**NOPC or Transfer of Coverage**

Date

Permittee Contact Person First and Last Names [Use New Permittee info for TOC]

Permittee Legal Name (Permittee) **SENT VIA E-MAIL:** email address

Address **RECEIPT CONFIRMATION REQUESTED**

City, State Zip

Re: Virginia Water Protection (VWP) General Permit Tracking No. WP#-##-####

Project Name, County/City, Virginia

Approval of Notice of Planned Change [if TOC include: for Transfer of Permit Coverage]

Dear Permittee Contact Person First and Last Names:

The Virginia Department of Environmental Quality (DEQ) received your notice of planned change request or Transfer of VWP General Permit Coverage Agreement Form on Date, for the above-referenced project. The coverage was originally issued on Date. [, and revised on Date insert dates of previous actions if applicable].

**[Use Only Applicable Section(s)]**

Transfer of Coverage

In accordance with Choose an item.-80, Part III.H of the general permit, and the attached Transfer Agreement Form, DEQ approves the transfer of coverage for VWP General Permit Tracking No. WP#-##-#### as noted below:

Former Permittee: Permittee Legal Name, Legal Address, City, State Zip

New Permittee: Permittee Legal Name, Legal Address, City, State Zip

Notice of Planned Change

In the request letter dated Date, you or Agent Name requested [indicate reason for planned change per current applicable regulation]. [If applicable: As proposed in your letter, compensation for the additional impacts will be provided through [list proposed compensation].

In accordance with your request and pursuant to Choose an item.-80.#, DEQ approves the [Ex.: additional impacts for coverage under this authorization].

The attached VWP general permit coverage has been modified to reflect the above changes. Please contact DEQ at [select processing office email and phone #] Choose an item. or Choose an item. if you have any questions.

Respectfully,

Name

Regional VWPP Program Manager

Enclosures: Revised Coverage Letter, or Revised Cover Page [for pre-2016 coverage], VWP General Permit or VWP General Permit Condition [for pre-2016 coverage], Attachment 1 - *VWP Permit Construction Status Update Form*, Attachment 2 – *Monthly VWP Permit Inspection Checklist*, Transfer Agreement Form [for TOC]

cc: Former Permittee, Company [for TOC]

Authorized Agent Name, Company

Name, U.S. Army Corps of Engineers

Beth Howell, Virginia Marine Resources Commission, Building 96, 380 Fenwick Road, Ft.

Monroe, VA 23651, or [jpa.permits@mrc.Virginia.gov](mailto:jpa.permits@mrc.Virginia.gov)