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| [ Home ] | | | | | | | | **LOUISIANA DEPARTMENT OF ENVIRONMENTAL QUALITY**  **(LDEQ)**  **NOTIFICATION OF CHANGE FORM (NOC-1)**  **FOR**  **COMPANY NAME CHANGES, FACILITY NAME CHANGES, AND PERMIT TRANSFERS ASSOCIATED WITH OWNERSHIP AND/OR OPERATOR CHANGES**  **FOR A FACILITY WITH EFFECTIVE PERMIT(S)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NOTE: See Instructions and Requirements for the NOC-1 Form on page 5. The NOC-1 Checklist is located on page 8.  NOTE: This form is to be submitted for a company name change, a facility name change, or permit transfer(s) associated with a facility’s ownership and/or operator change in accordance with LAC 33:I. Chapter 19. This form ***MAY NOT*** be used for any other types of change notifications (for more information on non-transferrable permit types or activities see pages 6-7). | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| TYPE OF NOTIFICATION *Check all that apply* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
|  | | Company Name Change | | | | | | | | | | | (If Co. name change only, complete II-IV, VIII, X, and XI) | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | |  | |
|  | | Facility Name Change | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | | | | | | | | | | | Date of Change | | | | | | | | | |  | | | | | | |  | |
|  | | Ownership Change | | | | | | | | | | |  | | (mm/dd/yyyy) | | | | | | |  | |
|  | | Operator Change | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | |  | | | | | |  |  | |
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| 1. **SITE INFORMATION** | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| Facility Name | | | | | | |  | | | | | | | | | | | | | | | | | | | | | Agency Interest (AI) # | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | |
| Location *(use 911 address if applicable)* | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| City | | | | | | |  | | | | | | | | | | | | | | | | | | | | | Parish | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |  | |
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| 1. **PERMIT INFORMATION** *Please list all permit numbers regarding this facility (attach another page if necessary).* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| Air | | | | | |  | | | | | | | | | | | | | | |  | Solid Waste | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| Water | | | | | |  | | | | | | | | | | | | | | |  | Hazardous Waste | | | | | | | | | | | EPA ID | | | | | | |  | | | | | | | | | | | | | | | | | |  | |
| Biosolids | | | | | |  | | | | | | | | | | | | | | |  |  | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |  | |
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| Are all permits for this AI # being transferred? | | | | | | | | | | | | | | | | | | | |  |  | | **Yes  No** | | | | | | | | | | *(If No, attach explanation)* | | | | | | | | | | | | | | | | | | | | | | | | |  | |
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| 1. **FOR COMPANY NAME CHANGE** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| Previous Company Name | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| New Company Name | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| Contact Name | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| Contact Phone | | | | | | | | | ( ) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| Email | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| Mailing Address | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| City | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | State | | | | | | | |  | | | | | | | Zip | | |  | | | | | | | | | |  | |
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| 1. **FOR FACILITY NAME CHANGE** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| Previous Facility Name | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| New Facility Name | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
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| 1. **FOR PERMIT TRANSFER(S) ASSOCIATED WITH FACILITY OWNERSHIP AND/OR OPERATOR CHANGE** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| ***PREVIOUS INFORMATION*** | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| Previous Company Name | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| Previous Contact Name | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Previous Contact Phone | | | | | | | | | ( ) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Previous Email | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Previous Mailing Address | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| City | | | | | | | | |  | | | | | | | | | | | | | | | | | | State | | | | | | | | |  | | | | | | | Zip | | | | | |  | | | | | | | | |
| ***NEW INFORMATION*** | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | | | | | | | | |  | | |  | |
| New Company Name | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| New Contact Name | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| New Contact Phone | | | | | | | | | ( ) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| New Email | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| New Mailing Address | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| City | | | | | | | | |  | | | | | | | | | | | | | | | | | | State | | | | | | | | |  | | | | | | | Zip | | | | | |  | | | | | | | | |  | |
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| 1. **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. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ***NOTE: ORIGINAL SIGNATURES ARE REQUIRED. ELECTRONIC OR COPIED SIGNATURES WILL NOT BE***  ***ACCEPTED.*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| Name of Company or Individual | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| Mailing Address | | | | | | | | |  | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| City | | | | | | | | |  | | | | |  | | | | | | | | | | | | | State | | | | | | | | |  | | | | | | | Zip | | | | | |  | | | | | | | | |  | |
| ***PREVIOUS PERMIT HOLDER*** | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | | |  | | | | | |  | | |  | |
| Original Signature | | | | | | | | |  | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | Date | | | | | |  | | | | | | | | |  | |
| Printed/Typed Name | | | | | | | | |  | | | | | | | | | | | | | | | | | | Printed/Typed Title | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |
| ***NEW PERMIT HOLDER*** | | | | | | | | |  | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |
| Original Signature | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Date | | | | | |  | | | | | | | | |
| Printed/Typed Name | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | Printed/Typed Title | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |
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| 1. **ADDENDUM TO PERMIT APPLICATIONS PER LAC 33:I.1701** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A. 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.* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| B. 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.* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
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| C. 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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| 1. **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 | | | | | | |  | | | | | | | |
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| ***Who accepts all responsibility, coverage, and liability pertaining to permit(s) listed above upon***  ***effective transfer occurring on:*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Effective Date of Transfer | | | | | | | | | | | | | | | |  | | | | | | | | | | | *(Must match Date of Change in Section I)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
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| 1. **FINANCIAL ASSURANCE PER LAC 33:I.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 the LDEQ by the new owner or operator.  Does the Louisiana Public Service Commission regulate this facility?  **Yes  No** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1. **CERTIFICATION *NOTE: ORIGINAL SIGNATURES ARE REQUIRED. ELECTRONIC OR COPIED***   ***SIGNATURES WILL NOT BE ACCEPTED.*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| 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. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| ***PREVIOUS PERMIT LIABILITY*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| Previous Permit Liability Holder/Company Name | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| Previous Billing Address | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| City | | | | | | | | |  | | | | | | | | | | | | | | | | | State | | | | | | | | | |  | | | | | | | Zip | | | | | | | |  | | | | | | |
| Signature of Previous  Responsible Official | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Date | | | | | | | |  | | | | | | |
| Printed/Typed Name | | | | | | | | |  | | | | | | | | | | | | | | | | | | | Printed/Typed Title | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |
| ***NEW PERMIT LIABILITY*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| New Permit Liability Holder/Company Name | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| New Billing Address | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| City | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | State | | | | |  | | | | | | | Zip | | | | | | | |  | | | | | | |
| Signature of New Responsible Official | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Date | | | | | | | |  | | | | | | |
| Printed/Typed Name | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | Printed/Typed Title | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | |
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| **NOTE:** | | | | | | If information and original 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:** | | | | | | See *Instructions and Requirements for the NOC-1 Form* (page 5)**.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **NOTE:** | | | | | | See *LDEQ* *Permits and/or Registrations that Cannot be Transferred Using the NOC-1 Form* (page 6). | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **NOTE:** | | | | | | See *LDEQ* *Permits and/or Activities that Cannot be Transferred* (page 7). | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **NOTE:** | | | | | | Please see the *NOC-1 Checklist* (page 8). | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **NOTE:** | | | | | | Please review fee amounts (page 5). | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **NOTE:** | | | | | | The LDEQ will notify the requestor in writing by certified mail of the decision regarding the change request. ***It is very important that you accept certified mail from the LDEQ.*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

**INSTRUCTIONS AND REQUIREMENTS FOR NOC-1 FORM**

**FOR COMPANY NAME CHANGES, FACILITY NAME CHANGES, AND PERMIT TRANSFERS ASSOCIATED WITH FACILITY OWNERSHIP AND/OR OPERATOR CHANGES (FOR ALL MEDIA)**

The NOC-1 form is to be submitted for a company name change, a facility name change, or permit transfer(s) associated with a facility’s ownership and/or operator change in accordance with LAC 33:I. Chapter 19. Submission of this form shall in no way constitute approval of the change request. The LDEQ will notify the requestor in writing by certified mail 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.** 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:

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| --- | --- | --- | --- | --- | --- |
| Air Permits | Company name change, transfer, ownership or operator change | per permit | $ | 500 | |
| Hazardous Waste Permits | Company or facility name change, transfer, ownership or operator change | per permit | none | | |
| *NOTE: This form does not substitute for the HW-1 form; see HW-1 Notification (page 6).* | | | | |
| Solid  Waste Permits | Company or facility name change | per permit | none | | |
| Transfer, ownership or operator change for the solid waste permit type as indicated below: | | | | |
| * Type I, IA, II, IIA | per permit | $ | 2,650 | |
| * Type III, Beneficial Use | per permit | $ | 813 | |
| * Waste Tire Processors | per permit | $ | 125 | |
| Water Permits | Company or facility name change | per permit | none | |  |
| Transfer, ownership or operator change for the water permit type as indicated below: | | | | |
| * General permit (LAG) | per permit | none | | |
| * Individual | per permit | 10% of the calculated annual fee but not less than $ 380, excluding oyster fee | | |
| * LAJ Biosolids | per permit | none | | |
| *NOTE: Stormwater permits beginning with LAR04, LAR05 and LAR10 are not transferrable.* | | | | |

If you would like assistance with Notification of Changes, please contact the Permit Application Administrative Review (PAAR) Group at 225-219-3285.

Completed package should be sent to one of the following addresses:

*U.S. Mail* *Service Carrier or Hand-Delivery* Office of Environmental Services - PAAR Office of Environmental Services - PAAR

LA Department of Environmental Quality LA Department of Environmental Quality

Post Office Box 4313 602 N. 5th St.

Baton Rouge, LA 70821-4313 Baton Rouge, LA 70802

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| **LDEQ Permits and/or Registrations that Cannot be Transferred Using the NOC-1 Form** | | |
| **Radiation Permits and Licenses** | | Radiation permits and licenses are not processed by the Office of Environmental Services. Please complete the **Radiation Name or Ownership Change Form**, found on the Department's website at <https://deq.louisiana.gov/assets/docs/Forms/RAD-44-Name-Owner-Change-06.doc>. Return the completed form to the LDEQ Office of Environmental Compliance, Emergency and Radiological Services Division at P.O. Box 4312, Baton Rouge, LA 70821-4312 to transfer your radiation permit or license. |
| **Sewage Sludge Transporter Registrations** | | Please note that ownership changes for sewage sludge transporters cannot be executed using the NOC-1 Form. Please complete the **Sewage Sludge Transporter Notification Form (Form #7159)**. Please return the completed form to LDEQ Office of Environmental Services, Public Participation and Permit Support Division at P.O. Box 4313, Baton Rouge, LA 70821-4313. If you have any questions, call (225) 219-3213 or (225) 219-3521. The Sewage Sludge Transporter Notification Form is located on the Department's website at <https://deq.louisiana.gov/assets/docs/Water/Sewage_Sludge_Transporter_Notification_Form-7159.pdf> |
| **UST Registrations** | | UST Registrations are not processed by the Office of Environmental Services.  Please complete the UST Registration form, ***UST-REG*** (<https://deq.louisiana.gov/assets/docs/Land/UST/UST_REG_FORM.pdf>.), found on the Department's website. Return the completed form along with required fees to the LDEQ Office of Management and Finance, Financial Services Division at P.O. Box 4303, Baton Rouge, LA 70821-4303 to transfer your UST Registration. If you have any questions, contact Amy Smith at (225) 219-3702 or [Amy.Smith@LA.GOV](mailto:Amy.Smith@LA.GOV). |
| **Stage I and II Vapor Recovery System Registrations** | | Notifications of changes to registrations for Stage I and II Vapor Recovery Systems are not processed by the Office of Environmental Services. For change of ownership of these systems, please complete the form found on the Department’s website at <https://deq.louisiana.gov/resources/category/stage-II-vapor-recovery>. Please submit the completed form to LDEQ Office of Environmental Assessment, Air Planning and Assessment Division at P.O. Box 4314, Baton Rouge, LA 70821-4314. If you have any questions, call (225) 219-3574. |
| **HW-1 Notifications** | | HW-1 Notifications are not transferrable and changes to these notifications are not processed using the NOC-1 Form. You should immediately evaluate your notification status with respect to the Hazardous Waste notification requirements. If changes are required, please submit the ***Notification of Hazardous Waste Activity (HW-1)*** or the ***No Hazardous Waste Activity Certification*** form found on the Department’s website at <https://deq.louisiana.gov/page/hazardous-waste>. If you have questions or need additional information, contact Jennifer Williams at (225) 219-1352 or [Jennifer.Williams3@LA.GOV](mailto:Jennifer.Williams3@LA.GOV). |
| **Water Quality Certifications** | | Water Quality Certifications (WQC) changes are not processed using the NOC-1 form. If you have any questions or need additional information, contact Elizabeth Hill at (225) 219-3225 or [Elizabeth.Hill@LA.GOV](mailto:Elizabeth.Hill@LA.GOV). |
| **Waste Tire** **Generator Notifications** | | Waste Tire Generator Notifications cannot be transferred using the NOC-1 form. You should immediately evaluate your status with respect to the waste tire requirements. If required, please submit the Waste Tire Generator Form found on the Department's website at <https://www.deq.louisiana.gov/assets/docs/Solid-Waste/WasteTireGeneratorFormwithguidancerev03152017.pdf>. If you have questions or need additional information, contact the Waste Permits Division at (225) 219-2470. |
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| **LDEQ** **Permits and/or Activities that Cannot be Transferred** | | |
| **Solid Waste Generator ID Numbers** | Solid Waste Generator Identification Number changes and/or transfers cannot be processed using the NOC-1.You should immediately evaluate your status with respect to the Solid Waste Generator requirements. If changes are required, please submit the Solid Waste Notification Form found on the Department's website at <http://deq.la.gov/page/solid-waste>, or contact Kristin East at (225) 219-3244 or [Kristin.East@LA.GOV](mailto:Kristin.East@LA.GOV) if you have questions or need additional information. | |
| **Storm Water General Permits** | Authorizations to discharge under the LAR04, LAR05 and LAR10 general permits for storm water are not transferable. For change of coverage from one owner/operator to a different owner/operator, the new owner/operator must submit a Notice of Intent (NOI) located on the Department's website at <https://deq.louisiana.gov/page/lpdes-water-permits>. Following acceptance of operational control/liability by the new owner/operator, the previous owner/operator must submit a Notice of Termination (NOT), located on the Department's website at <https://deq.louisiana.gov/assets/docs/Permits/CSW-T.doc>. If you have any questions or require any additional information regarding storm water permits, contact Melissa Reboul or Debbie Bissett in the Water Permits Division at (225) 219-3181. | |
| **Biosolid General Permit**  **LAJ660000** | Authorization under the Sewage Sludge and Biosolids Use or Disposal General Permit LAJ660000 is not transferrable.  The LAJ660000 general permit is a self-implementing permit and covers LPDES permitted facilities that have sewage sludge pumped out or removed from a sanitary wastewater treatment works and sold, given away, and/or transported off-site for a fee or other consideration.  To obtain coverage under this permit, please print the permit from the Sewage Sludge and Biosolids webpage at <https://deq.louisiana.gov/page/sewage-biosolids>. If you have any questions or require any other information regarding sewage sludge and biosolids permits, contact Ronda Burtch at (225) 219-3213 or by email at [Ronda.Burtch@LA.GOV](mailto:Ronda.Burtch@LA.GOV). | |
| **Air Permit Exemptions** | Air Permit Exemptions are not transferable. You should immediately evaluate the air permitting needs for the applicable facility(ies) and act upon such needs accordingly. In accordance with LA R.S.30:2054(B)(2)(b)(ix) and LAC 33:III.501.B.2.d, if the air emissions from a facility are below the requisite levels, an air permit or exemption is not required, therefore LDEQ does not issue an individual exemption to each facility. Prior to increasing the potential to emit above the limits established in LAC 33:III.501.B.2.d, the owner/operator must apply for an air permit in accordance with LAC 33:III.Chapter 5. If the facility emits or has the potential to emit any air contaminant, please refer to the document entitled “Do I Need an Air Permit,” located on the Department’s website at <https://deq.louisiana.gov/page/do-i-need-an-air-permit>, to determine if this source is required to obtain an air permit. | |
| **Expired, Terminated, or Rescinded Permits** | Permits that are expired, terminated or rescinded are not transferable. You should immediately evaluate the permitting needs for your facility and act upon such needs accordingly. If the facility has a discharge to waters of the state, a water permit is required. If the facility emits or has the potential to emit any air contaminant, please refer to the document entitled “Do I Need an Air Permit,” located on the Department’s website at <https://deq.louisiana.gov/page/do-i-need-an-air-permit>, to determine if this source is required to obtain an air permit. | |
| **Facilities with No Active Permits** | If the Department has no record of an active, transferable permit for your facility, you should immediately evaluate all of your permitting needs for the facility and act accordingly. If the facility has a discharge to waters of the state, a water permit is required. If the facility emits or has the potential to emit any air contaminant, please refer to the document entitled “Do I Need an Air Permit,” located on the Department’s website at <https://deq.louisiana.gov/page/do-i-need-an-air-permit>, to determine if this source is required to obtain an air permit. | |

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| **NOTIFICATION OF CHANGE FORM (NOC-1) CHECKLIST**  **Applicants must submit an original & one (1) copy of all documents submitted unless otherwise noted.** | |
|  | An original completed NOC-1 Form ***with original signatures*** and one copy  (Notification of Change of Name/Ownership/Operator Form #7106\_r08) |
|  | A list of all eligible permit numbers associated with the facility’s(ies’) agency interest number(s) for all media (air, water, solid and hazardous waste)  (See Section III) |
|  | Agreement regarding assignment of responsibility for existing violations ***with original signatures***  (See Section VII) |
|  | Proof of registration with the **Louisiana Secretary of State** (Certificate of Good Standing) in accordance with LAC 33:I.1701  [*https://www.sos.la.gov/Pages/default.aspx*](https://www.sos.la.gov/Pages/default.aspx) *or*  <https://www.sos.la.gov/BusinessServices/SearchForLouisianaBusinessFilings/OrderDocumentsAndCertificates/Pages/default.aspx>  (See Section VIII) |
|  | Permit Liability Transfer Agreement Form  (See Section IX) |
|  | Proof of Financial Assurance as stated in the regulations for biosolids (individual permits only), solid waste, hazardous waste, and water permits regulated by the Public Service Commission, if applicable  (See Section X) |
|  | Certification Statement ***with original signatures***  (See Section XI) |
|  | Fees in the correct amount submitted to the Department via  **Check  Money Order  Electronic Funds Transfer**  *If outstanding fees are due by the new proposed owner, a permit transfer request will not be completed. Be advised that proper transfer of the permit must be complete in order to maintain coverage under the permit for the facility. Until the permit transfer is accomplished, the previous owner/operator maintains liability for any permit noncompliance that may occur. Failure to maintain accurate permit coverage for the facility could result in future enforcement actions.*  Contact the Billing Section at (225) 219-3865 for total fees due or email a request to  [\_DEQ-Invoices@LA.GOV](mailto:_DEQ-Invoices@LA.GOV).  (See page 5 for fees) |