**ATTACHMENT 2 TO WQ ORDER NO. 2004-0004-DWQ**

**STATE WATER RESOURCES CONTROL BOARD NOTICE OF TERMINATION**

**OF DREDGED OR FILL DISCHARGES**

**TO WATERS DEEMED BY THE U.S. ARMY CORPS OF ENGINEERS TO BE OUTSIDE OF FEDERAL JURISDICTION**

**(WATER QUALITY ORDER NO. 2004-0004 DWQ)**

WDID #

III. **Owner of the Land**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name | | | | |
| Mailing Address | | | | |
| City | County | State | Zip | Phone |
| Contact Person | |  | | |

III. **Discharger (if different from owner of the land)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name | | | | |
| Mailing Address | | | | |
| City | County | State | Zip | Phone |
| Contact Person | | | | |

1. **Site Location**

|  |
| --- |
| Street (including address, if any) |
| Nearest Cross Street(s) |
| County: |

1. **Reason For Notice of Termination**

Indicate why the discharge should no longer be regulated under WQ Order No. 2004-0004-DWQ.

**STATE USE ONLY**

|  |  |  |  |
| --- | --- | --- | --- |
| WDID: | Regional Board Office: | Date NOT Received: | Date NOT Processed: |

1. **CERTIFICATION**

|  |  |
| --- | --- |
| “I certify under penalty of law that this document and all attachments were prepared under my direction and 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.” | |
| Signature of Discharger | Title |
| Printed or Typed Name | Date |

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