



**TRANSFER AND ACCEPTANCE OF TERMS OF
 CONSTRUCTION ACTIVITIES STORMWATER DISCHARGE PERMIT (CASDP)**

1. To be completed by the NEW Owner – Operator/Contractor:

I have reviewed the terms and conditions of this permit and the Stormwater Management Plan (SWMP) and accept full responsibility, coverage, and liability. I hereby accept transfer of this Construction Activities Stormwater Discharge Permit. I certify under penalty of law that I have personally examined and am familiar with the information submitted herein and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Project Name:		Permit Number:	
Project Address:			
Owner:		Operator/Contractor:	
Contact Name:		Contact Name:	
Phone:	Cell Phone:	Phone:	Cell Phone:
Email:		Email:	
Signature w/ Date Signed:		Signature w/ Date Signed:	

2. To be completed by the PREVIOUS Owner – Operator/Contractor:

As previous permittee, I hereby agree to the transfer of the above referenced permit and certification and all responsibilities thereof. I will also relinquish ownership of all previous Stormwater Management Plan (SWMP) documents to new owner – operator/contractor at their request.

Owner:		Operator/Contractor:	
Contact Name:		Contact Name:	
Phone:	Cell Phone:	Phone:	Cell Phone:
Email:		Email:	
Signature w/ Date Signed:		Signature w/ Date Signed:	