APPENDIX 7

CALIFORNIA REGIONAL WATER QUALITY CONTROL BOARD
LOS ANGELES REGION

NOTICE OF TERMINATION
TO COMPLY WITH THE TERMS OF REGIONAL BOARD ORDER R4-2005-XXXX
CONDITIONAL WAIVER OF WASTE DISCHARGE REQUIREMENTS FOR DISCHARGES FROM IRRIGATED LANDS

This document is only to be used for Discharger Groups or Individual Dischargers that have been issued a Notice of Applicability (NOA) by the Executive Officer. Submission of the Notice of Termination constitutes official notification to the Regional Board that the Coalition Group or Individual Discharger identified below elects not to be covered under Order No. R4-2005-XXXX, Conditional Waiver of Waste Discharge Requirements for Discharges from Irrigated Lands.

Mark only One Item:	1. ❑ If filing for a Discharger Group check box and complete 1,3,4,5,and 6 2. ❑ If filing for an Individual check box and complete 2,3,4,5,and 6.

1. Discharger Group Information*

Discharger Group			
Discharger Group Representative			
Mailing Address:			
City:	County:	Zip:	Phone:

*The Discharger Group representative's information shall be included in the above information box. A Membership Document shall be included with the NOT. This membership document shall provide information for each individual Discharger, as listed below, who's participation is being terminated. This information shall include the owner/operator, farm assessor parcel number(s), Section, Township and Range and closest downstream surface waterbody.

2. Individual Discharger Information

Discharger Name:			
Facility Name			
Physical Address:			
City:	County:	Zip:	Phone:
Mailing Address			
City	State	Zip	
Assessor's Parcel Number:	Closest Surface Water and Distance:		
Township and Range:			
Contact Person:			

3. Billing Address (if different from above)

Name:			
Street Address:			
City:	County:	Zip:	Phone:
Contact Person:			

4. Site Information**

Street Address:		
City:	County:	Total size of site (acres):
Latitude/longitude: _____Deg. _____Min. _____Sec. W. _____Deg. _____Min. _____Sec. W.		

**Attach a scale map (including property boundary and discharge area) and vicinity map (showing location in relationship to major road intersections, lot and tract boundaries, etc.

5. Facility Information

Type and Volume of Crops Produced each year:
Acreage of Irrigated Lands

6. Reason for Termination

I. Certification

"I certify under penalty of law that (1) I am not required to be covered under the Conditional Waiver of Waste Discharge Requirements for Discharge from Irrigated Lands Order No. R4-2005-XXXX and (2) this document and all attachments were prepared under my direction and supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons 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." I also understand that submittal of this Notice of Termination does not release a facility from liability for any violations of the Conditional Waiver.

Printed Name:_____ Title:_____

Signature:_____ Date:_____