## CALIFORNIA REGIONAL WATER QUALITY CONTROL BOARD, SAN DIEGO REGION

#### ORDER NO. R9-2014-0041 (ATTACHMENT E)

### Waiver: 12 **NOTICE OF TERMINATION**

I. PROPERTY/FA	CILITY INFORMAT	ION		
Property/Facility Nam	e:			
Property/Facility Cont	act:			
Property/Facility Addr	ess:			
City:	County:		State:	Zip:
Telephone:	Fax:		Email:	
Assessor Parcel Number(s): Hydro			gic Area/Subarea:	
II. PROPERTY/FA	CILITY OWNER IN	FORMATION		
Property/Facility Own				
Property/Facility Own	er Mailing Address:			
City: County:			State:	Zip:
Telephone:	elephone: Fax:		Email:	_
III. DISCHARGE A	ND DREDGE INFO	DMATION		
Date(s) of Discharge				
Did any activities occu				
Did any activities crea		?		
(If "yes," describe how	•		n were minimized)	
(ii you, accombe not	r davoros emocio to	aqaano oyoto.		
Quantity of Discharge				
Quantity of Discharge			al iala artifo da a affa ar	
(Indicate in acres and and/or temporary for o		nt affected, an	a identity the effect	s as permanent
and/or temporary for t	Permanent Effects		Temporary Effects	
Wetlands:	Linear feet:	Acres:	Linear feet:	
Non-wetland waters:	Linear feet:	Acres:	Linear feet:	Acres:
		Acres.	Linear leet.	Acres.
Quantity of Dredging	` '	المحام والمحامل		
Provide a description	of the types of mate	riais areagea	and disposal location	on:
l e e e e e e e e e e e e e e e e e e e				

# **COMPENSATORY MITIGATION INFORMATION** Were Temporary Fills Restored? If "no," please describe rationale: Was Compensatory Mitigation Provided? If "no," please describe rationale: If "yes," attach (1) a map clearly identifying the mitigation location areas, and (2) contact information for the owner/operator of the mitigation area property. Also indicate below in acres and linear feet the total quantity of each water body that was created, restored, or enhance, for purposes of providing compensatory mitigation. Use additional pages if necessary. Created Restored Enhanced (acres/linear feet) (acres/linear feet) (acres/linear feet) Wetland Non-Wetland **COMPENSATORY MITIGATION INFORMATION** ٧. "I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment."

Date

Title

Signature (Owner or Authorized Representative)

**Print Name**