Submission of this completed form constitutes notice that the individual in Section C will assume the responsibilities of On-Site Plan Coordinator for the project described in Section A.

### A. Project Information
1. Project Name: __________________________

2. Project Notice of Intent Number: __________________________

### B. Landowner Information
1. Name: __________________________

2. Mailing Address:
   a. Street/PO Box: __________________________
   b. City/Town: __________________________
   c. State: __________________________
   d. Zip: __________________________

### C. On-Site Plan Coordinator Information
1. Name: __________________________

2. Business Name: __________________________

3. Mailing Address:
   a. Street/PO Box: __________________________
   b. City/Town: __________________________
   c. State: __________________________
   d. Zip: __________________________

4. Contact Information:
   a. Phone: __________________________
   b. Fax: __________________________
   c. Email: __________________________

### D. On-Site Plan Coordinator Certification
I hereby certify that I am knowledgeable in the principles and practice of erosion and sediment controls and possess the skills to assess conditions at the construction site that could impact stormwater quality and to assess the effectiveness of all sediment and erosion control measures selected to control the quality of stormwater discharges from the construction activity.

Signature: __________________________
Date: __________________________

### E. Landowner Certification
I hereby designate the individual described in Section C as the On-Site Plan Coordinator for the project described in Section A. I hereby certify that the On-Site Plan Coordinator shall have the authority to stop and/or modify construction activities as necessary to comply with the EPSC Plan and the terms and conditions of the General Permit 3-9020 and shall be responsible for inspections and record keeping.

Signature: __________________________
Date: __________________________

Submit Original Form to:
Vermont Department of Environmental Conservation
Watershed Management Division, Stormwater Program
1 National Life Drive, Davis 3
Montpelier, VT 05620-3522