

Relocation Notice Form

- a. This form is intended for use by portable facilities subject to Air Program and/or National Pollutant Discharge Elimination Systems (NPDES) Storm Water reporting requirements.
- b. This notification form is to be submitted 20 days prior to a proposed relocation. Relocation Notices are subject to review and proposed relocation sites may be rejected based upon air quality (Nebraska Department of Water, Energy, and Environment (DWEЕ) Title 129 Chapter 6) or water quality (NPDES Permit # NER920000, Section 1.8) concerns.
- c. The completed and signed form should be sent to the Department. Please indicate if the form should be sent to the attention of the Air Program, and/or the NPDES Program.

Facility Information			
DWEЕ ID		Permit ID	
Facility Legal Name			
Contact Name (first and last)			Title
Phone Number	Email Address		
Facility Type			
Air Pollution Control Equipment <input type="checkbox"/> N/A			
Facility Operator Information (If different than above)			
Contact Name (first and last):			Title
Company Name			
Mailing Address (Street or Post Office Box)			
City or Town		State	Zip Code
Phone Number	Email Address		

Relocation Information		
<p>a. Relocation onto Indian Country land requires EPA and/or tribal approval.</p> <p>b. Include a brief narrative description of the site location. Regarding the Air Program, provide the direction and proximity to the nearest dwelling or occupied buildings, and a narrative description of the site and adjacent surroundings. A site map may be attached to facilitate processing.</p>		
Street Address (or brief description of the facility location)		
City or Town		County
Facility Latitude (decimal degrees)	Facility Longitude (decimal degrees)	
Site Description		
Relocation Schedule		
<p>a. Provide the dates requested as best known at time of submittal. If the start or finish dates change by more than two weeks, a follow-up notification should be provided</p>		
Start of Site Development	Start of Facility Operations	End of Facility Operations

Certification: I certify that I am familiar with the information in this report, and that to the best of my knowledge and belief such information is true, complete, and accurate.		
<p>a. For National Pollutant Discharge Elimination Systems (NPDES) permitted facilities, the form must be signed by the Certifying Official or Authorized Representative, per 40 CFR Subpart §122.22, or the Stormwater Pollution Prevention Plan contact provided on NOI.</p> <p>b. For Air Program permitted facilities, the form must be signed by the Responsible Official, per Title 129, Chapter 1, Section 002.89.</p>		
Name/Title		
Signature		Date
Phone Number	Email Address	