

DEPARTMENT OF ENVIRONMENT AND NATURAL RESOURCES

NOTICE OF INTENT (NOI) for REAUTHORIZATION of Coverage Under the SWD General Permit for Storm Water Discharges Associated With Construction Activities

The following facility currently has coverage under the General Permit for Storm Water Discharges Associated with Construction Activities. ***This form must be submitted if you wish to continue coverage under the General Permit.*** Submission of this form shall in no way relieve the permittee of permit obligations required prior to submission of this form. Please submit this form to the following address:

original to: SD Department of Environment and Natural Resources
Surface Water Quality Program
PMB 2020
523 East Capitol Avenue
Pierre, South Dakota 57501-3181
Telephone: (605) 773-3351

PLEASE PRINT OR TYPE (Update Information below as needed)

I. Permittee Information

Permittee Name: _____
Company Name: _____
Mailing Address: _____
City: _____ County: _____ State: _____ Zip Code: _____

II. Project Information

Project Name: _____
Project Description: _____
Project Start Date: _____
Estimated Completion Date: _____

III. Permit Number: _____

IV. Signature of Applicant

By signing this form, you are requesting to continue permit coverage under the reissued General Permit. You are certifying you will comply with the new General Permit and update your Storm Water Pollution Prevention Plan if necessary to meet the reissued General Permit conditions.

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 revocation of the permit and the possibility of fine and imprisonment for knowing violations. In addition, I certify that I am aware of the terms and conditions of the General Storm Water permit and I agree to comply with those requirements.

NOTE: NOI must be signed by the authorized chief elective or executive officer of the applicant, or by the applicant, if an individual.

Name (print) _____ Title _____
Signature _____ Date _____