



Instructions for Transfer of Coverage

Construction Stormwater General Permit

9323

Instructions

This form is used to process two types of permit transfers: 1) Complete Transfer, or 2) Partial Transfer. Determine which type of transfer applies to your situation before filling out this form.

1. Complete Transfer: The original permittee has sold, or otherwise released control of the entire site to another party.

Required Paperwork for Complete Transfer:

- Either the current permittee, or the new permittee(s), must submit a complete and accurate Transfer of Coverage form to Ecology for each new party. The form must be signed by the current permittee **and** the new permittee.

2. Partial Transfer: The original permittee retains control over some portion of the site after selling or releasing control over a portion of the site.

Required Paperwork for Partial Transfer

- Either the current permittee or the new permittee(s) must submit a complete and accurate Transfer of Coverage Form for each new operator to Ecology. The form must be signed by the current permittee and the new permittee.
- For partial transfers, once all transfers are submitted, the original permittee should submit the Notice of Termination only if the portion(s) they still own or control have undergone final stabilization and meet the criteria for termination.

For Your Information

- When this form is 1) completed, 2) signed by the current and new permittee, and 3) submitted to Ecology, permit transfers are effective on the date specified at the top of page 1 (unless Ecology notifies the current permittee and new permittee of its intention to revoke coverage under the General Permit or if Ecology sends notice that the application is incomplete). If no date for the transfer of coverage is specified, Ecology will use the date of the last signature.
- The new permittee should keep a copy of the signed Transfer of Coverage form (which serves as proof of permit coverage) until Ecology sends documentation in the mail.
- Following the transfer, the new permittee must either: (1) use the Stormwater Pollution Prevention Plan (SWPPP) developed by the original operator, and modified as necessary, or (2) develop and use a new SWPPP that meets the requirements of the Construction Stormwater General Permit.
- For projects for which the original permittee has completed a Proposed New Discharge to an Impaired Waterbody Form (ECY 070-399), or for projects that are operating on sites with soil or groundwater contamination: By completing the Transfer of Coverage form, the new permittee will adopt any special provisions made to protect water quality for sites that have existing contamination or that discharge to an impaired waterbody.

To request ADA accommodation including materials in a format for the visually impaired, call the Water Quality Program at 360-407-6600. Persons with impaired hearing may call Washington Relay Service at 711. Persons with speech disability may call 877-833-6341.

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Transfer of Coverage

Permit # WAR305950

Construction Stormwater General Permit

This form transfers permit coverage for all, or a portion of a site to one or more new operators.

Type of permit transfer (check one): ☐ Partial transfer ☒ Complete transfer

Specific date that permit responsibility, coverage, and liability is transferred to new operator: 5/04/2020

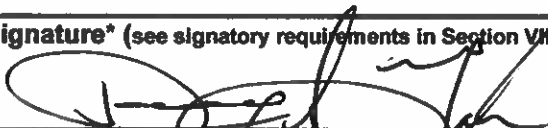
*If no date is indicated Ecology will use date of last signature

Please see instructions for details on type of transfer.

Current Operator/Permittee Information

For partial transfers:

- List **total size of project/site** remaining under your operational control following transfer: _ acres.
- List **total area of soil disturbance** remaining under your operational control following transfer: _ acres.
- Submitting this form meets the requirement to submit an updated NOI (General Permit Condition G9)

Current Operator/Permittee Name: Brian Pearson		Company: WSDOT	
Business Phone: 509-667-2881	Ext:	Mailing Address: 2830 Euclid Ave Building A	
Cell Phone: 509-630-9018	Fax (optional):		
Email: pearsob@wsdot.wa.gov		City: Wenatchee	State: WA
		Zip+4: 98801	
Signature* (see signatory requirements in Section VII): 		Title: Project Engineer <i>Deputy State Const. Engineer</i> Date: 5-13-2020	

New Operator/Permittee Information

I. New Operator/Permittee (Party with operational control over plans and specifications or day-to-day operational control of activities which ensure compliance with Stormwater Pollution Prevention Plan (SWPPP) and permit conditions. Ecology will send correspondence and permit fee invoices to the permittee on record.)

Name: Randy Scarbrough		Company: WHH Nisqually Federal Services	
Business Phone: (253)722-5928	Ext:	Unified Business Identifier (UBI): 603104945 (UBI is a nine-digit number used to identify a business entity. Write "none" if you do not have a UBI number.)	
Cell Phone (Optional):	Fax (Optional):	E-mail: rscarbrough@nisquallyconstruction.com	
Mailing Address: 12820 Yelm Hwy SE Suite H		City: Yelm	State: WA
		Zip + 4: 98513	

II. Property Owner (The party listed on the County Assessor's records as owner and taxpayer of the parcel[s] for which permit coverage is requested. Ecology will *not* send correspondence and permit fee invoices to the Property Owner. The Property Owner information will be used for emergency contact purposes.)

Name: Brian Pearson		Company: WSDOT	
Business Phone: 509-667-2881	Ext:	Unified Business Identifier (UBI): None (UBI is a nine-digit number used to identify a business entity. Write "none" if you do not have a UBI number.)	
Cell Phone (Optional): 509-630-9018	Fax (Optional):	E-mail: pearsob@wsdot.wa.gov	
Mailing Address: 2830 Euclid Ave Building A		City: Wenatchee	State: WA
		Zip + 4: 98801	

III. On-Site Contact Person(s) (Typically the Certified Erosion and Sediment Control Lead or Operator/Permittee)				
Name: Randy Scarbrough		Company: WHH Nisqually Federal Services		
Business Phone: (253)722-5928	Ext:	Mailing Address: 12820 Yelm Hwy Suite H		
Cell Phone: (509)788-8206	Fax(Optional):	City: Yelm	State: WA	98513
Email:				
IV. Site/Project Information				
Site or Project Name US 97 Boundary Bridge Remove Fish Barrier Street Address or Location Description (If the site lacks a street address, list its specific location. For example, Intersection of Highway 61 and 34.) US 97 milepost 158.79 – 160.65 Parcel ID#: _____ (Optional) Type of Construction Activity (check all that apply): <input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input checked="" type="checkbox"/> Highway or Road (city ,county, state) <input type="checkbox"/> Utilities (specify): _____ <input type="checkbox"/> Other (specify): _____		Site Acreage Total size of your site/project (that you own/control): <u>5</u> acres. (Note: 1 acre = 43,560 ft².) Total area of soil disturbance for your site/project over the life of the project: <u>2.8</u> acres. Include grading, equipment staging, excavation, borrow pit, material storage areas, dump areas, haul roads, side-cast areas, off-site construction support areas, and all other soil disturbance acreage associated with the project. (Note: 1 acre = 43,560 ft²)		
City (or nearest city): Cle Elum	Zip Code: 98992	Estimated project start-up date (mm/dd/yy): 4//2019		
County: Kittitas		Estimated project completion date (mm/dd/yy): 10/1/2020		
Record the latitude and longitude of the main entrance to the site or the approximate center of site. Latitude: <u>47.326794</u> °N Longitude: <u>-120.668826</u> °W				
V. Existing Site Conditions				
1. Are you aware of contaminated soils present on the site? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 2. Are you aware of groundwater contamination located within the site boundary? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 3. If you answered yes to questions 1 or 2, will any contaminated soils be disturbed or will any contaminated groundwater be discharged due to the proposed construction activity? <input type="checkbox"/> Yes <input type="checkbox"/> No ("Contaminated" and "contamination" here mean containing any hazardous substance (as defined in WAC 173-340-200) that does not occur naturally or occurs at greater than natural background levels.) If you answered yes to Question 3, please provide detailed information with the NOI (as known and readily available) on the natures and extent of the contamination (concentrations, locations, and depth), as well as pollution prevention and/or treatment Best Management Practices (BMPs) proposed to control the discharge of soil and/or groundwater contaminants in stormwater. This should include information that would be included in related portions of the Stormwater Pollution Prevention Plan (SWPPP) that describe how contaminated and potentially contaminated construction stormwater and dewatering water will be managed.				

VI. WQWebDMR (Electronic Discharge Monitoring Reporting)

You must submit monthly discharge monitoring reports using Ecology's WQWebDMR system. To sign up for WQWebDMR, or to register a new site, go to <http://www.ecy.wa.gov/programs/wq/permits/paris/portal.html>. If you are unable to submit your DMRs electronically, you may contact Ecology to request a waiver. Ecology will generally only grant waiver requests to those permittees without internet access. Only a permittee or representative, designated in writing, may request access to or a waiver from WQWebDMR. To have the ability to use the system immediately, you must submit the Electronic Signature Agreement with your transfer of coverage form. If you have questions on this process, contact Ecology's WQWebDMR staff at WebDMRPortal@ecy.wa.gov or 800/633-6193 or 360-407-7097 (local).

VII. Discharge/Receiving Water Information

Indicate whether your site's stormwater and/or dewatering water could enter surface waters, **directly and/or indirectly**.

☒ Water will discharge directly or indirectly (through a storm drain system or roadside ditch) into one or more surface waterbodies (wetlands, creeks, lakes, and all other surface waters and water courses).

If your discharge is to a storm sewer system, provide the name of the operator of the storm sewer system:
(e.g., City of Tacoma): _____

☐ Water will discharge to ground with 100% infiltration, with no potential to reach surface waters under any conditions.

If your project includes dewatering, you must include dewatering plans and discharge locations in your site Stormwater Pollution Prevention Plan.

Location of Outfall into Surface Waterbody

Enter the outfall identifier code, waterbody name, and latitude/longitude of the point(s) where the site has the potential to discharge into a waterbody (the outfall). Enter all locations. **See illustration of Surface Waterbody Outfall locations at the end of this form.**

- Include the names and locations of both direct and indirect discharges to surface waterbodies, even if the risk of discharge is low or limited to periods of extreme weather. **Attach a separate list if necessary.**
- Give each point a unique 1-4 digit alpha numeric code. This code will be used for identifying these points in WQWebDMR.
- Some large construction projects (for example, subdivisions, roads, or pipelines) may discharge into several waterbodies.
- If the creek or tributary is unnamed, use a format such as "unnamed tributary to Deschutes River."
- If the site discharges to a stormwater conveyance system that in turn flows to a surface waterbody, include the surface waterbody name and location.

Outfall Identifier Code. These cannot be symbols. (Maximum of 4 characters).				Surface Waterbody Name at the Outfall	Latitude Decimal Degrees	Longitude Decimal Degrees
Example: 001A				Example: Puget Sound	47.5289247° N	-122.3123550° W
1				Swauk Creek	47.326972° N	-120.666541° W
2				Swauk Creek	47.327307° N	-120.666680° W
3				Swauk Creek	47.327685° N	-120.667721° W

If your site discharges to a waterbody that is on the impaired waterbodies list (e.g., 303[d] list) for turbidity, fine sediment, high pH, or phosphorus, Ecology will require additional documentation before issuing permit coverage and these sites will be subject to additional sampling and numeric effluent limits (per Permit Condition S8). Ecology will notify you if any additional sampling requirements apply. Information on impaired waterbodies is available online at: <http://www.ecy.wa.gov/programs/wq/303d/index.html>.

Before signing, please use the following checklist to ensure this form is complete:

- ☐ All spaces on this form have been completed. (Attach additional sheets if necessary)
- ☐ The transfer form has been signed by both the current permittee **and** the new permittee(s).
- ☐ The date permit responsibility was transferred is specified. (See Page 1)
- ☐ New Operator/Permittee: Before you submit this form to Ecology, please retain a copy for your records – this will serve as proof of permit coverage until documentation arrives from Ecology.
- ☐ For partial transfers: If the original permittee no longer owns or controls any portions of the site that meet the criteria for termination, the original permittee must submit a Notice of Termination to terminate permit coverage.
(<http://www.ecy.wa.gov/biblio/ecy02087.html>)
- ☐ For sites with contaminated soils/groundwater or a new discharger to an impaired waterbody: Any special provisions to protect water quality put in place at the time of initial coverage have been reviewed and adopted by the new permittee.

Administrative Order Docket No. _____

VIII. Certification of Permittee

"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 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 for knowing violations."

Bob Iyall

WHH Nisqually Federal Services

CEO

Printed/Typed Name

Company (operator/permittee only)

Title

Bob Iyall
Signature of Operator/Permittee

5/5/2020
Date

Signature of Operator/Permittee requirements:

- A. For a corporation: By a responsible corporate officer.
- B. For a partnership or sole proprietorship: By a general partner or the proprietor, respectively.
- C. For a municipality, state, federal, or other public facility: By either a principal executive officer or ranking elected official.

Please sign and return this document to the following address:

Washington Department of Ecology - Stormwater
PO Box 47696
Olympia, WA 98504-7696

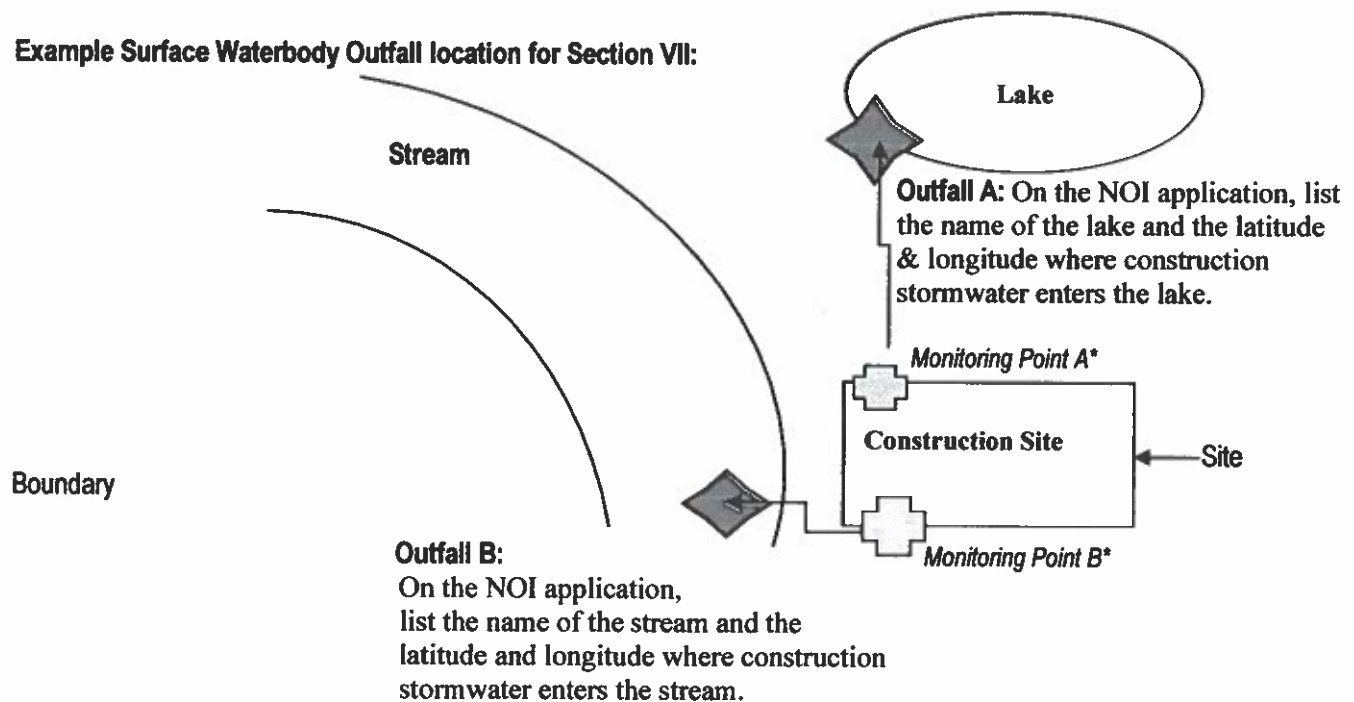
If you have questions about this form, contact the following Ecology staff:

Location	Contact Name	Phone	E-mail
City of Seattle, and Kitsap, Pierce, and Thurston counties	Josh Klimek	360-407-7451	josh.klimek@ecy.wa.gov
Island, King, and San Juan counties	RaChelle Stane	360-407-6556	rachelle.stane@ecy.wa.gov
Adams, Asotin, Columbia, Ferry, Franklin, Garfield, Grant, Lincoln, Pend Oreille, Skagit, Snohomish, Spokane, Stevens, Walla, Whatcom, and Whitman counties.	Shawn Hopkins	360-407-6442	shawn.hopkins@ecy.wa.gov
Benton, Chelan, Clallam, Clark, Cowlitz, Douglas, Grays Harbor, Jefferson, Kittitas, Klickitat, Lewis, Mason, Okanogan, Pacific, Skamania, Wahkiakum, and Yakima counties.	Joyce Smith	360-407-6858	joyce.smith@ecy.wa.gov

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If you have questions on this process, contact Ecology's WQWebDMR staff at WQWebPortal@ecy.wa.gov or 800-633-6193 or 360-407-7097 (local).

Example Surface Waterbody Outfall location for Section VII:



***Note:** The monitoring points are for illustration only and are not required on this Notice of Intent application form. Monitoring point information will be entered on the monthly discharge monitoring report as required for active permits.

To request ADA accommodation including materials in a format for the visually impaired, call the Water Quality Program at 360-407-6600. Persons with impaired hearing may call Washington Relay Service at 711. Persons with speech disability may call 877-833-6341.