NOTIFICATION OF CHANGE FORM (NOC-1) FOR COMPANY NAME CHANGES, FACILITY NAME CHANGES, PERMIT TRANSFERS, OWNERSHIP CHANGES, AND/OR OPERATOR CHANGES (FOR ALL MEDIA)

Instructions and requirements for NOC-1 Form are located on Page 5.

NOTIFICATION OF:

☐ Permit Transfer  Date of Transfer _______
☐ Ownership Change  Date of Change _______
☐ Operator Change  Date of Change _______
☐ Company Name Change  Date of Change _______
☐ Facility Name Change  Date of Change _______

SITE INFORMATION

Agency Interest (AI) # ____________________________
Facility Name ________________________________
Location (use 911 address if applicable) _______________________________________________________________________
City ___________________________  Parish _______________

PERMIT INFORMATION  Please list all permit numbers regarding this facility (attach another page if necessary).

Air ____________________________  Solid Waste ____________________________
Water ____________________________  Hazardous Waste ____________________________
Biosolids ____________________________
Are all permits for this AI # being transferred?  ☐ Yes  ☐ No  (If No, attach explanation)

FOR COMPANY NAME CHANGE

New Company Name ________________________________
Previous Company Name ________________________________
Contact Name ________________________________
Contact Phone ________________________________
Email ________________________________
Mailing Address _______________________________________________________________________
City ___________________________  State ___________________________  Zip ________
FOR FACILITY NAME CHANGE

Previous Facility Name ____________________________________________________________

New Facility Name ______________________________________________________________

FOR PERMIT TRANSFERS, OWNERSHIP CHANGES, OR OPERATOR CHANGES

PREVIOUS INFORMATION

Previous Name ____________________________________________

Previous Contact Name ___________________________________

Previous Contact Phone ___________________________________

Previous Email ___________________________________________

Previous Mailing Address ___________________________________

City __________________________ State ______________ Zip _______

NEW INFORMATION

New Name ________________________________________________

New Contact Name _________________________________________

New Contact Phone _________________________________________

New Email ________________________________________________

New Mailing Address ________________________________________

City __________________________ State ______________ Zip _______

RESPONSIBILITY FOR EXISTING VIOLATIONS

Identify the party who will be responsible for all violations existing prior to the transfer including any potential fines for such past violations and for all outstanding fees and assessed penalties existing prior to the transfer of the permit:

Name __________________________________________________________

Address ______________________________________________________________________

City __________________________ State ______________ Zip _______

Signature of Previous Permit Holder _____________________________________________ Date __________

Printed/Typed Name and Title ___________________________________________________

Signature of New Permit Holder _________________________________________________ Date __________

Printed/Typed Name and Title ___________________________________________________
**ADDENDUM TO PERMIT APPLICATIONS per LAC 33:1.1701**

1. Does the company or owner have federal or state environmental permits identical to, or of a similar nature to, the permit for which you are applying in Louisiana or other states? (This requirement applies to all individuals, partnerships, corporations, or other entities who own a controlling interest of 50% or more in your company, or who participate in the environmental management of the facility for an entity applying for the permit or an ownership interest in the permit.)  
   □ Yes  □ No

   *If yes, list permits and other states below or attach another page if more space is needed.*

2. Do you owe any outstanding fees or final penalties to the Department?  
   □ Yes  □ No

   *If yes, explain below or attach another page if more space is needed.*

3. Is your company a corporation or limited liability company?  
   □ Yes  □ No

   *If yes, attach a copy of your company’s Certificate of Registration and/or Certificate of Good Standing from the Louisiana Secretary of State.*

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**PERMIT LIABILITY TRANSFER AGREEMENT**

Previous Business Entity Known As ________________________________________________________________

Previous Facility Name ________________________________________________________________

Previous Mailing Address ________________________________________________________________

  City __________________________ State ________________ Zip ________

Presently covered under permit(s): __________________________________________________________

*Relinquishes and transfers liability, responsibility, and coverage for the permit(s) to:*

New Business Entity Known As _____________________________________________________________

New Facility Name ________________________________________________________________

New Mailing Address ________________________________________________________________

  City __________________________ State ________________ Zip ________

*Who accepts all responsibility, coverage, and liability pertaining to permit(s) listed above upon effective transfer occurring on:*

  Effective date of transfer __________________________

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**FINANCIAL ASSURANCE per LAC 33:1.1909.C**

For Biosolids, Hazardous Waste, Solid Waste, and Water permits (regulated by the Public Service Commission) proof of financial assurance must be provided to LDEQ.

Does the Louisiana Public Service Commission regulate this facility?  
   □ Yes  □ No
CERTIFICATION

I, the undersigned certify, under provisions in Louisiana and United States law which provide criminal penalties for false statements, that to the best of my knowledge and belief formed after reasonable inquiry, the information submitted, including all attachments thereto are true, accurate and complete.

New Permit Liability Holder/Company Name

New Billing Address

City ________________ State ________________ Zip __________

Signature of New Responsible Official __________________________ Date __________

Printed/Typed Name and Title __________________________

Previous Permit Liability Holder/Company Name

Previous Billing Address

City ________________ State ________________ Zip __________

Signature of Previous Responsible Official __________________________ Date __________

Printed/Typed Name and Title __________________________

NOTE: If information and signatures are not obtainable from the previous owner, then the new owner must apply for a new permit. The previous owner has the option to request termination of the existing permit.

NOTE: Instructions and requirements for NOC-1 Form are located on Page 5.

NOTE: Please see new fee amounts on Page 5.
INSTRUCTIONS AND REQUIREMENTS FOR NOC-1 FORM
FOR COMPANY NAME CHANGES, FACILITY NAME CHANGES, PERMIT TRANSFERS, OWNERSHIP CHANGES, AND/OR OPERATOR CHANGES (FOR ALL MEDIA)

The NOC-1 form is to be submitted when a permit is transferred, a company’s name changes, a facility’s operator changes, or a facility’s name changes in accordance with LAC 33:I. Chapter 19. Submission of this form shall in no way constitute approval of the change request. The office will notify the requestor in writing of the decision regarding the change request. All information must be provided. Do not leave any sections blank. Use N/A if not applicable.

1. Prior to or no later than 45 days after a change has occurred, submit one completed and signed original NOC-1 Form and one copy for each facility (Agency Interest No.). List all permits under the agency interest number for all media. Note the different sections for permit transfers and/or company name changes or facility name changes. The “effective date of transfer” is the specific date of transfer of the permit responsibility, coverage, and liability between the previous and new permittee.

2. Submit Proof of Registration with the LA Secretary of State. If your company is a corporation or a limited liability company, attach a copy of your company’s Certificate of Registration and/or Certificate of Good Standing from the Louisiana Secretary of State. All documents must use the company name as it is specified with the Louisiana Secretary of State. To ensure that the proper name is on your form, please check the LA Secretary of State’s Corporation Database at: https://coraweb.sos.la.gov/CommercialSearch/CommercialSearch.aspx.

3. Submit payment. All payments made by check, draft, or money order shall be payable to LA Department of Environmental Quality. For electronic funds transfer (EFT), contact the LDEQ Office of Management and Finance. For online payments, see http://business.deq.louisiana.gov/. Submit fees as follows:

<table>
<thead>
<tr>
<th>Permit Type</th>
<th>Change Type</th>
<th>Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Air Permits</td>
<td>Company name change, transfer,</td>
<td>$ 500</td>
</tr>
<tr>
<td></td>
<td>ownership or operator change</td>
<td></td>
</tr>
<tr>
<td>Hazardous Waste Permits</td>
<td>Company or facility name change, transfer,</td>
<td>none</td>
</tr>
<tr>
<td></td>
<td>ownership or operator change</td>
<td></td>
</tr>
<tr>
<td>Solid Waste Permits</td>
<td>Company or facility name change</td>
<td>none</td>
</tr>
<tr>
<td></td>
<td>transfer, ownership or operator change</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Type I, IA, II, IIA</td>
<td>$ 1,650</td>
</tr>
<tr>
<td></td>
<td>• Type III, Beneficial Use</td>
<td>$ 413</td>
</tr>
<tr>
<td></td>
<td>• Waste Tire Processors</td>
<td>$ 125</td>
</tr>
<tr>
<td>Water Permits</td>
<td>Company or facility name change</td>
<td>none</td>
</tr>
<tr>
<td></td>
<td>transfer, ownership or operator change</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• General permit (LAG)</td>
<td>none</td>
</tr>
<tr>
<td></td>
<td>• Individual</td>
<td>10% of the calculated annual fee but not less than $ 380, excluding oyster fee</td>
</tr>
<tr>
<td></td>
<td>• LAJ Biosolids</td>
<td>none</td>
</tr>
</tbody>
</table>

Note: This form does not substitute for the HW-1 form.

If you would like assistance with Notification of Changes, please contact the Permit Application Administrative Review Group at 225-219-3292.

Completed package should be sent to:

Permits Application Administrative Review Group
Public Participation and Permit Support Division
Office of Environmental Services
LA Department of Environmental Quality
Post Office Box 4313
Baton Rouge, LA 70821-4313