

(Date)

(Permittee Contact Name)

(Permittee Name)

(Permittee Mailing Address)

(Permittee City, State and Zip)

(Co-Permittee Name and Address if Applicable)

Re: Notice of Termination Approval Letter

(Site Name)

(NPDES / E&S / ESCGP) Permit No. (Permit No.)

(Site Municipality), (Site County) County

Dear (Mr./Ms.) (Permittee Contact Last Name):

The (Department of Environmental Protection (DEP) OR _____ County Conservation District (District)) received a Notice of Termination (NOT) form for the above-referenced project as required by 25 Pa. Code § 102.7. A final site inspection was conducted of the project site on (Date of Final Inspection) and a copy of the Chapter 102 Inspection Report form is attached to this letter. The final site inspection found that the earth disturbance activities authorized by the permit have been concluded; the site has been stabilized in accordance with the requirements of 25 Pa. Code § 102.22(a)(2) (related to permanent stabilization); post-construction stormwater management (PCSM) stormwater control measures (SCMs) have been installed or the site restoration or reclamation is complete; and temporary erosion and sediment control (E&S) best management practices (BMPs) have been removed.

(OPTIONAL SENTENCE 1 - Use If Permit IS NOT Expired At Time of NOT Approval)

(DEP OR The District) acknowledges that you have satisfied the regulatory requirements at 25 Pa. Code §§ 102.7 and 102.22(a)(1); your NOT is approved and your permit is hereby terminated effective the date of this letter.

(END OPTIONAL SENTENCE 1)

(OPTIONAL SENTENCE 2 - Use If Permit IS Expired At Time of NOT Approval)

(DEP OR The District) acknowledges that you have satisfied the regulatory requirements at 25 Pa. Code §§ 102.7 and 102.22(a)(1) and your NOT is hereby approved.

(END OPTIONAL SENTENCE 2)

Please note that the person(s) identified in Section 5 of the NOT is now responsible for the long-term operation and maintenance of the PCSM SCMs implemented under the approved PCSM Plan.

If you have questions, please contact me by e-mail at (e-mail address) or by telephone at (Telephone No.) and refer to Permit No. (Permit No.).

<<Permittee Contact Name>>

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Sincerely,

(Application Manager Name)

(Title)

(DEP/CCD Office Name)

cc: (Co-Permittee Name(s), if applicable) (approval letter only)

(Consultant Name) (approval letter only)

(DEP Permits Section Chief (if approved by CCD)) (approval letter and Final Inspection Report)

(Municipality) (approval letter and Sections 4 and 5 of NOT Form)

Enclosure: Final Chapter 102 Inspection Report

<<Permittee Contact Name>>

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bcc: File
DEP Bureau of Clean Water (RA-EPChapter102@pa.gov; approval letter, NOT, and
Final Inspection Report)
(bcc information)

(Reference Initials)