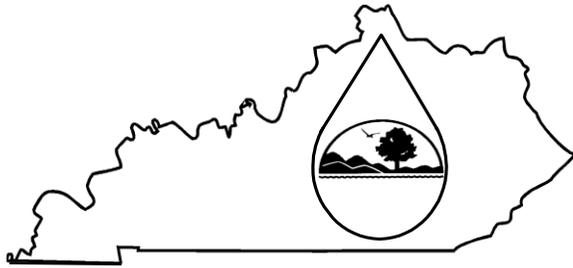


FORM NOT-WTP



KENTUCKY POLLUTION DISCHARGE ELIMINATION SYSTEM (KPDES)

Notice of Termination (NOT) for Water Treatment Plants

Note: This Notice of Termination is applicable to water treatment plant discharges only.

SECTION I – PERMITTEE INFORMATION

General Permit Number:

Permittee Name:

Mailing Address:

City, State, Zip Code:

Contact Name:

Contact Phone Number:

SECTION II – GENERAL FACILITY INFORMATION

WTP Name:

Physical Address:

City, State, Zip Code:

County:

SECTION III – REASON FOR TERMINATION

SECTION V – CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or 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 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 for knowing violations.

Name:

Official Title:

Signature:

Date:

Phone:

Mail to: Division of Water
 Surface Water Permits Branch
 200 Fair Oaks Lane
 Frankfort, Kentucky 40601