ATTACHMENT C

NOTICE OF INTENT

TO COMPLY WITH THE TERMS OF ORDER NO. R2-2017-00XX

CONDITIONAL WAIVER OF WASTE DISCHARGE REQUIREMENTS FOR GRAZING OPERATIONS IN THE NAPA RIVER AND SONOMA CREEK WATERSHEDS

FORM MUST BE SUBMITTED TO WATER BOARD BY MARCH 15, 2018

SECTION I. WAIVER OF WASTE DISCHARGE REQUIREMENTS

Instructions: This Notice of Intent (NOI) applies to existing grazed properties that meet enrollment criteria operating on or before November 8, 2017.

Grazing Operations currently enrolled under Resolution R2-2011-0060 (2011 Waiver) will not be required to submit a new NOI under this Order if there have been no changes in the Grazing Operations, the Grazing Lands identified in the NOI, or ownership or operation of the Grazing Lands or Grazing Operations.

Dischargers (landowners and operators) conducting eligible Grazing Operations and *not* currently enrolled under the 2011 Waiver are required to complete this form and submit it to the Water Board on or before **March 15, 2018**.

Mail completed NOI to: San Francisco Regional Water Quality Control Board; 1515 Clay Street, Suite 1400; Oakland, CA 94612, Attn: Grazing Waiver Program. Or email to: R2GrazingWaiver@waterboards.ca.gov

Contact E-mail:

SECTION II. RANCH OPERATOR INFORMATION

Name:

Mailing Address:	
1_1111111111111111111111111111111111111	
City: State:	Zip Code:
<u> </u>	1 1 1 1 11 1 1 1 1
Name of Contact Person:	Contact Phone:
<u> </u>	<u> </u>
SECTION III. RANCH LANDOWNER INFORMATION (IF OPERATOR IS NOT THE OWNER)	
SECTION III. RANCH LANDOWNER INFORMATION (IF OPERATOR IS NOT THE OWNER)	Contact E mail:
Name:	Contact E-mail:
Name:	Contact E-mail:
	Contact E-mail:
Name:	Contact E-mail:
Name:	Contact E-mail: Zip Code:
Name:	
Name:	Zip Code:
Name:	Zip Code:

SECTION IV. RANCH INFORM	MATION * Please fill out an additional sheet if Ranch Lai	nds are no	ot contiguous	
A. Facility Name:		County:		
1 1 1 1 1 1 1 1 1 1	<u> </u>			
Mailing Address:			Contact E-mail:	
1 1 1 1 1 1 1 1 1 1		<u> </u>		
City:		State:	Zip Code:	
1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1	<u>C A</u>	<u>IA</u>	
Name of Contact Person:			Contact Phone:	
1 1 1 1 1 1 1 1 1 1		<u> </u>		
Facility Assessor's Parcel Number				
1 1 1 1 1 1 1 1 1 1 1	<u> </u>			
Provide Latitude and Longitude	Degree/minutes/seconds	Decima	l Form	
only if facility does not have a	only if facility does not have a Latitude: ° ' "			
valid street address Longitude: ° "				
B. Total Size of Herd:	C. Operation Type: (check one)	D. Sta	rt & End Date of Current Operations:	
I <u>IIIII</u> I animals	1. [] Cattle 2. [] Goat		<u></u>	
	3. [] Sheep 4. [] Other (list)			
SECTION V. ADDRESS FOR	CORRESPONDENCE			
Send Correspondence to	[] Ranch Operator Mailing Address (Section I) [] Landowner Mailing Address (Section II)			
SECTION VI. RECEIVING WA	TER INFORMATION			
Does your facility's clean storm water	flow directly and/or eventually into waters of the State such as a	stream, riv	er, lake, irrigation flows, ocean, etc?	
[] Yes [] No				
If yes, name the receiving waterbody:		<u> </u>	<u> </u>	
SECTION VII. IMPLEMENTAT	ION OF CONDITIONS OF WAIVER OF WDRs			
A. CONDITIONS OF WAIVER FO	OR DISCHARGES FROM GRAZING OPERATIONS (che	eck if true)	
[] Facility is currently operating in	n compliance with Waiver Standards			
B. RANCH WATER QUALITY PL	AN (check if true)			
[] A Ranch Water Quality Plan, i maintained on site.	ncluding a Plan for Compliance Reporting and a Schedule	e for Imple	ementation has been prepared and is	
[] A Ranch Water Quality Plan, i maintained on site by November	ncluding a Plan for Compliance Reporting and a Schedule 15, 2018.	e for Imple	ementation will be prepared and	

SECTION VIII. LANDOWNER CERTIFICATION

If the Ranch Operator is not the ranch landowner, the Landowner must certify that he/she has been notified of this waiver and its requirements.
Landowner or Authorized Representative* Printed Name:
Landowner or Authorized Representative Signature:
Title: Date:
* A duly authorized person designated by the Landowner as having legal responsibility for the overall operation of the regulated facility. The authorized representative may be the grazing operator or operator's duly authorized designee.
SECTION IX. 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. In addition, I certify that the provisions of the Order will be complied with."
Landowner or Authorized Representative Printed Name*:
Landowner or Authorized Representative Signature:
Date:
Telephone Number:

* A duly authorized person designated by the owner of the confined animal facility, as having responsibility for the overall operation of the regulated facility. The authorized representative may be the operator or operator's duly authorized designee.

Mail signed form to:

Email:

San Francisco Bay Regional Water Board 1515 Clay Street, Suite 1400

Oakland, CA 94612

ATTN: Grazing Waiver Program

Or email to: R2GrazingWaiver@waterboards.ca.gov