ATTACHMENT G - NOTICE OF TERMINATION

California Regional Water Quality Control Board San Francisco Bay Region

TO COMPLY WITH THE TERMS OF ORDER No. R2-2025-00XX

CONDITIONAL WAIVER OF WASTE DISCHARGE REQUIREMENTS FOR GRAZING OPERATIONS IN THE NORTH SAN FRANCISCO BAY REGION (NAPA RIVER, SONOMA CREEK, PETALUMA RIVER, AND TOMALES BAY WATERSHEDS, AND ALL GRAZING OPERATIONS IN POINT REYES NATIONAL SEASHORE)

Section I. Instructions

Submission of this Notice of Termination (NOT) constitutes notice by the landowner/operator of the Grazing Operation identified on this form that the facility is terminating its enrollment in the Conditional Waiver of Waste Discharge Requirements for Grazing Operations in the North San Francisco Bay Region (Napa River, Sonoma Creek, Petaluma River, and Tomales Bay watersheds, and all grazing operations in Point Reyes National Seashore). If you are unsure whether your facility is required to comply with the Conditional Waiver, please contact the Water Board, San Francisco Bay Region, at (510) 622-2410 or via email at R2GrazingWaiver@waterboards.ca.gov.

Mail completed NOT to: San Francisco Bay Regional Water Quality Control Board; 1515 Clay Street, Suite 1400; Oakland, CA 94612, Attn: Grazing Waiver Program. Or email to: R2GrazingWaiver@waterboards.ca.gov.

Section II. Ranch Operator Information

Name:	Mailing Address.		
Name.	Mailing Address:		
City:	State:		
oity.	State.		
Zip Code:	Name of Contact Person:		
Contact Email:	Contact Phone:		
Section III. Ranch Landowner Information (if o	perator is not the landowner)		
Name:	Mailing Address:		
City:	State:		
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Zip Code:	Name of Contact Person:		
Contact Email:	Contact Phone:		
Contact Email.	Contact Fronc.		
Section IV. Ranch Information			
Facility Name:	Street Address:		
City:	State:		

Zip Code:

North San Francisco Bay Conditional Waiver of WDRs for Grazing Operations

Nam	e of Contact Person:	Contact Email:	
Cont	act Phone:	Facility County Assessor's Parcel Number(s):	
Nearest Receiving Water:			
Section V. Basis of Termination			
Comp	lete one of the rows below:		
	The ranch facility was considered a Grazing Operation. The ranch facility is now closed, and all materials and waste associated with the business has been removed or cleaned-up. Date of closure (mm/dd/yy): Date of completed cleanup (mm/dd/yy):		
	The ranch facility is subject to another general or individual permit issued by the Water Board. If so, indicate type of permit, and permit number. Permit or Order Number:		
	There is a new landowner or operator of the identified ranch facility. I am no longer the responsible party for this site. Provide information below. Date of landowner / operator transfer (mm/dd/yy): Has the landowner / operator been notified of Grazing Waiver requirements? Yes: No: Contact Information for the succeeding landowner / operator: - Name: - Phone Number: - Email:		
Section VI. Landowner Certification If the ranch operator is not the ranch landowner, the landowner must certify that they have been notified of this Conditional Waiver and its requirements.			
Landowner or Authorized Representative* Printed Name: Title:			
Landowner or Authorized Representative Signature: Date:			

County:

^{*} A duly authorized person designated by the Landowner as having legal responsibility for the overall operation of the regulated facility. The authorized representative may be the ranch operator or operator's duly authorized designee.

Section VII. Certification

"I certify under penalty of law that this document and attachments were prepared under my direction and supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on 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 fines."

Landowner or Authorized Representative* Printed Name:	Title:
Email:	Telephone Number:
Landowner or Authorized Representative Signature:	Date:

Mail completed NOT to: San Francisco Bay Regional Water Quality Control Board; 1515 Clay Street, Suite 1400; Oakland, CA 94612, Attn: Grazing Waiver Program. Or email to: R2GrazingWaiver@waterboards.ca.gov

^{*} A duly authorized person designated by the Landowner as having legal responsibility for the overall operation of the regulated facility. The authorized representative may be the ranch operator or operator's duly authorized designee.