

Attachment F

Order No. R1-2023-0034

Notice of Project Completion and Final Certification

COUNTY, OR OTHER DISCHARGER, CONTACT INFORMATION

Discharger:

County:

Authorized Representative and Title:

Telephone Number:

Email Address

Mailing Address:

Project Name:

WDID Number:

CERTIFICATION

I hereby certify that the above Project was conducted in conformance with all applicable provisions of Order No R1-2023-0034. Additionally, I certify that discharges resulting from the above Project were in compliance or are expected to be in compliance with all requirements of applicable water quality control plans.

Signature, Authorized Representative:

Date: