



IOWA DEPARTMENT OF NATURAL RESOURCES
ENVIRONMENTAL SERVICES DIVISION

NOTICE OF INTENT

TO BE COVERED UNDER NPDES GENERAL PERMIT No. 4
"DISCHARGE FROM PRIVATE SEWAGE DISPOSAL SYSTEMS"

(Type or Print)

Current Owner _____
 Address _____ City _____
 State _____ Zip _____ Telephone (____) _____

Has this private sewage disposal system been previously covered by General Permit #4?

If yes, please list authorization number: _____ and then proceed to Certification Section at the bottom of this form

If no, please provide the following location information:

Location of sewer system: (Required. If "same as above", please write "same")

Street address _____
 City _____ Zip _____

Legal description: (required unless lat./long. available)

¼ Section ¼ Section ¼ Section Section Townshi Range County (required)

_____ ¼ of _____ ¼ of _____ ¼ of Sec. _____, T _____ N, R _____ W/E _____

Latitude: (if available) _____ (Deg./decimal-deg.) Longitude: _____

Type of Secondary Treatment:

Sand Filter (buried) Sand Filter (free access) Mechanical/Aerobic Unit

Constructed Wetland Lagoon Other (describe) _____

Certification: For existing private sewage disposal systems, check off the first two items below. For new installations, check off all three items below:

- I certify the above information is true and accurate, to the best of my knowledge.
- I agree to abide by all terms and conditions of the DNR NPDES General Permit #4.
- I certify that the permitted system will be constructed in conformance with the requirements of IAC 567 - Chapter 69 and all applicable County requirements.

Signature

Date

A copy of the permit will be mailed to you along with your discharge authorization.

Send completed form to: NPDES Section
 Iowa Department of Natural Resources
 502 E. 9th Street
 Des Moines, IA 50319

DNR form 542-1541 (revised 06/2008)