



## Instructions for Completing the Co-Permittee Notice of Intent (NOI) for NPDES Construction Storm Water General Permit Coverage

### Who must file a Co-Permittee NOI form?

The Co-Permittee Notice of Intent (NOI) application form is used by other operators identified by the initial permittee to request shared coverage under the NPDES construction storm water general permit (CGP). As defined in Part VII.O of the CGP, an "operator" is any party that has operational control over construction plans and specifications or has day-to-day operational control of those activities at a project which are necessary to ensure compliance with the storm water pollution prevention plan (SWP3) for the site covered by the CGP. The applicant must certify their intention to comply with the CGP when submitting the completed Co-Permittee NOI. There is no fee for this application form. The application must be submitted to the following address:

Ohio Environmental Protection Agency  
Division of Surface Water  
General Permit Program  
P.O. Box 1049  
Columbus, OH 43216-1049

### Completing the Form

All responses must be typewritten or printed legibly in the appropriate areas only. Please place each character slightly above the appropriate line on the Co-Permittee NOI application form. If necessary, abbreviate to stay within the space allowed for each item. Use only one space for breaks between words. If the requested information does not apply to your facility, leave it blank. Do not include any symbols or punctuation marks unless otherwise noted in these instructions.

### Section I - Applicant Information/Mailing Address

**Company Name:** Fill in the legal name of the firm, person, public organization, or other entity (other than the original NOI applicant) that operates the facility or site described in this application. The name of the operator may or may not be the same as the facility. The company name is the name of the responsible party that is the legal entity that controls the facility's operation rather than the plant or site manager. Do not use a colloquial name.

**Mailing Address:** Enter the complete mailing address; including street address, city, state, and zip code. The permit and any correspondence will be mailed to this address.

**Contact Person:** Give the name of a contact person who is responsible for addressing NPDES requirements.

**Phone and Fax:** Provide the contact person's phone and fax numbers as: area code exchange numbers.

**E-Mail Address:** Enter the contact person's e-mail address, if available.

### Section II - Facility/Site Location Information

**Existing Ohio EPA Facility General Permit Number:** Enter the facility permit number provided to the initial applicant (permittee) for the facility where you act as an operator. The

facility general permit number is stated on the permit coverage approval letter sent to the initial applicant and was signed by the director of Ohio EPA.

**Initial Permittee Name:** Enter the name of the initial applicant (permittee) whom already obtained coverage for the facility under general permit OHC000002 or OHR100000.

**Facility/Site Name:** Enter the facility or site's official or legal name. The facility/site is the location of the operation and discharge to be covered by the general permit. Do not use a colloquial name.

**City/Township/County/Zip Code:** Enter the city or township, county, and zip code of where the site is located.

**Facility Contact Person:** Give the name of the person who is responsible for the facility/site.

**Phone and Fax:** Provide facility contact person's phone and fax numbers as: area code exchange numbers.

**Facility Contact E-mail Address:** Provide the facility contact person's e-mail address, if available.

### Section III - Certification

Type or print the name and title of the person who will sign the form. Next, sign and date the form. Federal and State statutes provide for severe penalties for submitting false information on this application form. Federal regulations require this application to be signed as follows:

For a corporation: by a responsible corporate officer, which means: (1) a president, secretary, treasurer, or vice-president of the corporation in charge of a principal business function, or any other person who performs similar policy or decision making functions for the corporation; or (2) the manager of one or more manufacturing, production, or operating facilities, provided, the manager is authorized to make management decisions which govern the operation of the regulated facility including having the explicit or implicit duty of making major capital investment recommendations and initiating and directing other comprehensive measures to assure long term environmental compliance with environmental laws and regulations; the manager can ensure that the necessary systems are established or actions taken to gather complete and accurate information for permit application requirements; and where authority to sign documents has been assigned or delegated to the manager in accordance with corporate procedures.

For a partnership or sole proprietorship: by a general partner or the proprietor; respectively, or

For a municipality, state, or other public facility: by either a principal executive officer, the ranking elected official, or other duly authorized employee.



## Co-Permittee Notice of Intent for Coverage Under Ohio EPA Storm Water Construction General Permit

Submission of this NOI constitutes notice that the party identified in Section I of this form intends to be authorized by Ohio's NPDES general permit for storm water associated with construction activity. Becoming a permittee obligates a discharger to comply with the terms and conditions of the permit. **NOTE: All necessary information must be provided on this form. Read the accompanying instructions *carefully* before completing the form. Do not use correction fluid on this form. Forms transmitted by fax will not be accepted. There is no fee associated with submitting this form.**

### I. Applicant Information/Mailing Address

Company (Applicant) Name: \_\_\_\_\_

Mailing (Applicant) Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Contact E-Mail Address: \_\_\_\_\_

### II. Facility/Site Location Information

Existing Ohio EPA Facility Permit Number:   \_\_ GC \_\_ \_ \_ \_ \_ \* \_\_ G           OR   OHR1   \_ \_ \_ \_ \_

Initial Permittee Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Facility/Site Name: \_\_\_\_\_

City: \_\_\_\_\_ Township(s): \_\_\_\_\_

County(ies): \_\_\_\_\_ State:       Ohio       Zip Code: \_\_\_\_\_

Facility Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Facility Contact E-Mail Address: \_\_\_\_\_

### III. Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate 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 for knowing violations.

Applicant Name: \_\_\_\_\_ Title: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_