

NC DEPARTMENT OF ENVIRONMENTAL QUALITY DIVISION OF Energy, Mineral, and Land Resources

STORMWATER PROGRAM

NPDES STORMWATER PERMIT NAME/OWNERSHIP CHANGE FORM

Pe	rmit Number: NCS ////	or NCG ////
1.	Facility Name:	
<u>NE</u>	W OWNER/NAME INFORMATION:	
2.	This request for a name change is a result of:	
	a. Change in ownership of property/company	
	b. Name change only (Facility and/or Compan above.	y). New facility name should be liste
	c. Other (please explain):	
	(for example, facility address update)	
	(for example, facility address update) New owner's name (name to be put on permit as	
	(for example, facility address update)	
3.	(for example, facility address update) New owner's name (name to be put on permit as	s Permittee):
3.	(for example, facility address update)	s Permittee):
3.	(for example, facility address update) New owner's name (name to be put on permit as	s Permittee): (Person legally responsible for pe
3.	(for example, facility address update) New owner's name (name to be put on permit as	s Permittee):
3. 4.	(for example, facility address update) New owner's name (name to be put on permit as	(Person legally responsible for pe
3. 4.	(for example, facility address update) New owner's name (name to be put on permit as New owner's or signing official's name and title:	(Person legally responsible for po
4.	(for example, facility address update) New owner's name (name to be put on permit as New owner's or signing official's name and title:	(Person legally responsible for person legally responsible for personal (Title) City: Phone: ()
3. — 4.	(for example, facility address update) New owner's name (name to be put on permit as New owner's or signing official's name and title: Mailing address: State: Zip Code:	(Person legally responsible for person legally responsible for personal (Title) City: Phone: ()

III. PERMIT AND FACILITY CONTACT INFORMATION

IV.

7.	New permit contact's name and title:	(Permit Contact)		
		(Title)		
8.	Mailing address:	City:		
	State: Zip Code:	Phone: ()		
	E-mail address:			
9.	New facility contact's name and title:	(Facility Contact)		
		(Title)		
10.	Mailing address:	City:		
	State: Zip Code:	Phone: ()		
	E-mail address:			
11.	New billing contact's name:			
		(Billing Contact)		
12.	Mailing address:	City:		
	State: Zip Code:	Phone: ()		
	E-mail address:			
FAG	CILITY ACTIVITIES AND DISCHARGE I	NFORMATION		
1.	Will industrial activities at the facility remain the same as under the previous owner? Yes $\Box\:$ No $\Box\:$			
2.	Will the stormwater discharge location	n(s) remain the same? Yes □ No □		
the	request. Please attach documentation	ered "No," then more information is needed to review to describe and explain the changes to the facility outfall location. Depending on the information		

provided, the Division may require that the new owner file a new permit application.

THIS APPLICATION PACKAGE WILL NOT BE ACCEPTED BY THE DIVISION UNLESS ALL OF THE ITEMS LISTED BELOW ARE INCLUDED.

REQUIRED ITEMS:

- 1. This **completed application** form (with original signature)
- 2. **Legal documentation** of transfer of ownership (such as relevant pages of a deed or a bill of sale) is required for an ownership change request. Articles of incorporation are not sufficient for an *ownership change* but can be provided for a name change.
- 3. Information to document facility, industrial activities, stormwater discharges, or outfall changes as noted in item IV above (if appropriate)

Why is this information needed?

Regulations in 40 CFR §122.63 allow for minor modifications to NPDES permits for a change of ownership or operational control of a facility, provided that information supports that no other change in the permit are necessary.

Why does this form need to be mailed in?

Permittees and applicants must fulfill signatory requirements in the NPDES federal regulations in 40 CFR §122.22 (please see those regulations for guidance). Until NCDEQ's electronic submission process meets Cross-Media Electronic Reporting (CROMERR) requirements, this **original signed** (not digital signature) form must be mailed to the address below. The uploaded copy is stored as part of the permit record in the Division's digital repository.

Via USPS: Via Courrier (UPS, FedEx, etc.):

DEMLR Stormwater Program

1612 Mail Service Center - OR - 512 North Salisbury Street

Raleigh, NC 27699-1612 Raleigh, NC 27604