



Los Angeles Regional Water Quality Control Board

BOARD ORDER TRANSFER REQUEST FORM

Board Order No.	CI No	
Facility Address		
I requested the transfer of the existing waste discharge date), contained in the above-referenced Board Order		_ (effective
TRANSFER FROM:	TRANSFER TO:	
Former Facility Name	New Facility Name	
Former Property Owner	New Property Owner	
Former Operator	New Operator	
I understand that I am responsible for compliance with the waste discharge from this facility. I certify that:	the Board Order and will be billed an ann	ual fee for
I have reviewed the Report of Waste Discharge ar	nd the Board Order;	
2. The facility construction and discharges from the s		
3. I will notify the Board of any material change in thi of waste discharge or any future change in the fac	s facility, any change in the amount, type	of manner
Signature (New Owner/Authorized Representative)	Company Name, if appropriate	
Print Name (New Owner/Authorized Representative)	Telephone No.	Date
Title	Email	
Mailing Address		
Facility Contact Peron	Telephone No. Email	
Facility Contact Mailing Address		
James Stahl, acting chair R	ENEE PURDY, EXECUTIVE OFFICER	