VERSION 07.10.24

CALIFORNIA REGIONAL WATER QUALITY CONTROL BOARD
SAN DIEGO REGION
9174 Sky Park Court, Suite 100
San Diego, California 92123-4340

NOTICE OF TERMINATION

I. FINAL WASTE DISPOSAL INFORMATION

Final Disposition of Waste:	☐ Off-site/Landfill Disposal ☐ Off-site Reuse/Disposal	☐ On-site Reuse/Disposal ☐ Other:	
Property Owner/Discharger Name:			
Property Owner/Discharger Contact and Title:			
Property Owner/Discharger Mailing Address:			
City:	County:	State:	Zip:
Telephone:	Fax:	Email:	
Assessor Parcel Number(s):		Hydrologic Area/Subarea:	
Date(s) Waste Disposed:			
Quantity of Waste Disposed: (in cubic yards for each disposal date)			
Disposal Location(s): (for each disposal date)			

II. FINAL DISPOSAL CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments 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 and imprisonment.

Signature (Owner or Authorized Representative)	Date
Print Name	Title