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|  | **CONSTRUCTION STORMWATER**  **SIGNED CERTIFICATION**  *(Applies to online application submittals only.)*  State Form 56679 (R / 7-22)  Approved by State Board of Accounts, 2022  INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT  OFFICE OF WATER QUALITY | | **For questions regarding the Stormwater Program and the requirement to complete this form, contact:**  IDEM Stormwater Program  100 North Senate Avenue IGCN Room 1255  Indianapolis, Indiana 46204-2251  Telephone: (317) 233-1864 or  (800) 451-6027(*within Indiana*)  E-mail: [Stormwat@idem.IN.gov](mailto:Stormwat@idem.IN.gov)  Web Access: <http://www.IN.gov/idem/stormwater/2331.htm> |
| *Note: Submission of the Construction Stormwater – Signed Certification form is the final step to complete online applications for permit coverage and terminations under the Construction Stormwater General Permit (INRA00000). The signature verification (wet ink) is required as part of the application process and consistent with the U.S. Environmental Protection Agency Cross-Media Electronic Reporting Rule (CROMERR).* | | |
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| **PROJECT INFORMATION** | | | |
| **Authorization Number** (*Begins with INR and six (6) characters. Required for Amendments, Renewals, and Terminations.)***:** | | | |
| **Submission Reference Number** *(Assigned for each online submission)***:** | | | |
| **Project name** *(As it appeared on the “Notice of Intent”)***:** | | | |
| **Project Contact to address IDEM Questions** (*an individual*)**:** | | | |
| **Telephone:** | | **E-mail:** | |
| **Notice of Intent** *(Complete this Section for NOI Submittals.)* | | | |
| **Notice of Intent:**  **Initial**  **Amendment**  **Renewal** (Check Amendment when submitting for a Continuation of Coverage)  **Transmittal and Enclosure Requirements:** *Check One:*  **Fee has been paid online:** The application for permit coverage under the Construction Stormwater General Permit was submitted through the IDEM online system and the application fee of $175 was paid at that time (if the application was associated with an amendment, no fee is required). ***Mail this completed form to*:**  IDEM, Office of Water Quality  Stormwater Program  100 N Senate Avenue, IGCN Room 1255  Indianapolis, IN 46204-2251  **Fee has not been paid:** The application for permit coverage under the Construction Stormwater General Permit was submitted through the IDEM online system and at the time of submittal, the option to pay the application fee of $175 with a check was selected. The check in the amount of $175, payable to IDEM, OWQ is enclosed.  ***Mail this completed form and payment to:***  IDEM, Accounts Receivable  100 N Senate Avenue, IGCN Room 1340  Indianapolis, IN 46204-2251  Authorization to collect the fee listed above: 327 IAC 5-3-17 (j) (3) | | | |
| **Notice of Termination** *(Complete this Section for NOT Submittals.)* | | | |
| **Notice of Termination:**  **Construction Complete**  **Change of Ownership**  **Early Release from Permit Coverage**  The application to terminate permit coverage was submitted through the IDEM online system. ***Mail this form to*:**  IDEM, Office of Water Quality  Stormwater Program  100 North Senate Avenue, IGCN Room 1255  Indianapolis, IN 46204-2251 | | | |
| **Certification and Signature** | | | |
| This form is the official certification for the construction stormwater online submittal associated with the Submission Reference Number referenced above.  By signing this form, I certify under penalty of law, including under penalty of perjury as specified by IC 35-44.1-2-1 and other penalties specified by IC 13-30-10, that this document, the project information submitted online and all attachments were prepared under my direction or supervision in accordance with a system designed to assure 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 and imprisonment for knowing violations.  **Printed name of project site owner:**        **Signature of project site owner** *(individual)***:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date** *(month, day, year)***:**  *This “Construction Stormwater – Signature Verification” form must be signed by an individual meeting the signatory requirements in 327 IAC 15-4-3(g). The submittal requires an* ***original (wet ink) signature****; photocopies are not acceptable.* | | | |