



Permit

For Official Use Only

--	--	--	--	--	--	--	--	--	--

State of Georgia - Department of Natural Resources

Notice of Termination for the Land Application System (LAS) Permit as required under Chapter 391-3-6-.21(4) amended.

ANIMAL FEEDING OPERATIONS

Check one:

General NPDES Permit No. GAG930000

General LAS Permit No. GAU700000

SECTION I. FACILITY LOCATION INFORMATION		
Facility Name:		
Facility Phone No:	E-mail Address:	
Facility Mailing Address:		
City:	State:	Zip Code:
County:		
SECTION II. FACILITY OWNER – OPERATOR INFORMATION (AS IT APPEARS ON THE NOTICE OF INTENT)		
Owner-Operator's Legal Name:		
Owner Phone No:	E-mail Address:	
Owner Address:		
City:	State:	Zip Code:
County:		
SECTION III. SITE ACTIVITY INFORMATION		
1. Is this operation closing? <input type="checkbox"/> Yes <input type="checkbox"/> No <u>If no</u> , how many animals will be kept on the operation?		
2. Please list the maximum number and type of animals that will be confined or fed for a total of 45 days in any 12 month period:		
Number:	Type:	
Number:	Type:	
Number:	Type:	
3. Describe the animal feeding/growing operation in the space below.		
4. Describe the reason(s) for submitting the Notice of Termination in the space below.		
SECTION IV. CERTIFICATION		
I certify under penalty of law that all animal feeding operations associated with the identified facility that are authorized by the General NPDES Permit No. GAG9300000 or the General LAS Permit No. GAU700000 have been eliminated, the identified facility has been properly closed in accordance with the approved nutrient management plan, or the owner-operator of the identified facility has changed and that owner-operator is authorized under General NPDES Permit No. GAG9300000 or the General LAS Permit No. GAU700000. I understand that by submitting this Notice of Termination, that I am no longer authorized to operate an animal feeding operation of the size and type associated with the corresponding general permit, and that such operation is unlawful under the Georgia Water Quality Control Act and the Federal Clean Water Act where the operation is not authorized by the appropriate NPDES or LAS permit.		
Printed Name:	Title:	
Signature:	Date:	

Mail or fax this completed form to:

Georgia Department of Agriculture, NPDES/LAS Permitting, P.O. Box 7847, Gainesville, Georgia 30504
Phone (770) 535-5955, Fax (770) 531-6483