the PCSM BMP(s) and the related obligations in the ordinary course of a title search of the subject property, and which meets the requirements of 25 Pa. Code §102.8(m)(2).

Name and Official Title of person listed under Section 3:

Signature: _____

7. Permit Termination Certification:

This Section is to be completed by the person listed in Section 3 and, when applicable, Section 6.

I, _____, certify under penalty of law that permanent stabilization, under 25 Pa. Code §102.22(a)(2), of the earth disturbance activities has occurred and either the installation of BMPs in accordance with an approved plan prepared and implemented per §§ 102.4 and 102.8 (relating to erosion and sediment control requirements; and PCSM requirements) has occurred or all approved restoration/reclamation activities have been completed. I understand that by submitting this NOT, I am no longer authorized to conduct earth disturbance activities under the referenced permit and that discharging stormwater from earth disturbance activities to waters of the Commonwealth is unlawful where the discharge is not authorized by a permit. I also understand that the submittal of this NOT does not release a permittee or co-permittee from liability for any violations of the permit, the federal Clean Water Act (if applicable), the Pennsylvania Clean Streams Law and the rules and regulations promulgated thereunder, or from liability for any environmental damages occurring as a result of any earth disturbance activities conducted at the site. I understand that there are significant penalties for submitting false information, including possible fines and imprisonment for knowing violations.

Individual; proceed to signature portion.

I hereby certify that I am the signatory pursuant to 25 Pa. Code § 92a.22 and 40 CFR §122.22 and that I am the person who is responsible for decision-making regarding environmental compliance functions for Enter Entity name, the manager of one or more manufacturing, production, or operating facilities of the permittee and am authorized to make management decisions which govern the operation of regulated facility including having explicit or implicit duty of making major capital investment recommendations, and initiating and directing other comprehensive measures to assure the permittee's long term environmental compliance with environmental laws and regulations.

(choose one of the following; not applicable for individuals):

- The responsible corporate officer president vice president secretary
- treasure of _____ Corporation/Company
Entity name
- The member or manager of _____ LLC
Entity name
- The general partner of _____ partnership/LP/LLP
Entity name
- The principal executive officer or ranking elected official of _____ Municipality/State/Federal/other public agency
Entity name
- Power of Attorney/delegation of contractual authority (documentation supporting delegation of contracting authority must be provided) for _____
Entity name

SIGNATURES

Permittee

Co-Permittee (if Co-Applicant)

Print Name and Title of Person Signing

Print Name and Title of Person Signing

Signature of Permittee

Signature of Co-Permittee

Date Signed

Date Signed

Acknowledgement:

Commonwealth of Pennsylvania
County of _____

On this, the _____ day of _____, 20____, before me, a Notary Public, personally appeared _____, having a title of _____ within the business entity of _____, known to me (or satisfactorily proven) to be the person whose name is subscribed to the foregoing document, and acknowledged that he/she executed the same for the purposes therein contained.

IN WITNESS WHEREOF, I have hereunto set my hand and notarial seal.

NOTARY SEAL

Notary Public My Commission Expires: _____

APPENDIX A

Summary Table of Installed PCSM BMPS

Check all applicable PCSM BMPS that have been installed or will be implemented as part of the approved PCSM Plan along with their associated function(s).

Note: VC = Volume Control, RC = Rate Control and WQ = Water Quality

BMP		Function(s)						No. of BMPS	Total Acres Treated	Total Volume Treated
<input type="checkbox"/>	Wet Ponds	<input type="checkbox"/>	VC	<input type="checkbox"/>	RC	<input type="checkbox"/>	WQ			
<input type="checkbox"/>	Constructed Wetlands	<input type="checkbox"/>	VC	<input type="checkbox"/>	RC	<input type="checkbox"/>	WQ			
<input type="checkbox"/>	Retention Basins	<input type="checkbox"/>	VC	<input type="checkbox"/>	RC	<input type="checkbox"/>	WQ			
<input type="checkbox"/>	Detention Basins	<input type="checkbox"/>	VC	<input type="checkbox"/>	RC					
<input type="checkbox"/>	Underground Detention	<input type="checkbox"/>	VC	<input type="checkbox"/>	RC					
<input type="checkbox"/>	Dry Extended Detention Basin	<input type="checkbox"/>	VC	<input type="checkbox"/>	RC					
<input type="checkbox"/>	Sediment Fore Bay	<input type="checkbox"/>	VC			<input type="checkbox"/>	WQ			
<input type="checkbox"/>	Infiltration Trench	<input type="checkbox"/>	VC	<input type="checkbox"/>	RC	<input type="checkbox"/>	WQ			
<input type="checkbox"/>	Infiltration Berm/Retentive Grading	<input type="checkbox"/>	VC	<input type="checkbox"/>	RC	<input type="checkbox"/>	WQ			
<input type="checkbox"/>	Subsurface Infiltration Bed	<input type="checkbox"/>	VC	<input type="checkbox"/>	RC	<input type="checkbox"/>	WQ			
<input type="checkbox"/>	Infiltration Basin	<input type="checkbox"/>	VC	<input type="checkbox"/>	RC	<input type="checkbox"/>	WQ			
<input type="checkbox"/>	Pervious Pavement	<input type="checkbox"/>	VC	<input type="checkbox"/>	RC	<input type="checkbox"/>	WQ			
<input type="checkbox"/>	Dry Well/Seepage Pit	<input type="checkbox"/>	VC	<input type="checkbox"/>	RC	<input type="checkbox"/>	WQ			
<input type="checkbox"/>	Bio-Infiltration Areas	<input type="checkbox"/>	VC	<input type="checkbox"/>	RC	<input type="checkbox"/>	WQ			
<input type="checkbox"/>	Rain Gardens/Bio-Retention	<input type="checkbox"/>	VC	<input type="checkbox"/>	RC	<input type="checkbox"/>	WQ			
<input type="checkbox"/>	Vegetated Swales	<input type="checkbox"/>	VC	<input type="checkbox"/>	RC	<input type="checkbox"/>	WQ			
<input type="checkbox"/>	Constructed Filters	<input type="checkbox"/>	VC	<input type="checkbox"/>	RC	<input type="checkbox"/>	WQ			
<input type="checkbox"/>	Protect Sensitive & Special Value Features	<input type="checkbox"/>	VC	<input type="checkbox"/>	RC	<input type="checkbox"/>	WQ			
<input type="checkbox"/>	Protect/Convert/Establish Riparian Buffers	<input type="checkbox"/>	VC	<input type="checkbox"/>	RC	<input type="checkbox"/>	WQ			
<input type="checkbox"/>	Restoration: Buffers/Landscape/Floodplain	<input type="checkbox"/>	VC	<input type="checkbox"/>	RC	<input type="checkbox"/>	WQ			
<input type="checkbox"/>	Disconnection From Storm Sewers	<input type="checkbox"/>	VC	<input type="checkbox"/>	RC	<input type="checkbox"/>	WQ			
<input type="checkbox"/>	Rooftop Disconnections	<input type="checkbox"/>	VC	<input type="checkbox"/>	RC	<input type="checkbox"/>	WQ			
<input type="checkbox"/>	Vegetated Roofs	<input type="checkbox"/>	VC	<input type="checkbox"/>	RC	<input type="checkbox"/>	WQ			
<input type="checkbox"/>	Runoff Capture/Reuse	<input type="checkbox"/>	VC	<input type="checkbox"/>	RC	<input type="checkbox"/>	WQ			
<input type="checkbox"/>	Oil/Grit Separators					<input type="checkbox"/>	WQ			
<input type="checkbox"/>	Water Quality Inserts/Inlets					<input type="checkbox"/>	WQ			
<input type="checkbox"/>	Street Sweeping					<input type="checkbox"/>	WQ			
<input type="checkbox"/>	Soil Amendment/Soil Restoration	<input type="checkbox"/>	VC	<input type="checkbox"/>	RC	<input type="checkbox"/>	WQ			
<input type="checkbox"/>	Other	<input type="checkbox"/>	VC	<input type="checkbox"/>	RC	<input type="checkbox"/>	WQ			
<input type="checkbox"/>	Other	<input type="checkbox"/>	VC	<input type="checkbox"/>	RC	<input type="checkbox"/>	WQ			
<input type="checkbox"/>	Other	<input type="checkbox"/>	VC	<input type="checkbox"/>	RC	<input type="checkbox"/>	WQ			

APPENDIX B

Person(s) Responsible for Long-Term Operation and Maintenance of PCSM BMPs:

Statement: I understand and agree with the long-term operation and maintenance responsibilities outlined in the new property owner notification form or other landowner notice and as they apply to the PCSM BMP(s) on the property I am purchasing.

Name	Signature	Phone #	Address	Responsible for the Following PCSM BMPs	Location, including Latitude and Longitude, of each PCSM BMP

Attach additional Appendix B Forms as needed.

