



**RHODE ISLAND POLLUTANT DISCHARGE
ELIMINATION SYSTEM (RIPDES)
Non-Contact Cooling Water General Permit (NCCW GP)
NOTICE OF TERMINATION (NOT)**
(revised 02/25)

DEM USE ONLY
Date Received
Amount Received \$
RIPDES# RIG
Approval Date
Data Entry Date
Data Entry Initials

I. General Site Information. Please provide the following information about the site:	
a. Name of Facility/Site:	
b. Facility/Site address:	
c. RIPDES Permit Number:	
d. Photos documenting the capping or elimination of piping connecting the discharge to the receiving water, or other documentation that the treatment system has been removed from the site, must be provided as an attachment in order to process this permit termination request.	
II. Owner Information	
Legal Name:	
City:	State: Zip: Phone: ()
Contact Person:	Title:
Email Address of Contact Person:	
III. Operator Information	
Legal Name:	
City:	State: Zip: Phone: ()
Contact Person:	
Email Address of Contact Person:	
IV. OWNER/OPERATOR CERTIFICATION	
<p>I certify under penalty of law that all discharges from the identified facility that are authorized by the "RIPDES Non-Contact Cooling Water General Permit" have been terminated. I understand that by submitting this Notice of Termination (NOT), I am no longer authorized to discharge waters covered by the RIPDES Non-Contact Cooling Water General Permit and that discharging pollutants from the activity covered by the RIPDES Non-Contact Cooling Water General Permit is unlawful under Rhode Island Laws and Regulations where the discharge is not authorized by another permit. I also understand that the submission of this NOT does not release an owner/operator from liability for any prior violation of the RIPDES Non-Contact Cooling Water General Permit or applicable Laws or Regulations.</p>	
Print Owner's Name: _____	
Print Owner's Title: _____	
Signature: _____	Date: _____
Print Operator's Name: _____	
Print Operator's Title: _____	
Signature: _____	Date: _____