

MONTEREY COUNTY



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June 28, 2013

Thomas Howard, Executive Director
State Water Resources Control Board
1001 I Street, 17th Floor
Sacramento, CA 95814

Subject: COUNTY OF MONTEREY LEGALLY RESPONSIBLE PERSON (LRP) DESIGNATION OF A DULY AUTHORIZED REPRESENTATIVE (DAR), TO ACCOMPANY OUR ONLINE NOTICE OF INTENT (NOI) APPLICATION TO STATE WATER RESOURCES CONTROL BOARD WATER QUALITY ORDER NO. 2013-0001-DWQ

Dear Thomas Howard,

I am the Legally Responsible Person (LRP) for the County of Monterey pursuant to State Water Resources Control Board Water Quality Order No. 2013-0001-DWQ – National Pollutant Discharge Elimination System (NPDES) General Permit No. CAS000004 – Waste Discharge Requirements for Storm Water Discharges from Small Municipal Separate Storm Sewer Systems (MS4s) (Phase II Permit).

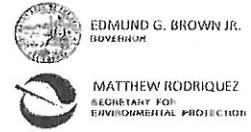
I hereby delegate authority to the Robert Murdoch, Director of Public Works, to act as my Duly Authorized Representative (DAR) and Approved Signatory under the Phase II Permit. Robert Murdoch is authorized to certify and submit annual reports on my behalf. His wet signature as the DAR is also provided below.

Sincerely,

Fernando Armenta, Supervisor

Robert Murdoch, Public Works Director

Cc: Benny Young, Director, Resource Management Agency
Robert Murdoch, Public Works Director
Thomas Harty, Civil Engineer



State Water Resources Control Board

June 27, 2013

Fee Statement
Application Id # 439150

Owner Info

County of Monterey Municipal S
168 West Alisal Street
Salinas CA 93901

Thank you for submitting the Permit Registration Documents (PRD) for the facility/site referenced above. Before a WDID number is assigned an Application Fee of \$18,196.00 must be received by August 26, 2013. The Storm Water Section will return your PRDs if the application fee is not received by August 26, 2013

Please make checks payable to: SWRCB

Mail this Fee Statement with an original signature and \$18,196.00 to:

Regular Mailing Address:

SWRCB
Storm Water Section
PO Box 1977
Sacramento, CA 95812-1977

Overnight Mailing Address:

SWRCB
Storm Water Section
1001 I Street - 15th Floor
Sacramento, CA 95814

I certify under penalty of law that this document 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.

Fernando Armenta - County of Monterey Board of Supervisors - Chair

Printed Name - Title

[Handwritten signature]

Signature

SMARTS Electronic Authorization Form

Directions: To complete the SMARTS registration process, please print, sign, and mail this form to the address at the bottom of this page.

I, Fernando Armenta
certify I meet the signatory requirements to sign application and/or reports (40 Code of Federal Regulations section 122.22) for:

County of Monterey Municipal Stormwater Permit - 623922

168 West Alisal Street

Salinas CA 93901

My signature on this form also certifies that I agree my user ID, password, and response to security challenge questions constitute my electronic signature and any information I indicate I am electronically certifying contains my signature. I understand that I am legally bound, obligated, or responsible by use of my electronic signature as much as by a handwritten signature.

I also certify that my electronic signature is for my own use that I will keep confidential and protect it from any other person's use, including subordinates and consultants. If I suspect my electronic signature has been lost, stolen, or otherwise compromised, including discrepancies in data and reports, I will contact the Water Boards within 24-hours of discovery.

Please select your user role:


Discharger or
Legally Responsible Person

Duly Authorized Representative or
Approved Signatory

I certify that the above information is true and correct. By signing this registration form, I agree, on behalf of myself and County of Monterey Municipal Stormwater Permit to be bound by its terms.

Printed Name: Fernando Armenta

Title: Chair of the County of Monterey Board of Supervisors

Signature:  Date: 6/27/13
(Please sign in blue ink)

Mail completed form to:
SMARTS Registration
P.O. Box 1977
Sacramento, CA 95812



State Water Resources Control Board
NOTICE OF INTENT
 GENERAL PERMIT TO DISCHARGE STORM WATER
 ASSOCIATED WITH SMALL MS4s
 (WQ ORDER No. 2013-0001-DWQ)



WDID:

Discharger:

Type: County Agency

Name: County of Monterey Municipal Stormwater Permit

Contact Name: Robert Murdoch

Address: 168 West Alisal Street

Title: Public Works Director

Address 2: 2nd Floor

Phone #: 831-755-4800

City/State/Zip: Salinas CA 93901

Email: murdochr@co.monterey.ca.us

Billing:

Name: County of Monterey Municipal Stormwater Permit

Contact Name: Robert Murdoch

Address: 168 West Alisal Street 2nd Floor

Title: Public Works Director

Address 2: 2nd Floor

Phone #: 831-755-4800

City/State/Zip: Salinas CA 93901

Email: murdochr@co.monterey.ca.us

Additional Information:

Population: 62727

Traditional

Co Permittee : Yes

Waiver: No

RWQCB Jurisdiction:

Phone:

Email:

Certification:

Name:

Date:

Title: