Attachment E – Notice of Intent

WATER QUALITY ORDER NO. 2013-0002-DWQ
GENERAL PERMIT NO. CAG990005

STATEWIDE GENERAL NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
(NPDES) PERMIT FOR RESIDUAL AQUATIC PESTICIDE DISCHARGES TO WATERS OF
THE UNITED STATES FROM ALGAE AND AQUATIC WEED CONTROL APPLICATIONS

I. NOTICE OF INTENT STATUS (see Instructions)

Mark only one item

A. New Applicator
B. ☑ Change of Information: WDID# CAG990005
C. Change of ownership or responsibility: WDID#

II. DISCHARGE INFORMATION

A. Name
California Department of Parks and Recreation, Division of Boating and Waterways
B. Mailing Address
One Capitol Mall, Suite 410
C. City
Sacramento
D. County
Sacramento
E. State
CA
F. Zip
95814
G. Contact Person
Angela Calderaro
H. E-mail address
Angela.Calderaro@parks.ca.gov
I. Title
Sr. ES Supervisor
J. Phone
916-591-9904

III. BILLING ADDRESS (Enter Information only if different from Section II above)

A. Name
B. Mailing Address

C. City
D. County
E. State
F. Zip

G. E-mail address
H. Title
I. Phone
IV. RECEIVING WATER INFORMATION

A. Algaecide and aquatic herbicides are used to treat (check all that apply):
1. ☐ Canals, ditches, or other constructed conveyance facilities owned and controlled by Discharger.
   Name of the conveyance system: ______________________________________________
2. ☐ Canals, ditches, or other constructed conveyance facilities owned and controlled by an entity other than the Discharger.
   Owner’s name: __________________________________________________________________
   Name of the conveyance system: _________________________________________________
3. ✓ Directly to river, lake, creek, stream, bay, ocean, etc.
   Name of water body: Sacramento-San Joaquin Delta, its tributaries and the Suisun Marsh

B. Regional Water Quality Control Board(s) where treatment areas are located
   (REGION 1, 2, 3, 4, 5, 6, 7, 8, or 9): Region ____________________________
   (List all regions where algaecide and aquatic herbicide application is proposed.)

V. ALGAECIDE AND AQUATIC HERBICIDE APPLICATION INFORMATION

A. Target Organisms: ______
   WHCP/SCP APAP: Water hyacinth, South American Spongeplant, primrose, aligatorweed

B. Algaecide and Aquatic Herbicide Used: List Name and Active ingredients
   Roundup Custom (glyphosate)
   Weedar64 (2,4-D)
   Clearcast (imazamox)
   Galleon (penoxsulam)
   Flumiguard or Clipper (flumioxazin)
   Reward (diquat dibromide)
   Habitat (imazapyr)

C. Period of Application: Start Date __________ End Date __________
   March 1 (annual) November 30 (annual)

D. Types of Adjuvants Used:
   Agri-Dex, Competitor, and Cygnet Plus

VI. AQUATIC PESTICIDE APPLICATION PLAN

Has an Aquatic Pesticide Application Plan been prepared and is the applicator familiar with its contents?
✓ Yes ☐ No

If not, when will it be prepared? ______________________________

VII. NOTIFICATION

Have potentially affected public and governmental agencies been notified?
✓ Yes ☐ No

VIII. FEE

Have you included payment of the filing fee (for first-time enrollees only) with this submittal?
GENERAL NPDES PERMIT FOR RESIDUAL AQUATIC PESTICIDE DISCHARGES FROM ALGAE AND AQUATIC WEED CONTROL APPLICATIONS

ORDER 2013-0002-DWQ
(AS AMENDED BY ORDERS 2014-0078-DWQ, 2015-0025-DWQ and 2016-0073-EXEC)
NPDES NO. CAG990005

☐ YES  ☐ NO  ☑ NA

IX. CERTIFICATION

"I certify under penalty of law that this document and all attachments were prepared under my direction and supervision in accordance with a system designed to ensure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine or imprisonment. Additionally, I certify that the provisions of the General Permit, including developing and implementing a monitoring program, will be complied with."

A. Printed Name: Angela Calderaro
B. Signature: [Signature]
   Date: 6/25/19
C. Title: Senior Environmental Scientist (Supervisor)

XI. FOR STATE WATER BOARD STAFF USE ONLY

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