

# OPERATION – NOTICE OF TERMINATION

October 2012 Version

SUBMIT TO: Central Coast Regional Water Quality Control Board  
ATTN: Agricultural Regulatory Program  
895 Aerovista Place, Suite 101  
San Luis Obispo, CA 93401

## CONDITIONAL WAIVER OF WASTE DISCHARGE REQUIREMENTS FOR DISCHARGES FROM IRRIGATED LANDS REGIONAL BOARD ORDER R3-2012-0011

Submission of this Operation – Notice of Termination form constitutes an official notification to the Central Coast Regional Water Board that the *farming operation identified below, and ALL associated farm(s)/ranch(es) have elected to terminate coverage* under Order No. R3-2012-0011, Conditional Waiver of Waste Discharge Requirements for Discharges from Irrigated Lands, (Irrigated Agricultural Order). In the event of any change in control or ownership of an operation, the Discharger must notify the succeeding owner or operator of the existence of the Agricultural Order by letter, a copy of which shall be immediately forwarded to the Regional Board Executive Officer (Order No. R3-2012-0011, p26, #61).

### REQUEST TO TERMINATE OPERATION AND ALL ASSOCIATED FARM(S)/RANCH(ES)

Name of Operation:	AW#:	
Operator/Responsible Party:	Phone No.:	
Business Mailing Address:		
City:	State:	Zip:

In the following table list all farm/ranch names, acreages, and assessor parcel numbers that are enrolled under the above AW#

	Farm/Ranch Name	Acreage	Assessor Parcel Number(s)
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

### REASON FOR OPERATION TERMINATION (Provide information as required)

No longer producing a commercially irrigated crop as of: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Day Year

Explanation: \_\_\_\_\_

Change in ownership as of: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Day Year

YOU MUST NOTIFY THE SUCCEEDING OWNER OF THE AGRICULRUAL ORDER BY LETTER AND ATTACH A COPY OF THAT LETTER TO THIS FORM. IF THIS LETTER IS NOT ATTACHED YOUR REQUEST MAY BE DENIED.

Change in operator as of: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Day Year

YOU MUST NOTIFY THE SUCCEEDING OPERATOR OF THE AGRICULRUAL ORDER BY LETTER AND ATTACH A COPY OF THAT LETTER TO THIS FORM. IF THIS LETTER IS NOT ATTACHED YOUR REQUEST MAY BE DENIED.

### CERTIFICATION

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

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Responsible Party)

Printed name: \_\_\_\_\_ Title: \_\_\_\_\_

For Regional Board Use Only:  APPROVED  DENIED  NEED ADDITIONAL INFO  OTHER \_\_\_\_\_