



Notice of Intent (NOI) - Amendment
 For Stormwater Discharges from the
State Transportation Separate Storm Sewer System (TS4)
 General Permit 3-9007

Submission of this Notice of Intent (NOI) constitutes notice that the entity in Section A intends to amend the Vermont State Transportation Separate Storm Sewer System (TS4) permit authorization. Submission of the NOI also constitutes notice that the party identified in Section A of this form has read the TS4 General Permit, understands and meets the eligibility conditions; agrees to comply with all applicable terms and conditions; and understands that continued authorization under the TS4 General Permit is contingent on maintaining eligibility for coverage.

A. Permittee Information

1a. Mailing Address:		
1b. Town:	1c. State:	1d. Zip:
2. Phone:	3. Email:	

B. Primary contact responsible for overall coordination of SWMP, if different than PEO

1. Name:		
2a. Mailing Address:		
2b. Town:	2c. State:	2d. Zip:
3. Phone:	4. Email:	
5. Additional Contact Name:		
6. Additional Contact Email:		

C. Partnering organization responsible for Minimum Control Measure (MCM) implementation (if applicable)

1. If you are participating in the Chittenden County Regional Planning Commission Memorandum of Understanding to implement MCM1 & MCM2, check here:		
<i>If you are relying on another entity to implement an MCM, please complete the following:</i>		
2. Organization:		
3. Contact Name:		
4. Minimum Control Measure being implemented:		
5a. Mailing Address		
5b. Town:	5c. State:	5d. Zip:
6. Phone:	7. Email:	
8. Organization:		
9. Contact Name:		
10a. Mailing Address:		
10b. Town:	10c. State:	10d. Zip:
11. Phone:	12. Email:	

E. Certification

This NOI shall be signed by a principal executive officer, ranking elected official or other duly authorized employee consistent with 40 CFR §122.22(b) and certified as follows:

I certify under penalty of law that this document and all attachments are prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathers and evaluated 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.

Print Name

Title

Signature

Date

**Submit this NOI and attachments
via ANR Online**