

3) Certification

I certify under penalty of law that I have met at least one of the reasons for terminating permit coverage listed in Section 1 above. I understand that by submitting this Notice of Termination, I am no longer authorized to discharge pesticides to waters of the United States. This document and all attachments were prepared under my direction and supervision in accordance with a system designed to ensure that qualified personnel properly gather and evaluate the information submitted. On the basis of my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine or imprisonment. Additionally, I understand that the submittal of this Notice of Termination does not release a pesticide Operator from liability for any violations of the Clean Water Act.

Printed Name: _____

Title: _____

E-mail: _____

Signature/Responsible Official: _____ Date: _____

NOT Preparer (Complete if NOT was prepared by someone other than the certifier)

Preparer Name: _____

Organization: _____

Phone: _____ Date: _____