



Dedicated to protecting and improving the health and environment of the people of

**Colorado Water Quality Control Division Notice of Withdrawal of Permit Application**  
**www.coloradowaterpermits.com**

Please print or type all information. All items must be filled out completely and correctly. If the form is not complete, it will be returned. All withdraw of permit application dates are effective on the date approved by the Water Quality Control Division.

**FAXED or EMAILED FORMS WILL NOT BE ACCEPTED. MAIL ORIGINAL FORM WITH INK SIGNATURES TO THE FOLLOWING ADDRESS:**

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

• **PART A. IDENTIFICATION OF PERMIT APPLICATION TO BE WITHDRAWN**

- NEW**
- TERMINATION**  
Permit or Certification number \_\_\_\_\_
- AMENDMENT REQUESTED FOR EXISTING PERMIT or CERTIFICATION**  
Permit or Certification number \_\_\_\_\_

• **PART B. PERMITEE INFORMATION**

Company Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zipcode \_\_\_\_\_

Legal Contact Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Title \_\_\_\_\_ Email \_\_\_\_\_

• **PART C. FACILITY/PROJECT INFORMATION**

Facility/Project Name \_\_\_\_\_

Location (address) \_\_\_\_\_

City \_\_\_\_\_ County \_\_\_\_\_

Local Contact Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Title \_\_\_\_\_ Email \_\_\_\_\_

• **PART D. PURPOSE OF WITHDRAWAL REQUEST**

- DISCHARGE WILL NOT BE CREATED AT THIS FACILITY/SITE – CHANGE OF PLANS ELIMINATE NEED FOR DISCHARGE**
- OTHER DISPOSAL OPTION TAKEN (DESCRIBE- ie LOW RISK POLICY...)**

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- DUPLICATE APPLICATION SUBMITTED -- PERMIT PREVIOUSLY ISSUED (LIST PERMIT NUMBER)**

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- OTHER**
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• **PART E. CERTIFICATION SIGNATURE REQUIRED FOR ALL WITHDRAWAL OF APPLICATION REQUESTS**

"I certify under penalty of law that I have personally examined and am familiar with the information submitted in this withdrawal request and that, 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 or imprisonment.

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**Signature of Legally Responsible Party \***

**Date Signed**

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**Name (printed)**

**Title**

\*This withdrawal of permit application request shall be signed, dated, and certified for accuracy by the permittee. 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 operation from which the discharge described herein originates;
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.