



**Notice of Termination (NOT) of Coverage Under
The Generic Permit
for Pollutant Discharges to Surface Waters of the State
From the Application of Pesticides
(Rule 62-621.300(8), F.A.C.)**

Keep a copy as a record of permit termination. Submit this form to:
Florida Department of Environmental Protection
Bob Martinez Center
Industrial Wastewater Section
2600 Blair Stone Road, Mail Station 3545
Tallahassee, Florida 32399-2400

A. NPDES Generic Permit Identification Number: _____

B. Permittee Information:

Name: _____

Entity: _____

Mailing Address: _____

City County Zip

Contact Person: _____ Title _____

Telephone: _____ E-mail _____

C. Basis for Termination (check one only)

1. A new permittee has taken over responsibility for the pest treatment.
2. You have ceased the pesticide application for which you obtained permit coverage or there is not or no longer will be a pesticide discharge.
3. Permit coverage has been obtained under an individual permit for all pesticide discharges requiring NPDES permit coverage or an alternative permit.

D. Certification:

I certify under penalty of law that I have met at least one of the reasons for terminating permit coverage listed in Section C above. I understand that by submitting this Notice of Termination, I am no longer authorized to discharge pesticides to surface waters of the State. This document and all attachments were prepared under my direction and supervision. 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 or imprisonment for knowing violations. Additionally, I understand that the submittal of this Notice of Termination is not a release from liability for any violations of the Clean Water Act.

Printed Name

Signature

Title

Date signed