

OPERATION - NOTICE OF TERMINATION

Central Coast Water Board
Irrigated Lands Program
Submit to: AgNOI@waterboards.ca.gov

Submission of this form constitutes an official notification to the Central Coast Water Board that the operation identified below, and all associated ranches, has elected to terminate coverage under the Agricultural Order. To officially terminate your enrollment, this form must be completed, **physically** signed by the individual Operator/Responsible Party listed on the operation eNOI and received by the Water Board. **The signature on this form must be a wet signature, electronic signatures will not be accepted.**

Request to Terminate Operation and ALL Associated Ranches

Name of Operation:	
AW#:	
Operator/Responsible Party:	
Phone Number:	
Business Mailing Address:	
City:	
State:	
Zip:	

By submitting this Operation Notice of Termination form, ALL ranches enrolled in the Agricultural Order under the above AW# will be terminated.

Reason for Operation Termination

- No longer producing a commercially irrigated crop as of (month, day, year): _____
- Change in ownership as of (month, day, year): _____
- Change in Operator as of (month, day, year): _____

Certification

I certify under penalty of law that the submitted information is to the best of my knowledge true, accurate, and complete.

Operator/Responsible Party Signature: _____

Printed Name: _____ Date: _____