Notice of Termination Form

General Permit for the Discharge of Groundwater Remediation Wastewater

Please complete and submit this form to the address specified below within 14 days of termination of discharge in order to ensure the proper handling of your termination. Print or type unless otherwise noted.

Part I: Registrant Information

1. Permit number: CTR
2. Fill in the name of the registrant(s) as indicated on the registration certificate:
   Registrant:
3. Site Address:
   City/Town: State: Zip Code:
4. Date of termination of discharge:
5. Reason for termination:

Part II: Certification

“I have personally examined and am familiar with the information submitted in this document and all attachments thereto, and I certify that, based on reasonable investigation, including my inquiry of those individuals responsible for obtaining the information, the submitted information is true, accurate and complete to the best of my knowledge and belief. I understand that a false statement made in this document or its attachments may be punishable as a criminal offense, in accordance with section 22a-6 of the General Statutes, pursuant to section 53a-157b of the General Statutes, and in accordance with any other applicable statute.”

Signature of Permittee
Date

Name of Permittee (print or type) Title (if applicable)

Note: Please submit this Notice of Termination Form to:
DISCHARGE MONITORING UNIT
WATER PERMITTING AND ENFORCEMENT DIVISION
DEPARTMENT OF ENERGY AND ENVIRONMENTAL PROTECTION
79 ELM STREET
HARTFORD, CT 06106-5127

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