

9. Failure of the permittee or agents acting on behalf of the permittee to follow the approved specifications, conditions and requirements immediately renders this permit null and void.
10. If applicable, treatments must also comply with the terms and conditions of NPDES permit coverage.
11. The permittee shall comply with pesticide licensing requirements established by the Pennsylvania Department of Agriculture for the applications approved under this permit.
12. This permit is valid for the treatment information identified above. The permittee shall submit a new application to amend this permit if any of the following changes are proposed:
 - a. Changes to the water bodies being treated.
 - b. Increases in the maximum dose or to the number of annual treatments for any water body.
 - c. Changes in the pesticide(s) used for treatment, unless the new pesticide(s) contain the same active ingredient(s) and the same or lower percent composition of the ingredient in comparison to the pesticide(s) previously approved by DEP/PFBC.

APPROVALS		
For the Pennsylvania Fish and Boat Commission:		
<i>Heather Smiles</i>	Division Chief	05/26/2020
Heather Smiles	Title	Date
Additional Requirements: No additional requirements.		
For the Department of Environmental Protection:		
"/s/"	Environmental Program Manager	MAY 28, 2020
John A. Holden, P.E.	Title	Date
Additional Requirements: 1.) For the calendar years 2020 and 2021, the Permittee must submit monthly treatment records using the form provided in the permit ("Monthly Treatment Reporting Form"). The completed Monthly Treatment Reporting Form shall be received by the Department by the 15 th of the month following treatment. For example, the June 2020 Monthly Treatment Reporting Form shall be provided to the Department by July 15, 2020. The Permittee is not required to submit a Monthly Treatment Reporting Form for months where treatment did not occur. These Monthly Treatment Reporting Forms can be emailed to Jay Gerber at jaygerber@pa.gov or mailed to DEP – Northwest Regional Office c/o Jay Gerber, 230 Chestnut Street, Meadville, PA 16335. Monthly Treatment Reporting Forms can be sent to the Department by the Permittee or their consultant.		

Monthly Treatment Reporting Form					
Name of Pond	Date	Pesticide	Treatment Organism(s)	Acreage Treated	Gallons/lbs. Used