



# PERMIT CHANGE REQUEST FORM

## Boatyard General Permit

**Complete** this form if you are:

- Terminating operations.
- Changing company name, owner, or operator.

**Send** the completed form to the Department of Ecology office listed below where you send your discharge monitoring reports. Substantial changes may require more information or review.

Washington Department of Ecology  
 Northwest Regional Office  
 Attn: Boatyard General Permit  
 Manager  
 3190 160<sup>th</sup> Ave. SE  
 Bellevue, WA 98008-5452

Washington Department of Ecology  
 Southwest Regional Office  
 Attn: Boatyard General Permit  
 Manager  
 P.O. Box 47775  
 Olympia, WA 98504-7775

Everyone **must** complete Section 1. After you have marked a box in the "Reason for Request," complete the corresponding Section 2, 3, or 4. (For example, if you selected "Section 2: Cancellation of current permit coverage," complete "Section 2: Permit Cancellation.") Please type or print in ink.

| <b>SECTION 1: General Information and Certification Statement</b>  |   |                               |
|--|---|-------------------------------|
| Permit Number:<br>WAG-03-_____   | Company Name:   | Facility Name: (if different) |
| Street Address/PO Box<br>City, State, ZIP  | Mailing Address: (check <input type="checkbox"/> if new)  | Facility Location:            |
| Facility Contact:  | Name:   | Title:                        |
| Additional Information:  | Telephone:  | Email:                        |
| Reason for Request:  | <input type="checkbox"/> Section 2: Cancellation of current permit coverage.<br><input type="checkbox"/> Section 3: Change facility or company name with no ownership change.<br><input type="checkbox"/> Section 4: Transfer of permit coverage to a new owner or operator.<br>(For example, sale or lease). |                               |
| <b>Certification Statement</b>   |   |                               |
| 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, 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 a fine and/or imprisonment for knowing violations. |   |                               |
| Name: (print or type)  | Title:  |                               |
| Signature*   | Date Signed:  |                               |

\*This form must be signed according to the Boatyard General Permit General Condition G17, Signatory Requirements

**SECTION 2: Permit Cancellation**

Cancellation of Permit Number WAG-03 \_\_\_\_\_ is requested because: (check one)

- All operations have been terminated.
- The facility will be sold on \_\_\_\_\_ and is not eligible for permit transfer.  
(date of sale)
- Other: \_\_\_\_\_

**SECTION 3: Facility or Company Name has Changed with no Change in Ownership**

Old Name:

New Name:

**SECTION 4: Permit Transfer Due to Sale or Lease of Facility**

The permit transfer is effective after both parties listed below have signed the Change Request Form and Ecology has received it. If Ecology decides there are significant changes from the existing permit (for example, facility operations, discharge volume, or discharge characteristics), the permit transfer is not valid.

The new permittee is responsible for:

- Completing and submitting the form.
- Obtaining copies of all relevant records from the old permittee (for example, Discharge Monitoring Reports or the Stormwater Pollution Prevention Plan).
- Notifying Ecology immediately about significant changes in facility operations, discharge volume, or discharge characteristics.

By signing the Change Request Form, the new permittee becomes fully responsible and liable on the date of the sale or lease for all permit requirements.

Transfer of Permit Number WAG-03- \_\_\_\_\_ is requested because of: (check one)

- Sale                       Lease

Transfer effective: \_\_\_\_\_ (date)

|                                  | Old Permittee | New Permittee |
|----------------------------------|---------------|---------------|
| Company Name:                    |               |               |
| Facility Name (if different):    |               |               |
| Mailing Address:                 |               |               |
| Contact Person:                  |               |               |
| Phone Number:                    |               |               |
| Owner/President:<br>(print name) |               |               |
| Owner/President:<br>(signature)  |               |               |
| Date Signed:                     |               |               |

*If you need this publication in an alternate format, please call the Water Quality Program at 360-407-6401. Persons with hearing loss can call 711 for Washington Relay Service. Persons with a speech disability can call 877-833-6341.*