

Permit Ownership Transfer Agreement

The Responsible Official (print name): _____

Previous Business Entity Known As: _____

Facility name: _____

AI # (Agency Interest Number) if known: _____

Mailing Address: _____

Presently covered under permit(s): _____

Wishes to relinquish and transfer responsibility & authorization for the permit(s) to

The Responsible Official (print name): _____

New Business Entity Known As: _____

Facility name: _____

Mailing Address: _____

Who agrees to accept all responsibility coverage, and liability pertaining to permit(s) listed above upon effective transfer occurring on (**Effective date of transfer**): _____

Relinquishing Responsible Official (**Current**): _____
Signature *Date*

Accepting Responsible Official (**Future**): _____
Signature *Date*