

DEPARTMENT OF TRANSPORTATION
LOCATION AND DESIGN
VSMP PERMIT TERMINATION NOTICE

1. District: _____
2. Residency: _____
3. City/County: _____
4. Project #: _____
5. UPC#: _____
6. Project Location:
Latitude: _____ Longitude: _____ or
From: _____ To: _____
7. VSMP Permit Number: _____
8. Date of Termination: _____

| | |
|--|-------------------|
| Project RLD (Responsible Land Disturber) | |
| I Certify that final stabilization has been achieved on all portions of the project site for which I am responsible and that the project no longer needs coverage under VSMP General Permit DCR01 for Storm Water Discharges From Construction Activities. | |
| Signature: | _____ |
| Printed Name: | _____ |
| Title: | _____ Date: _____ |