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|--|---|---|
| <p style="text-align: center; font-weight: bold; font-size: small;">DEQ USE ONLY</p> <p>Application #: _____ Legal name checked <input type="checkbox"/> Notes: _____ _____ <input type="checkbox"/> IND <input type="checkbox"/> DOM <input type="checkbox"/> STM <input type="checkbox"/> OSS <input type="checkbox"/> UIC:</p> |  <p style="font-weight: bold; font-size: large;">Oregon Department of Environmental Quality</p> <p style="font-weight: bold;">Name Change and/or Permit Transfer NPDES or WPCF Permit</p> | <p style="text-align: center; font-weight: bold; font-size: small;">DEQ USE ONLY</p> <p>Date Rcvd: _____ Amt Rcvd: _____ Check #: _____ Rcvd From: _____ Deposit #: _____ Receipt #: _____</p> |
|--|---|---|

A. ACTION TO BE PERFORMED

| | |
|---|---|
| <input type="checkbox"/> Name Change / Effective or Scheduled Date: | <input type="checkbox"/> Transfer of Permit / Scheduled Date: |
|---|---|

B. PREVIOUS INFORMATION

| | |
|--|----------------------------|
| 1. Previous Legal Name: Previous Common Name: | |
| 2. Facility Physical Address: City, State, Zip Code: County: | 3. Permit #: DEQ File#: |

C. NEW INFORMATION

| | |
|---|----------------------------|
| 1. NEW Legal Name: | |
| 2. NEW Common Name: | |
| 3. Responsible Official: Mailing Address, City, State, Zip Code: Email Address: | Title: Telephone #: |
| 4. Facility Contact: Mailing Address, City, State, Zip Code: Email Address: | Title: Telephone #: |
| 5. Invoice to: Mailing Address, City, State, Zip Code: Email Address: | Title: Telephone #: |
| 6. Will the name change or transfer of ownership result in a change in the character of pollutants being discharged or a new or increased discharge not addressed by current permit conditions? <input type="checkbox"/> No <input type="checkbox"/> Yes (attach explanation) | |

D. SIGNATURE REQUIRED FOR NAME CHANGE

I hereby authorize the above referenced name change.

| | |
|---|-------|
| _____ | _____ |
| Name of Legally Authorized Representative (Type or Print) | Title |
| _____ | _____ |
| Signature of Legally Authorized Representative | Date |

E. SIGNATURES REQUIRED FOR TRANSFER OF PERMIT

Previous owner: I hereby acknowledge the pending transfer of the above referenced permit.

| | |
|---|-------|
| _____ | _____ |
| Name of Legally Authorized Representative (Type or Print) | Title |
| _____ | _____ |
| Signature of Legally Authorized Representative | Date |

New owner: I hereby apply for permission to transfer the above referenced permit and certify that I have acquired a property interest in the permitted activity. I agree to fully comply with all terms and conditions of the permit and DEQ rules.

| | |
|---|-------|
| _____ | _____ |
| Name of Legally Authorized Representative (Type or Print) | Title |
| _____ | _____ |
| Signature of Legally Authorized Representative | Date |

NAME CHANGE AND/OR TRANSFER INSTRUCTIONS

A. ACTION TO BE PERFORMED

Check the appropriate box to indicate a name change and/or permit transfer.

- ◆ For a **name change**, provide the effective or scheduled date of the name change. Please note that for name changes, DEQ prefers to process your request after the name has been legally changed to avoid incorrectly modifying its files should the change not occur.
- ◆ To **transfer a permit** to a new owner, provide the date on which you want the transfer to occur. Transfer will not occur until DEQ has received the appropriate signatures and fee and reviewed the transfer information. Approval of a transfer may take up to 30 days to process.

B. PREVIOUS INFORMATION

1. Enter the previous legal name and common name of this facility or operation if different than the legal name.
2. Enter the facility's physical address (physical location, not mailing address), including city, state, and zip code.
3. Enter the DEQ permit number and facility file number (also known as the site ID number; this number may be found on the first page of your permit).

C. NEW INFORMATION

1. Enter the new legal name. This name will appear on the permit and must be the **legal** Oregon name (for example, Acme Products, Inc.) or the **legal** representative of the company if the company operates under an assumed business name (for example, John Smith, dba Acme Products). The name must be a legal, active name registered with the Secretary of State - Corporation Division unless otherwise exempt by regulation (503-986-2200 or <http://sos.oregon.gov/business/Pages/register.aspx>).
2. Enter the new common name of this facility or operation if different than the legal name.
3. Enter the name, telephone number, and e-mail and mailing addresses of the Responsible Official. The Responsible Official is the person that receives official correspondence from DEQ, such as renewal notices or notices of noncompliance, and may be contacted if there are questions about this application.
4. Enter the name, telephone number, and e-mail and mailing addresses of the Facility Contact if different from the Responsible Official. The Facility Contact is the person located at the facility that has specific knowledge of the facility or operation under permit (for example, the treatment plant operator), and may be contacted if there are specific questions about this application.
5. Enter invoicing information for billing purposes if different from new legal name (for example, "Invoice To: Business Office").
6. Complete as indicated. Attach an explanation if changes are being made to the discharge regulated by the current permit.

D. SIGNATURE REQUIRED FOR NAME CHANGE

The signature of a legally authorized representative must be obtained before DEQ will change the name of a permittee.

E. SIGNATURES REQUIRED FOR PERMIT TRANSFER

The signatures of legally authorized representatives from the previous owner and new owner must be obtained before DEQ will transfer a permit. If the previous owner is not available, DEQ will accept a bill of sale or other proof that the new owner has acquired a property interest in the permitted activity.

Definition of Legally Authorized Representative:

Please also provide the information requested in brackets [/]. For NPDES permits, see 40 CFR § 122.22 for more detail.

- ◆ **Corporation** – President, secretary, treasurer, vice-president, or any person who performs principal business functions; or a manager of one or more facilities employing more than 250 persons or having gross annual sales or expenditures exceeding \$25 million that is authorized in accordance to corporate procedure to sign such documents
- ◆ **Partnership** – General partner *[list of general partners, their addresses and telephone numbers]*
- ◆ **Sole Proprietorship** – Owner(s) *[each owner must sign the application]*
- ◆ **City, County, State, Federal, or other Public Facility** – Principal executive officer or ranking elected official
- ◆ **Limited Liability Company** – Member *[articles of organization]*
- ◆ **Trusts** – Acting trustee *[list of trustees, their addresses and telephone numbers]*

FEE AND APPLICATION SUBMITTAL

Please see the cover letter enclosed with this application form or call the appropriate regional office below for fee information and to determine where to send this application. Send this form and fee to the regional office. Please reference the current [fee table](#) to determine the appropriate fees for your permit. Make your check payable to the Department of Environmental Quality.

| DEQ Northwest Region | DEQ Western Region | | | DEQ Eastern Region |
|--|---|--|---|---|
| 700 Lloyd Building at 700 NE Multnomah St., Suite #600 Portland, OR 97232 503-229-5263 or 1-800-452-4011 <i>Clackamas, Clatsop, Columbia, Multnomah, Tillamook, Washington</i> | Onsite Sewage | | Stormwater | All Other Permits 4026 Fairview Industrial Dr SE Salem, OR 97302 503-378-8240 or 1-800-379-7677 <i>Benton, Coos, Curry, Douglas, Jackson, Josephine, Lane, Lincoln, Linn, Marion, Polk, Yamhill</i> |
| | <i>Benton, Lane, Lincoln, Linn, Marion, Polk, Yamhill</i> | 165 E 7 th Ave, #100 Eugene, OR 97401 541-686-7838 or 1-800-844-8467 | 165 E 7 th Ave, #100 Eugene, OR 97401 541-686-7838 or 1-800-844-8467 | |
| | <i>Coos, Curry, Douglas (coast)</i> | 381 N 2nd St Coos Bay, OR 97420 541- 269-2721 | <i>Benton, Coos, Curry, Douglas, Jackson, Josephine, Lane, Lincoln, Linn, Marion, Polk, Yamhill</i> | |
| | <i>Douglas (east) Jackson, Josephine</i> | 221 Stewart Ave, #201 Medford, OR 97501 541-776-6010 or 1-877-823-3216 | | 800 SE Emigrant, #330 Pendleton, OR 97801 541-276-4063 or 1-800-452-4011 <i>Crook, Deschutes, Gilliam, Grant, Harney, Jefferson, Klamath, Lake, Malheur, Morrow, Wallowa, Umatilla, Union, Wasco, Wheeler</i> |

