

## APPLICATION FOR TRANSFER OF A WASTEWATER FACILITY OR ACTIVITY PERMIT

Facility ID:		Date:	
Facility Name:			
	Date Issued:		
	NOTIFICATION OF SALE	OR LEGAL TRANSFER	
Permittee Name:			
		Email (optional):	
		his wastewater facility or activity under Rule 62-620.340(2), F tee in the event the Department agrees to the transfer of permit	
Date of proposed transfer:			
Date Signed:			
		Signature of Existing Permittee	
	REQUEST FOR TRAN	SFER OF PERMIT	
Applicant Name:			
Title:			
		mail (optional):	
		ocuments submitted by the existing permittee which are the ba	

this permit that was issued by the Department. I state that they accurately and completely describe the permitted facility or activity. Further, I state that I am familiar with the permit and I agree to comply with its terms and conditions. I agree to assume the rights and liabilities contained in the permit and the statutes and rules under which it was issued. I also agree to promptly notify the Department of any future change in ownership of or responsibility for this facility or activity.

Date Signed:

Signature of Applicant