**Termination Agreement Form**

Date

To: Regional VWPP Program Manager

 Virginia Department of Environmental Quality

 Name Regional Office

Address

City, Virginia Zip

Regional Email@deq.virginia.gov

Re: Termination of Permit

 Virginia Water Protection (VWP) Individual Permit No. ##-####

 Project Name, County/City, Virginia

The Termination is being requested for the following reason(s):

[Ex.: The authorized impacts have been taken, and the compensatory mitigation requirements have been satisfied.]

I hereby consent to the termination of VWP Individual Permit No. ##-#### and waive my right to a public hearing in accordance with VWP Permit Regulation 9VAC25-210-180.H and Procedural Rule No. 1, Section 9VAC25-230-100.

I certify that the permit is [ ]  / is not [ ]  subject to a pending state or federal enforcement action, including citizen suits, brought under state or federal law.

[Pick one of the following paragraphs:

For Project Completion

I certify under penalty of law that all activities and any required compensatory mitigation authorized by a VWP permit have been completed. I understand that by submitting this notice of termination that I am no longer authorized to perform activities in surface waters in accordance with the VWP permit, and that performing activities in surface waters is unlawful where the activity is not authorized by a VWP permit, unless otherwise excluded from obtaining a permit. I also understand that the submittal of this notice does not release me from liability for any violations of this VWP permit.

For Project Cancelation

I certify under penalty of law that the activities and any required compensatory mitigation authorized by this VWP permit will not occur. I understand that by submitting this notice of termination that I am no longer authorized to perform activities in surface waters in accordance with the VWP permit, and that performing activities in surface waters is unlawful where the activity is not authorized by a VWP permit, unless otherwise excluded from obtaining a permit. I also understand that the submittal of this notice does not release me from liability for any violations of this VWP permit, nor does it allow me to resume the permitted activities without reapplication and issuance of another permit.

For events beyond permittee control, the permittee shall provide a detailed explanation of the events, to be approved by DEQ, and the following certification statement

I certify under penalty of law that the activities or the required compensatory mitigation authorized by this VWP permit have changed as the result of events beyond my control (see attached). I understand that by submitting this notice of termination that I am no longer authorized to perform activities in surface waters in accordance with the VWP permit, and that performing activities in surface waters is unlawful where the activity is not authorized by a VWP permit, unless otherwise excluded from obtaining a permit. I also understand that the submittal of this notice does not release me from liability for any violations of this VWP permit, nor does it allow me to resume the permitted activities without reapplication and issuance of another permit.]

Permittee: Permittee Legal Name

 Address

 City, State Zip

 Phone

 Email

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**This form must be signed by properly authorized individuals.**