

**Division of Surface Water
Permits & Compliance Section
Indirect Discharge Permit
Permit Transfer Application Form**

A. Existing Permit Holder Information (Transferor)

1. Facility Number: _____ * _____
2. Corporate (Parent Company) Name: _____
3. Divisional Name: _____
4. Facility Name: _____
5. Mailing Address After Transfer: _____

B. Proposed Permit Holder Information (Transferee)

1. Corporate (Parent Company) Name: _____
2. Divisional Name: _____
3. Facility Name: _____
4. Mailing Address for all permit-related correspondence:

5. Facility Mailing Address (if different):

6. Individual authorized to sign applications and Transfer Agreement pursuant to OAC 3745-36-03 (D)(4) [principal executive office, vce president or higher for a corporation; a general partner of a partnership; the proprietor of a proprietorship; principal executive office; ranking elected official; authorized member or manager of a limited liability company; or duly-authorized employee of a public entity]:

7. Authorization: Pursuant to OAC 3745-3-06 (F), the individual or position,

identified in this space is duly authorized by the individual in Item 6 to sign all reports required by permit and other information which may be required by the Director:

Name/Title/Position

8. Operator of Facility:

Name: _____

Address: _____

9. Contact person for facility information or inspections:

Name: _____

Phone: _____

10. Describe any material modifications to production or facilities, subsequent to the transfer, which may alter the volume or characteristics of this discharge:

11. Agreement to Transfer Permit

_____ as the holder of an indirect Discharge
(Transferer)

Permit which stipulates responsibilities, coverage and liability for operations involving discharges of wastewater from the facility located at _____
(Facility)

_____ ; hereby applies for approval of the Director to transfer the permit
(Location)

Responsibility, coverage and liability to _____ . (Transferer)
(Transferee)

_____ agrees to continue to assume the responsibility for compliance with all terms, limitations and conditions, and any coverage or liability thereunder

for the period ending on _____, _____, _____ (New Permittee)

_____ as the proposed new permittee, hereby agrees to assume the responsibility for compliance with the entirety of the coverage, responsibility and liability of the permit commencing at _____, _____.

In witness whereof, the parties have executed this Agreement on _____, it is so agreed.
(Date)

Permittee: _____ Transferee: _____

By: _____ By: _____

Title: _____ Title: _____

By signing this form, I, (transferee), certify and acknowledge that I have read and fully understand the terms and conditions of Indirect Discharge Permit No. _____.

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.

Transferee

Title

Date