



**STATE OF LOUISIANA  
DEPARTMENT OF ENVIRONMENTAL QUALITY**

*Office of Environmental Services, Water Permits Division  
Post Office Box 4313  
Baton Rouge, Louisiana 70821-4313  
Phone#: (225) 219-9371*

**LPDES NOTICE OF EXTENSION (NOE) OF COVERAGE UNDER  
LPDES GENERAL PERMIT FOR STORM WATER DISCHARGES  
ASSOCIATED WITH CONSTRUCTION ACTIVITY GREATER THAN 5 ACRES**

(To be submitted within THIRTY (30) DAYS before EXPIRATION DATE of covered activities.)

Please submit two copies (one original and one copy) of your completed and signed NOE.

**SECTION I – PERMIT INFORMATION**

Facility's Storm Water Authorization Number LAR10 \_\_\_\_\_ AI #: \_\_\_\_\_

Select how long the permit extension is needed:

- 0 months - 1 year
- 2 years (not available after 9/30/2018)
- 3 years (not available after 9/30/2017)
- 4 years (not available after 9/30/2016)

**Note: One year of coverage was provided to all previously permitted operators upon renewal of the permit (October 1, 2014 to September 30, 2015). Coverage cannot be granted beyond 9/30/2019 (the expiration date of the general permit). Therefore, 4 years is not available after 9/30/2016, etc. Instructions on extending coverage beyond 9/30/2019 will be provided at the time the master general permit is reissued.**

**SECTION II- FACILITY OPERATOR INFORMATION**

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

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

\_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone \_\_\_\_\_

**SECTION III – FACILITY / SITE LOCATION INFORMATION**

Name of Project \_\_\_\_\_

Location of Project \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Parish \_\_\_\_\_

Name of Receiving Water(s) \_\_\_\_\_

**SECTION IV - INSTRUCTIONS AND REQUIREMENTS**

Submission of this form shall in no way constitute approval of the extension request. The office will notify the requestor in writing of the decision regarding the change request. **All information must be provided. Do not leave any sections blank. Use N/A if not applicable.**

1. **Prior to 30 days before the expiration date of your permit, submit two copies (one original and one copy) of the completed and signed NOE Form.**
2. **Submit payment.** All payments made by check, draft, or money order shall be payable to Department of Environmental Quality. For electronic funds transfer (EFT), contact the LDEQ Office of Management and Finance. For online payments, see <http://business.deq.louisiana.gov/>. **Permit fees are to be paid as follows, based on extension coverage needed:**

If the NOE is received by LDEQ on or before 6/30/17:

- 0 months - 1 year – **\$264.00**
- 2 years – **\$528.00 (not available after 9/30/2018)**
- 3 years – **\$792.00 (not available after 9/30/2017)**
- 4 years – **\$1056.00 (not available after 9/30/2016)**
- 5 years – **\$1320.00 (not available after 9/30/2015)**

If the NOE is received by LDEQ on 7/1/17 or later:

- 0 months to 1 year – **\$291.00**
- 2 years – **\$582.00 (not available after 9/30/2018)**
- 3 years – **\$873.00 (not available after 9/30/2017)**
- 4 years – **\$1164.00 (not available after 9/30/2016)**

- Check / Money Order No. \_\_\_\_\_
- Amount of Check / Money Order \_\_\_\_\_
- Date of Check or Money Order \_\_\_\_\_
- Name on Check or Money Order \_\_\_\_\_

## SECTION V- CERTIFICATION

I certify under penalty of law that project activities were completed in accordance with the requirements of the Clean Water Act and the Louisiana Environmental Quality Act, and specifically in accordance with the LPDES Large Construction General Permit, LAR100000, under which the storm water discharges related to the construction were authorized. I also certify that a storm water pollution prevention plan, including both construction and post construction controls, has been prepared for the site in accordance with the permit and that such plan complies with approved State, Tribal and/or local sediment and erosion plans or permits and/or storm water management plans or permits. I am aware that signature and submittal of the NOE is deemed to constitute my determination of eligibility under one or more of the requirements of Permit Part I.A.3.e(1), related to the Endangered Species Act requirements. To the best of my knowledge, I further certify that such discharges and discharge related activities will not have an effect on properties listed or eligible for listing on the National Register of Historic Places under the National Historic Preservation Act, or are otherwise eligible for coverage under Part I.A.3.f of the permit. I am also aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature \_\_\_\_\_

Print Name \_\_\_\_\_

Title \_\_\_\_\_

Company \_\_\_\_\_

Date \_\_\_\_\_

Telephone \_\_\_\_\_

Email \_\_\_\_\_

Federal Tax ID No. \_\_\_\_\_