



NOTICE OF INTENT (NOI)

For Pesticide Discharges to Waters of the U.S.
Under the AZPDES Pesticide General Permit
AZG2011-001

FOR COVERAGE, A COMPLETE AND ACCURATE NOI MUST BE SUBMITTED TO:
Arizona Department of Environmental Quality, Surface Water Section/Stormwater and General Permits
1110 West Washington Street, 5415A-1, Phoenix, Arizona 85007

A. NOI Revision

Authorization No.
(ADEQ use only)

Is this NOI a revision for a pesticide discharge activity previously authorized under the AZPDES 2011 Pesticide General Permit? YES NO

- If "YES," provide current authorization number: _____
- If "YES," provide only the updated information, then complete and sign the certification statement in accordance with section 9.10 of the permit.

B. Project Information

Project Name / Discharge Activity: Fossil Creek Fish Renovation

Estimated Start Date: 09/10/2012 Estimated End Date: 10/12/2012
(Month/Date/Year) (Month/Date/Year)

Is any proposed discharge location within Indian Country? YES NO

(If your answer is "YES" you must seek coverage from U.S. EPA for that discharge)

C. Operator (Decision Maker) Information

Contact First Name: Roland (Scott) Contact Last Name: Rogers

Position / Title: Fisheries Program Manager

Business / Agency Name: Arizona Game and Fish Department

Mailing Address: 3500 S. Lake Mary Road

City: Flagstaff State: Arizona Zip Code: 86001

Phone: (928) 214-1245 Facsimile: (928) 779-1825

e-mail: srogers@azgfd.gov

D. Operator (Applicator) Information if Different than Decision Maker

Contact First Name: _____ Contact Last Name: _____

Position / Title: _____

Business / Agency Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Facsimile: _____

e-mail: _____

E. Type of permit coverage requested

SELECT ONLY ONE: Single Source (skip to section F. below) Area Wide

For Area Wide projects please complete the following:

Jurisdiction Watershed Other: _____

Identify Jurisdiction and Watershed: _____

NOTE: If you are applying for Single Source coverage, complete all sections below. For Area Wide coverage, complete Sections F. and G. for one of the discharge locations, and use **NOI Supplement A** for additional locations. Then proceed to Sections H. and I. below.

F. Discharge Information

1. Pesticide Use Pattern(s) (check all that apply):

- Mosquito and other Flying Insect or Pest Control
- Weed, Algae, and Vegetation Control
- Animal Control
- Forest Canopy Pest Control
- Specific Approval (you must include a copy of your Pesticide Discharge Management Plan with the NOI)

2. Name of Receiving Water: Fossil Creek

a. Location of Discharge:

Latitude 34° 23' 15" Longitude 111° 39' 22"
degrees minutes seconds degrees minutes seconds

b. Receiving Water Designation Category (check all that apply):

- Aquatic and wildlife (warm or cold water)
- Effluent dependent water that flows more than 2.5 miles from the source
- Impaired water (http://www.azdeq.gov/environ/water/assessment/download/2006_2008.pdf)
- Outstanding Arizona Water (<http://www.azdeq.gov/environ/water/permits/download/oaw.pdf>)

c. Does the proposed discharge activity involve the addition of a pesticide to a water listed as impaired for that same pesticide? YES NO

G. Pesticide Discharge Management Plan (PDMP)

1. Will any pesticide discharge activity meet or exceed one or more of the thresholds identified in Table 6.0 of the permit? YES NO (if the answer is "NO" skip to section H.)

2. If the answer to "G.1" above is "YES" complete the following:

I confirm that a PDMP that meets the requirements of section 6 of the permit has been developed and will be implemented for the discharge(s).

PDMP Contact First Name: Roland (Scott) Last Name: Rogers

Business / Agency Name: Arizona Game and Fish Department

Mailing Address: 3500 S. Lake Mary Road

City: Flagstaff State: Arizona Zip Code: 86001

Phone: (928) 214-1245 Facsimile: (928) 779-1825

e-mail: srogers@azgfd.gov

3. If the proposed discharge is to an Outstanding Arizona Water, or requires a Specific Approval, or if Item F.2.c. is answered "YES": I confirm that a copy of the PDMP is enclosed with the NOI for review by ADEQ.

H. Fees

Indicate the fee amount included with this NOI:

Single Source (\$250.00)

Area Wide (\$500.00)

Pesticide Discharge Management Plan review (add \$1,000.00 if PDMP is enclosed for review by ADEQ)

No fee is required, the decision maker identified in Section D is an Arizona state agency and is exempt from AZPDES Fees.

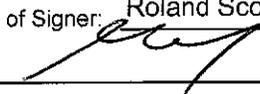
No fee is required, this is a NOI revision associated with a discharge activity previously authorized under the AZPDES 2011 Pesticide General Permit.

\$ _____ Total payment included

I. Certification (Decision Maker)

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision, as applicable, 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 this system, or those persons directly responsible for gathering the information, I believe the information submitted is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. In addition as an owner or operator, I certify that I have reviewed and intend to comply with all terms and conditions stipulated in the Pesticide General Permit (AZG2011-001) issued by the director."

Printed Name of Signer: Roland Scott Rogers Title: Fisheries Program Manager

Signature:  Date: 6-12-12

Business / Agency: Arizona Game and Fish

Mailing Address: 3500 South Lake Mary Road

City: Flagstaff State: AZ Zip Code: 86001