VERMONT DEPARTMENT OF ENVIRONMENTAL CONSERVATION
WATERSHED MANAGEMENT DIVISION
WASTEWATER PROGRAM

APPLICATION FOR REQUEST FOR TERMINATION OF COVERAGE
AUTHORIZED UNDER THE TERMS AND CONDITIONS OF GENERAL PERMIT 3-9004 OR 3-9016

Permit Information	
Currently Authorized by General Permit (check one):	☐ **3-9004, Discharge to Waters of the State**
	☐ **3-9016, Discharge to POTW**
Notice of Intent (NOI) Number:	
Permittee's name:	
Permittee Information	
Name and Title of authorized representative:	
Mailing address:	
Telephone:	Fax:
Facility Information	
Name:	
Address:	
Certification	

I hereby certify that all discharges from petroleum related remediation activities as described by NOI _____ have been eliminated and request that coverage be terminated.

_____ _____ _____
(print name) (signature) (date)

This request must be signed by the permittee, his/her legally authorized representative or an officer in the permittee's business. The request CANNOT be signed by the applicant's attorney, engineer, consultant, contractor, etc. unless that person has been designated in writing as the permittee's authorized representative for the purposes of carrying out the requirements of this permit.

For Departmental Use Only

VERMONT DEPARTMENT OF ENVIRONMENTAL CONSERVATION TERMINATION OF COVERAGE

Authorization to discharge from petroleum related remediation activities as provided under General Permit _____ and as described in Notice of Intent No._____ is terminated.

DEC Reviewer:	**Effective Date:**

Revised April 2016