

**ILLINOIS ENVIRONMENTAL PROTECTION AGENCY
NOTICE OF INTENT (NOI)
FOR
GENERAL PERMIT TO DISCHARGE WASTEWATER
ILG**

OWNER/OPERATOR INFORMATION

NAME:	LAST	FIRST	MI	OWNER TYPE: (SELECT ONE AND TYPE "X")			
				PRIVATE	COUNTY		
MAILING ADDRESS:				CITY	SPECIAL DISTRICT		
				FEDERAL	STATE		
CITY:				ST:		ZIP:	
CONTACT PERSON:				TELEPHONE NUMBER:	AREA CODE + NUMBER		

FACILITY/SITE INFORMATION

SELECT ONE:	EXISTING FACILITY	NEW FACILITY	CHANGE OF INFORMATION	CURRENT NPDES PERMIT NO:	I	L																
FACILITY NAME:											COUNTY:											
MAILING ADDRESS:											TELEPHONE NUMBER:	AREA CODE +NUMBER										
CITY:											ST:	IL	ZIP:			LATITUDE:	DEG. MIN. SEC.		LONGITUDE:		DEG. MIN. SEC.	
QTR-SECT:			SECTION:			TOWNSHIP:			RANGE:			PM:										
RECEIVING WATER:											SIC CODE:											

APPLICANT SIGNATURE: _____ TITLE _____ DATE: _____

FOR OFFICE USE ONLY

MAIL COMPLETED FORM TO:	ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF WATER POLLUTION CONTROL ATTN: PERMIT SECTION POST OFFICE BOX 19276 SPRINGFIELD, Illinois 62794-9276	LOG:
		PERMIT: ILG
		DATE:
		ENG:

This Agency is authorized to require this information under Illinois Revised Statutes, 1991, Chapter 111 ½, Section 1039. Disclosure of this Information is required under that Section. Failure to do so may prevent this form from being processed and could result in your application being denied. This form has been approved by the Forms Management Center.