## ALABAMA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT (ADEM) NPDES/SID/UIC PERMIT TRANSFER AGREEMENT

**Instructions:** This form should be submitted when a National Pollutant Discharge Elimination System (NPDES), State Indirect Discharge (SID), or Underground Injection Control (UIC) permit is being transferred from one entity to another. Permit transfers are subject to an application fee as prescribed in ADEM Admin. Code r. 335-1-6-.04. Applicants should contact the appropriate permitting section of the Water Division to determine if other information or forms may be required in addition to this form. If immediate operational changes that warrant a permit modification are planned, an application for such changes should be submitted with this transfer agreement. **Do NOT use this form if only a name change has occurred for the facility.** 

Does this transfer agreement apply to more than one facility? 🗌 No 🔲 Yes If Yes, please use the Attachment page to identify the additional facilities							
Affected	d NPDES/SID Permit Number(s):						
Facility	Name (as it appears on the permit):						
Facility	Location Address (as it appears on the permit):						
This Agı Manage	reement is entered into this date by Company A and Comment NPDES/SID Permit Number(s) referenced above othereunder from Company A to Company B.	npany B in order to	effect a transfer	of Alabama Department	of Environmenta y, coverage, an		
3 also d	date such transfer becomes effective, Company B agrees certifies that operational changes that warrant a permit in A agrees to relinquish all rights which it may have unde	modification will no					
This ag	reement is entered into by both parties thisday	y of	,;	said transfer is to beco	ome effective o		
•	any A (Name):	Compa	ny B (Name):				
Mailing	g Address:	Mailing	Address:				
	-						
By:	Signature of Responsible Official	Ву:					
	Signature of Responsible Official		Signa	ture of Responsible Offic	cial		
	Printed Name of Responsible Official		Printed Name of Responsible Official				
-	Title of Responsible Official	<u> </u>	Tit	le of Responsible Officia	l		
	Telephone Number		Mailing Address				
	Email Address		Mailing City, State, Zip Code				
		_		Telephone Number			
		_		Email Address			
	Witness Signature			/itness Signature			
f the p	permit contact person for Company B is differen	t from the Resp	onsible Officia	al, please complete t	he following:		
	Contact Name		Contact Title				
	Mailing Address	Ma	Mailing City Mailing State Mailing Zip				
Telephone Number			Email Address				

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List the additional facilities to which this transfer agreement applies below:

	Affected NPDES/SID Permit Number(s)	Facility Name	Facility Location Address
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ADEM Form 466 06/22 m3 Attachment