



San Francisco Bay Regional Water Quality Control Board

ATTACHMENT D

NOTICE OF NON-APPLICABILITY

Of Coverage Under Regional Water Board Resolution No. R2-2018-0046
Conditional Waiver of Waste Discharge Requirements for
Grazing Operations in the Tomales Bay Watershed
(Conditional Waiver)

Submission of this Notice of Non-Applicability constitutes notice by the landowner/operator of the ranch facility identified on this form that the facility should not be required to comply with Water Board Resolution No. R2-2018-0046 at this time. Only landowners/operators that are not filing a Notice of Intent (NOI) for coverage under the Conditional Waiver should file this form. If you are unsure whether your facility is required to comply with the Conditional Waiver, please contact the Water Board at (510) 622-2410 or via email at R2GrazingWaiver@waterboards.ca.gov.

Note: If the information provided in this form is inaccurate or incomplete, or if the activity at the ranch facility is changed, this Notice may no longer apply. Further, the information provided shall in no way release the landowner or operator of the ranch facility from any liability which may result from noncompliance with the requirements of the Conditional Waiver, should they apply. The ongoing accuracy of the information provided may be subject to verification by inspection by Water Board staff.

I. LANDOWNER INFORMATION

NAME: \_\_\_\_\_
MAILING ADDRESS: \_\_\_\_\_
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ PHONE: \_\_\_\_\_
EMAIL: \_\_\_\_\_

II. OPERATOR INFORMATION (If different than landowner above)

NAME: \_\_\_\_\_
MAILING ADDRESS: \_\_\_\_\_
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ PHONE: \_\_\_\_\_
EMAIL: \_\_\_\_\_

**III. RANCH FACILITY INFORMATION**

RANCH NAME: \_\_\_\_\_

ASSESSOR PARCEL NUMBER(S) (APN): \_\_\_\_\_

FACILITY ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ PHONE: \_\_\_\_\_

TYPE OF BUSINESS CONDUCTED AT THE RANCH FACILITY:

**IV. BASIS OF NON-APPLICABILITY**

**Check each that apply and provide an explanation for each in Section V. below.**

\_\_\_\_\_ 1. The ranch is not used for Grazing Operations.

*For the purposes of the Grazing Waiver, the term 'Grazing Operations' will refer to those facilities where animals are fed or maintained on rangeland forage for a total of 45 days or more in any 12-month period, and vegetation forage growth is sustained over the lot or facility during the normal growing season. A Grazing Operation includes auxiliary facilities such as roads, reservoirs, etc.*

\_\_\_\_\_ 2. The ranch is not currently actively grazed.  
Date last used for active grazing \_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_ 3. The ranch was once used for grazing. The ranch is now closed and all materials and waste associated with the business have been removed or cleaned-up.

Date of closure \_\_\_\_/\_\_\_\_/\_\_\_\_ Date of completed clean-up \_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_ 4. The ranch is subject to another general or individual permit issued by the Water Board. If so, indicate type of permit, and permit number. Permit or Order No. \_\_\_\_\_

\_\_\_\_\_ 5. The ranch is not located in the Tomales Bay watershed.  
Please provide a map showing the location of your ranch.

\_\_\_\_\_ 6. There is a new landowner/operator of the identified ranch. I am no longer the responsible party for this site. Provide information below.

Date of landowner/operator transfer \_\_\_\_/\_\_\_\_/\_\_\_\_

Has the new owner/operator been notified of Grazing Waiver requirements?

Yes\_\_ No\_\_

**NEW LANDOWNER/OPERATOR INFORMATION**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ PHONE: \_\_\_\_\_

       7. I am not and have never been the landowner/operator of the identified ranch facility.

**LANDOWNER/OPERATOR INFORMATION (IF KNOWN)**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ PHONE: \_\_\_\_\_

**V. EXPLANATION OF BASIS OF NON-APPLICABILITY**

Please include an explanation to support the appropriate category checked in Section IV above. A thorough and complete explanation will streamline the review process relative to any requirements of the Conditional Waiver. Attach additional documentation if necessary.

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**VI. CERTIFICATION**

I certify under penalty of law that the identified ranch does not require coverage under Water Board Resolution No. R2-2018-0046, or that I am not the landowner/operator of the ranch. I understand that the submittal of this Notice of Non-Applicability does not release a landowner/operator from liability for any violations of the California Water Code.

Owner or Authorized Representative\* Printed Name: \_\_\_\_\_

Owner or Authorized Representative Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Email: \_\_\_\_\_

\* A duly authorized person designated by the owner of the ranch as having responsibility for the overall operation of the ranch operation. The authorized representative may be the ranch operator or operator's duly authorized designee.

Mail completed forms to:

San Francisco Bay Regional Water Board  
1515 Clay Street, Suite 1400  
Oakland, CA 94612

Attention: Grazing Waiver Program

Or email to: [R2GrazingWaiver@waterboards.ca.gov](mailto:R2GrazingWaiver@waterboards.ca.gov)