

ATTACHMENT B

CALIFORNIA REGIONAL WATER QUALITY CONTROL BOARD
LOS ANGELES REGION

NOTICE OF INTENT
TO COMPLY WITH THE TERMS OF REGIONAL BOARD ORDER R4-2004-0146
GENERAL WASTE DISCHARGE REQUIREMENTS
FOR
RESIDENTIAL ONSITE WASTEWATER TREATMENT SYSTEMS

Mark only One Item:	1. <input type="checkbox"/> New Discharge 2. <input type="checkbox"/> Existing Discharge
---------------------	---

I. Property Owner

Name:			
Street Address:			
City:	County:	Zip:	Phone:
Contact Person:			

II. Responsible Management Entity (if different from above)

Name:			
Street Address:			
City:	County:	Zip:	Phone:
Contact Person:			

III. Billing Address (if different from above)

Name:			
Street Address:			
City:	County:	Zip:	Phone:
Contact Person:			

IV. Site Information

Street Address:		
City:	County:	Total size of site (acres):
Latitude/Longitude:		
_____ Deg. _____ Min. _____ Sec. W. _____ Deg. _____ Min. _____ Sec. W.		
Depth to groundwater (feet) - may use estimate based on regional groundwater data:		

Notice of Intent For
Order No. R4-2004-0146

Identify all water supply wells within 900 feet of the of the nearest point of any part of the onsite wastewater treatment system or edge of property:

Identify all waterbodies within 600 feet of the of the nearest point of any part of the onsite wastewater treatment system or edge of property:

Attach a scale map (including property boundary and discharge area) and vicinity map (showing location in relationship to major road intersections, lot and tract boundaries, etc.).

Attach copy of geologic assessment, including lithology, depth to bedrock, type of bedrock and results of percolation tests.

V. Water Supply

Water supply source (municipal or other):

Average quantity (average daily amount used):

VI. Waste Discharge and Disposal Information

Estimated volume or flow of discharge (gallons or gallons per day):

Average daily:

Maximum daily:

If intermittent flow, provide frequency:

Method of disposal (seepage pit, leachfield, etc.):

Design capacity volume or flow (gallons or gallons per day):

Attach copy of Local Agency permit (including design of disposal system and results of percolation tests)

VII. Treatment Information

1. Describe treatment processes and capacity, including flow diagrams for the treatment system.
2. Provide details on engineering plans and any calculations used for treatment.
3. For experimental projects:
 - a. Describe results of any tests of the experimental process.
 - b. Identify any similar projects currently in use and provide operating data.
 - c. Provide an evaluation of any similar projects by the responsible regulatory agency.

VIII. Other Approvals

List all other public agency approvals and permits related to the onsite wastewater treatment system.

IX. Filing Fee

Provide first annual fee as described in part B.1.c. of Regional Board Order No. R4-2004-0146.

X. 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 gathered and evaluated 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." In addition, I certify that the provisions of the General Order and the Monitoring Program, will be complied with.

Printed Name: _____ Title: _____

Signature: _____ Date: _____