



North Coast Regional Water Quality Control Board

REQUEST FOR TERMINATION

ORDER NO. R1-2015-0023
WAIVER OF WASTE DISCHARGE REQUIREMENTS FOR DISCHARGES OF WASTE
RESULTING FROM CANNABIS CULTIVATION AND ASSOCIATED ACTIVITIES

Submittal of this Request for Termination to the North Coast Regional Water Quality Control Board (Regional Water Board) constitutes notice that a Discharger, identified in Section I of this form, requests termination of coverage under the Waiver of Waste Discharge Requirements for Discharges of Waste Resulting from Cannabis Cultivation and Associated Activities or Operations with Similar Environmental Effects, Order No. R1-2015-0023 (Order).1 Completed forms must be signed and post mailed or emailed to the Regional Water Board, Attention: Cannabis Regulatory Program, R1-2015-0023 Request for Termination at one of the following addresses:

5550 Skylane Blvd., Suite A
Santa Rosa, CA 95403

OR

northcoast.cannabis@waterboards.ca.gov

Submittal of this form does not relieve the Discharger and/or property owner of responsibility to control waste discharges related to cannabis cultivation, associated activities, or operations with similar environmental effects at the enrolled site, nor does it relieve the Discharger of the obligation to pay any outstanding invoices associated with past coverage under the Order. Submittal of this form does not guarantee that termination of coverage under the Order will be immediately approved by the Regional Water Board. The Regional Water Board may inspect the condition of the site or require that further information be submitted to determine compliance with standard conditions and required plans prior to approving termination of coverage.

SECTION I. DISCHARGER INFORMATION

Form with fields for (A) Role (check all applicable) with checkboxes for Cultivator and Land/Property Owner, (B) Do You Have Access to The Property? with checkboxes for Yes and No, (C) Name, Address Where Legal Notice May Be Served, and City, State, Zip Code.

(D) Contact Person (Leave blank if same as Name above)	
E-Mail	Phone

SECTION II. CANNABIS CULTIVATION SITE INFORMATION

(A) Assessor Parcel Number(s)	WDID ²	
Address	County	
City	State	Zip Code
Latitude/Longitude (If address is not available)		
(B) Cultivation Site Enrollment Classification <input type="checkbox"/> Tier 1 <input type="checkbox"/> Tier 2 <input type="checkbox"/> Tier 2* <input type="checkbox"/> Tier 3		
(C) Contact Person (Leave blank if same as in Section I)		
E-Mail (Leave blank if same as in Section I)	Phone (Leave blank if same as in Section I)	

SECTION III. STANDARD CONDITIONS

The standard conditions listed in the table below are defined in the Order, which is available online at: https://www.waterboards.ca.gov/northcoast/board_decisions/adopted_orders/pdf/2015/15_0023_Cannabis_Order.pdf

Indicate whether standard conditions are met at the enrolled site, and submit with this form any available photos, reports, plans, third party certifications, and/or other documentation that supports the responses provided in the table below.

(1) Site maintenance, erosion control and drainage features	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(2) Stream Crossing Maintenance	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(3) Riparian and Wetland Protection and Management	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(4) Spoils Management	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(5) Water Storage and Use	<input type="checkbox"/> Yes	<input type="checkbox"/> No

(6) Irrigation Runoff	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(7) Fertilizers and Soil Amendments	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(8) Pesticides/Herbicides	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(9) Petroleum products and other chemicals	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(10) Cultivation-related wastes	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(11) Refuse and human waste	<input type="checkbox"/> Yes	<input type="checkbox"/> No

SECTION IV. WATER RESOURCE PROTECTION PLAN (TIER 2 SITES)

Dischargers who applied for coverage (or who were otherwise eventually enrolled) under Tier 2 of the Order were required to develop and begin implementing a Water Resource Protection Plan (WRPP) within 180 days of submitting their complete Notice of Intent (NOI) to the Regional Water Board.

Did you prepare a Water Resource Protection Plan (WRPP)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, please submit a copy of your WRPP with this form.		

SECTION V. CERTIFICATION

<p>I certify that: (1) I am a Discharger listed under Section I <u>or</u> a duly authorized representative of the Discharger listed in Section I of this form, (2) cannabis cultivation and associated activities at the site listed under Section II of this form are ceased, (3) the cultivation site is stabilized and all waste materials have been removed and disposed of properly, and (4) I am aware that unauthorized waste discharges from the cultivation site that violate or have the potential to violate the Order or any applicable water quality standard are unlawful.</p> <p>I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.</p>
Printed Name of Discharger/Duly Authorized Representative
Signature
Date

NOTES:

1. Submittal of this form will not affect the status of active or pending Water Quality Certifications (for construction and other work within jurisdictional waters of the State or the United States) issued by the Regional Water Board pursuant to the Order.
2. A Waste Discharge Identification (WDID) number is a unique number assigned to each Discharger enrolled under the Order. The WDID number can be obtained from the Notice of Applicability (NOA) issued by the Regional Water Board upon the Discharger's enrollment, or from an annual invoice issued by the State Water Board. If you do not know your WDID number, please contact Regional Water Board staff at: (707) 576-2676 or northcoast.cannabis@waterboards.ca.gov prior to submitting this form.