

Transfer of Coverage

Construction Stormwater General Permit

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Permit	# VV <i>P</i>	ıκ

This form transfers permit coverage for all or a portion of a site to one or more new operators

This form allows two transfer options 1) Complete Transfer or 2) Partial Transfer. Determine which option applies to your situation before filling out the transfer of coverage form. Provide all information as required in option 1 or 2.

1. Complete Transfer: means the original permittee has sold or otherwise released control of the site to one or more owner/operators and no longer owns or controls any portion of the site.

Either the original Permittee or the new Permittee(s) must submit the following information to Ecology:

- A. A complete and accurate Transfer of Coverage Form (Attachment A) for each new operator.
- **B.** A site map showing the transferred parcels or lots in relation to the originally permitted site. Indicate who owns/operates the transferred lots.
- <u>2. Partial Transfer:</u> means the original permittee retains control over some portion of the site after selling or releasing control over a portion of the site.

Either the original Permittee or the new Permittee(s) must submit the following information to Ecology:

- A. A complete and accurate Transfer of Coverage Form (Attachment A) for each new operator.
- **B.** A site map showing the area(s) retained under permit coverage by the original Permittee, and the areas transferred to the new Permittee(s):
 - include the new total disturbed acreage retained by original permittee.
 - 2. indicate who owns/operates the transferred lots, and
 - 3. indicate which transferred parcels or lots will now be covered under the revised permit compared to the originally permitted site.

The original Permittee must submit an updated application form (NOI) and site map, which indicates the amended acreage of the site retained under the original Permittee's control (Total Size of Site; and Total Disturbed Acres).

Following the transfer, the new operator must either: 1) use the Stormwater Pollution Prevention Plan (SWPPP) developed by the original operator and modified as necessary, or 2) develop and use a new SWPPP which meets the requirements of the Construction Stormwater General Permit.

Send the completed transfer of coverage form(s) and all required documentation to:

Department of Ecology Water Quality Program Construction Stormwater Unit PO Box 47696 Olympia, WA 98504-7696

If you have any questions, please call:

- o 360-407-7451 Charles Gilman for city of Seattle or counties: Kitsap, Pierce, Thurston
- o 360-407-7229 Tammie McClure for counties: King, Island, San Juan
- o 360-407-6437 Linda Matlock for counties: Whatcom, Skagit, Snohomish, Ferry, Stevens, Pend Oreille, Lincoln, Spokane, Grant, Adams, Whitman, Franklin, Walla Walla, Columbia, Garfield, Asotin
- o 360-407-6858 Joyce Smith for counties: Okanogan, Chelan, Douglas, Kittitas, Yakima, Benton, Klickitat, Skamania, Clark, Cowlitz, Wahkiakum, Lewis, Pacific, Grays Harbor, Mason, Jefferson, Clallam

cc: Permit Fee Administrator Ecology Inspector

If you need this publication in an alternate format, please contact us at 360-407-6401. For persons with a speech or hearing impairment, call 711 for relay service or 800-833-6388 for TTY.

ATTACHMENT A: Transfer Contact Information

Both the previous Permittee and the new Permittee(s) must sign this form.

Provide the date that the new operator assumed responsibility for the site. Attach additional sheets if necessary.

Type of Transfer (check one)
☐ Partial
☐ Complete

Previous Permittee Information						
Permittee's Name)					
Company Name (Permit # WAR						
	ity: State:	Zip:				
Phone Number: Email:						
*For a partial transfer, the original Permittee must submit an updated permit application form (NOI) indicating the reduced acreage of site (Total Size of Site, and Total Disturbed Acres).						
		(5	Signature)			
New Permittee Information						
I. OPERAT	OR (NEW Permittee)		II. SITE OWNER			
Contact Name		Phone No.	Owner's Name	Phone No.		
Title			Title			
Company			Company Name			
Unified Business Identifier (UBI) 9 digit number provided by Dept of Revenue to business owners. Individuals without a UBI, enter none		Unified Business Identifier (Revenue to business owners. India	UBI) 9 digit number provided by Dept of viduals without a UBI, enter none			
Mailing Address			Mailing Address			
City	State	Zip + 4	City	State Zip + 4		
Email address		Fax No.	Email address	Fax No.		
III. ON-SITE CONTACT Person IV. BILLING ADDRESS						
	ed Erosion & Sedimen			DI N		
Contact Name		Phone No.	Contact Name	Phone No.		
Title			Title			
Company Name			Company Name			
Mailing Address			Mailing Address			
City		State Zip + 4	City	State Zip + 4		
Cell Phone (optional)	E	mail Address	Fax Number			
Date new operator assumed responsibility and liability for permit coverage: / / Month Day Year						

V. Site Location	VI. Site Information			
Site/Project Name	Total size of site: acres			
Street Address or Location Description (If the project or site lacks a street address, indicate the general location of the site (e.g. Intersection of Highways 61 and 34))	Total area of soil disturbance: acres (Enter the estimated total area to be disturbed during the life of the project, including grubbing, excavation, grading, utilities and infrastructure installation. Note: 1 acre = 43,560 ft ²			
Type of project (Road, utilities, subdivision, private home, commercial etc.)	Will the project involve poured concrete?			
* Attach a map showing location of new permittee's construction site(s).	Will the project involve engineered soils (CTB, CKD, etc)? ☐ Yes ☐ No			
City (or nearest city)	Estimated project start-up date:			
County	Estimated project completion date:			
Record the latitude and longitude of the site. * Record the latitude and longitude of main entrance to the site. For projects without a main entrance (pipelines, roads, etc), record approximate center of site. degrees, minutes, seconds Latitude N Longitude				
VII. Discharge/Receiving Water Information				
Discharge: Does your construction site's storm water	discharge to:			
A stormwater infiltration structure with discharge to groundwater? (e.g., infiltration pond, dry well, regional detention basin, etc)				
 Directly or indirectly to a surface water body/water bodies (e.g. via storm drain system, roadside ditch, pipe, etc)? Provide locations below or attach separate sheet, if necessary. 				
Does your project include dewatering?				
Some large construction projects (subdivisions, roads, pipelines, etc.) may discharge to several water bodies. If the map does not provide a name of a creek or tributary, use a format such as "unnamed tributary to Bull Run Creek. Please indicate the name of the receiving water body. (Attach a separate list for multiple water bodies.)				
Are any of the water bodies designated as water quality impaired?* (i.e. is the water body 303(d) listed or have a TMDL for turbidity, fine sediment, phosphorus or pH)?. Yes No * For information on impaired water bodies,				
http://www.ecy.wa.gov/programs/wq/stormwater/construction/const_maps.html				

Location of Discharge to Receiving Water Enter the water body name, latitude/longitude* of the point(s) where the site discharges to the receiving water body. (enter all locations) Latitude Longitude Receiving Water Body or Type of Groundwater Discharge degrees, minutes, seconds degrees, minutes, seconds " N " W " W " N " W For assistance with latitude and longitude refer to: http://cfpub1.epa.gov/npdes/stormwater/latlong.cfm (or www.topozone.com) or http://www.epa.gov/tri/report/siting_tool/index.htm VIII. Stormwater Pollution Prevention Plan (SWPPP) □ No Has a SWPPP been developed that includes a narrative and drawings? If NO, the SWPPP must be completed prior to start of construction. XI. Certification of New Permittee "I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those directly responsible for gathering the information, 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." Operator's Printed Name * Title Operator's Signature * Date Please sign and return this document to the following address: Washington Department of Ecology Water Quality Program Construction Stormwater Unit P. O. Box 47696 Olympia, WA 98504-7696 If you have any questions, please call: 360-407-7451 Charles Gilman for city of Seattle or counties: Kitsap, Pierce, Thurston 360-407-7229 Tammie McClure for counties: King, Island, San Juan 360-407-6437 Linda Matlock for counties: Whatcom, Skagit, Snohomish, Ferry, Stevens, Pend Oreille, Lincoln, Spokane, Grant, Adams, Whitman, Franklin, Walla Walla, Columbia, Garfield, Asotin 360-407-6858 Joyce Smith for counties: Okanogan, Chelan, Douglas, Kittitas, Yakima, Benton, Klickitat, Skamania, Clark, Cowlitz, Wahkiakum, Lewis, Pacific, Grays Harbor, Mason, Jefferson, Clallam

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