

RECLAIMED WATER TRANSFER OF OWNERSHIP APPLICATION

Please print or type. Original signatures are required. **Photo, faxed, pdf or email copies will not be accepted.**

This application form is for transferring the ownership of a Notice of Authorization (NOA). All items must be completed accurately and in their entirety for the form to be deemed complete. Incomplete forms will not be processed until all information is received which will ultimately delay the transfer and reissuance of the NOA.

Part I of the application is to be filled out by the new user or treater accepting responsibility for the NOA
Part II of the application is to be filled out by previous user or treater

A user NOA may be transferred only if the new user has submitted a completed User Plan to Comply (UPC). A treater NOA may be transferred only if the new treater has submitted a completed Letter of Intent (LOI). **A completed UPC or LOI must be attached with this transfer of ownership application for it to be considered complete.** For a user NOA transfer, the new user must submit this form along with the new UPC to the treater. Upon review and approval of the new UPC by the treater, the treater will submit all completed documents to the Water Quality Control Division (division). Please note that in some cases the treater and the user may be the same entity. Completed documents with all original signatures must be mailed or delivered to the following address:

*Colorado Department of Public Health and Environment
 Water Quality Control Division, WQCD-P-B2
 4300 Cherry Creek Drive South
 Denver, Colorado 80246-1530*

PART I - TO BE COMPLETED BY NEW USER OR TREATER

A. IDENTIFICATION OF NOA TO BE TRANSFERRED

NOA Number: _____
 Facility Name: _____
 Street Address (or cross streets): _____
 City: _____ Colorado, Zip Code: _____
 County: _____

B. NEW USER OR TREATER CONTACT INFORMATION

Organization Formal Name: _____
Legally Responsible Person: (the legal contact signing Part I.D below)
 Responsible Position (Title): _____
 Currently Held By (Person): _____
 Telephone No: _____
 Email address: _____
 Mailing Address: _____
 City: _____ State: _____ Zip: _____

C. ATTACHMENT OF USER PLAN TO COMPLY (UPC) OR LETTER OF INTENT (LOI)

- YES:** The required UPC or LOI is attached.

As noted above, for a user NOA transfer, the new user must submit the transfer of ownership form along with the new UPC to the treater. Upon review and approval of the new UPC by the treater, the treater will submit all completed documents to the division. **A completed UPC or LOI must be attached with the transfer of ownership application for it to be considered complete.**

D. NEW USER OR TREATER CERTIFICATION

"I certify, under penalty of law, that the information I am providing in Part I of this submittal is true, accurate, and correct. This determination has been made under my direction and supervision in accordance with a system designed to ensure qualified personnel properly gather and evaluate the information. I am aware that there are significant penalties for false certification including the possibility of fine and imprisonment."

Signature (Legally Responsible Person*) _____ Date _____

Name (printed) _____ Title _____

*This part shall be signed, dated, and certified for accuracy by the legally responsible person.

In all cases, it shall be signed as follows:

1. In the case of a corporation, by a principal executive officer of at least the level of vice-president, or his or her duly authorized representative, if such representative is responsible for the overall operation of the facility;
2. In the case of a partnership, by a general partner;
3. In the case of a sole proprietorship, by the proprietor;
4. In the case of a municipal, state, or other public operation, by either a principal executive officer, ranking elected official, or other duly authorized employee

PART II - TO BE COMPLETED BY PREVIOUS USER OR TREATER**A. PREVIOUS USER OR TREATER CONTACT INFORMATION**

Organization Formal Name: _____

Legally Responsible Person: (the legal contact signing Part II.B below)

Responsible Position (Title): _____

Currently Held By (Person): _____

Telephone No: _____

Email address: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

B. PREVIOUS USER OR TREATER SIGNATURE

"As previous owner of the NOA referenced in Part I of this application, I hereby agree to the transfer of the NOA and all responsibilities thereof."

Signature (Legally Responsible Person*) _____ Date _____

*This part shall be signed, dated, and certified for accuracy by the legally responsible person.

In all cases, it shall be signed as follows:

1. In the case of a corporation, by a principal executive officer of at least the level of vice-president, or his or her duly authorized representative, if such representative is responsible for the overall operation of the facility;
2. In the case of a partnership, by a general partner;
3. In the case of a sole proprietorship, by the proprietor;
4. In the case of a municipal, state, or other public operation, by either a principal executive officer, ranking elected official, or other duly authorized employee