



Department of Environmental Conservation

Application For Permit Transfer and Application for Transfer of Pending Application

NOTE: Please read ALL instructions before completing this application. Please TYPE or PRINT clearly in ink.

PART 1 - TRANSFEREE (New Owner/Operator/Lessee/Applicant) Completes:

1. List Permit Number(s) And Their Effective And Expiration Dates: List Pending Application Number(s):

2. Name Of Transferee: Telephone Number (Daytime): Transferee is a/an: (check all that apply)
Mailing Address: Email:
Post Office City, State, Zip Code: Taxpayer ID Number:

3. Name Of Facility/Project: 4. Facility Contact Name: Telephone Number (Daytime):
Location (or Street Address, P.O. City, State, Zip Code, if applicable): Mailing Address: Email:
Town / Village / City: County: Post Office City, State, Zip Code:

5. Has Work Begun On The Project? Yes No If "No," proposed starting date: Approximate completion date:
If there will be any modifications to the current or proposed operation or construction, the transferee must attach a statement specifying the details.

6. CERTIFICATION: This certifies that the Transferee seeks to be the legally responsible party for operations or project development either authorized by the permits identified above or proposed in applications identified above. The Transferee has a copy of the permit(s) and/or application(s) and understands and will comply with all conditions in the referenced permit(s) and supports the content of referenced application(s). Facility operations/project scope/discharges/emissions will remain the same as authorized or as proposed in pending applications. Further, I hereby affirm that under penalty of perjury that information provided on this form and all attachments submitted herewith is true to the best of my knowledge and belief. False statements made herein are punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law.
Printed Name and Title of Transferee
Signature of Transferee Date

PART 2 - TRANSFEROR (Present or Former Owner/Operator/Lessee/Applicant) Completes:

1. Name Of Transferor: Telephone Number (Daytime): If other than an individual, provide Taxpayer ID Number:
Mailing Address: Email:
Post Office City, State, Zip Code:

2. Name Of Facility/Project, if different from Facility Name in Part 1:

3. CERTIFICATION: This certifies that ownership, operation, or a lease for the facility identified in Part 1 of this form will be / was conveyed to the party identified as the Transferee on (date). I affirm that this conveyance includes the rights and obligations of the permits, approvals, or applications identified above.
Printed Name and Title of Transferor
Signature of Transferor Date

PART 3 - PERMIT TRANSFER VALIDATION SECTION - Department Of Environmental Conservation Completes:

- Transfer of permit approved, effective as of. Transferee subject to conditions of original permit, without exception.
Transfer of permit approved, with the following modifications or contingencies related to this Permit Transfer:

FOR DEC USE ONLY

- See attached revised permit page(s):
Transfer of application approved. See attached for additional information required.
Transfer denied, new application required. Please complete the enclosed permit application and return it to the undersigned Regional Permit Administrator at the address listed on the reverse side of this form.

NYSDEC PERMIT ADMINISTRATOR SIGNATURE DATE

copies to:

# Application for Permit Transfer and Application for Transfer of Pending Application

## General Instructions

This form is to be used for transferring valid permits and pending applications for permit from a present permit holder or applicant (Transferor) to another party taking responsibility as a permittee or applicant (Transferee).

Legally Responsible Party means a permittee lawfully accountable for undertaking a permitted action in accordance with the provisions and conditions of a permit, or an applicant lawfully accountable for the content of an application.

The Transferee (New Owner/Operator/Lessee/Applicant) must:

1. Complete Part 1 of this application form.
2. Have Part 2 of this applicant form completed by the Transferor (former Owner/Operator/Lessee/Applicant). If the information requested in Part 2 cannot be obtained, the Transferee must attach a statement giving the reason(s).
3. Submit completed application form to the Regional Permit Administrator, Division of Environmental Permits, at the appropriate office of the department (see map below).

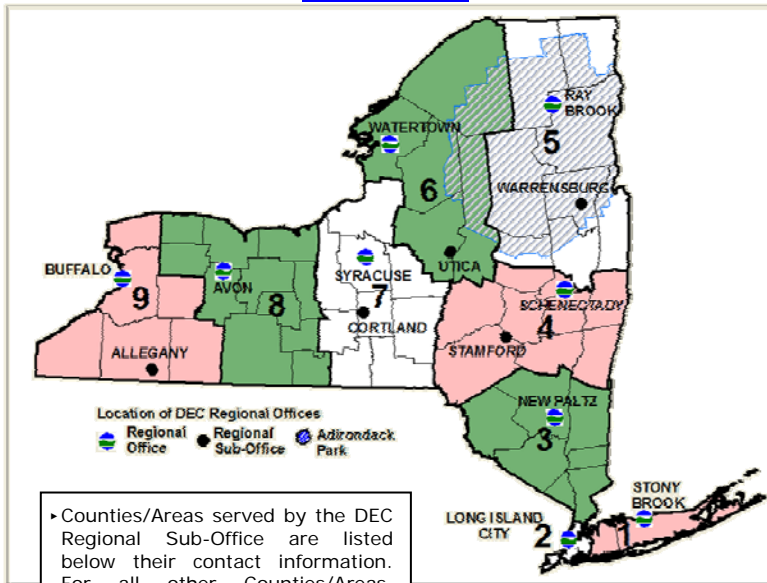
## Other Instructions

4. Applications by a Corporation shall be signed by a member of the board of directors or a "high managerial agent" of the corporation as that term is defined in the § 20.20 of the Penal Law; a Partnership by a general partner; a Sole Proprietorship by the proprietor; a Municipality or Public Corporation by the duly authorized principal executive officer; and a State Agency by a person duly designated by the commissioner or other agency head. Applications by a Limited Liability Company shall be signed by a member or manager in accordance with the LLC's articles of organization as filed with the Secretary of State.
5. If other than the owner makes application, written consent of the owner to use the property/facility must accompany the application.
6. The Transferee is responsible for obtaining any other required federal, state or local permits.
7. The department may request additional information in accordance with the Record of Compliance Enforcement Guidance Memorandum, or with regard to financial assurance guaranties.
8. If available, attach a copy of the first page of the permit(s) requested for transfer.

Contact the Regional Permit Administrator, Division of Environmental Permits, at the appropriate office of the department, as given below, for assistance regarding any of the above requirements.

### NYS Department of Environmental Conservation

[www.dec.ny.gov](http://www.dec.ny.gov)



#### NYS DEC REGION 4 Sub-Office

Regional Permit Administrator  
65561 State Highway 10  
Stamford, NY 12167-9503  
607-652-7741 fax: 607-652-2342  
email: [DEP.R4@dec.ny.gov](mailto:DEP.R4@dec.ny.gov)  
► For Delaware and Otsego Counties

#### NYS DEC REGION 7

Regional Permit Administrator  
615 Erie Blvd West, Room 206  
Syracuse, NY 13204-2400  
315-426-7438 fax: 315-426-7425  
email: [DEP.R7@dec.ny.gov](mailto:DEP.R7@dec.ny.gov)

#### NYS DEC REGION 5

Regional Permit Administrator  
PO Box 296  
1115 NYS Route 86  
Ray Brook, NY 12977-0296  
518-897-1234 fax: 518-897-1394  
email: [DEP.R5@dec.ny.gov](mailto:DEP.R5@dec.ny.gov)

#### NYS DEC REGION 7 Sub-Office

Regional Permit Administrator  
1285 Fisher Avenue  
Cortland, NY 13045-1090  
607-753-3095 ext. 233  
fax: 607-753-8532  
email: [DEP.R7@dec.ny.gov](mailto:DEP.R7@dec.ny.gov)  
► For Broome, Chenango, Cortland, Madison, Tioga and Tompkins Counties

#### NYS DEC REGION 5 Sub-Office

Regional Permit Administrator  
232 Golf Course Rd  
Warrensburg, NY 12885-1172  
518-623-1282 fax: 518-623-3603  
email: [DEP.R5@dec.ny.gov](mailto:DEP.R5@dec.ny.gov) ► For Fulton, Saratoga, Warren, and Washington, Counties

#### NYS DEC REGION 8

Regional Permit Administrator  
6274 East Avon - Lima Road  
Avon, NY 14414-9519  
585-226-5400 fax: 585-226-2830  
email: [DEP.R8@dec.ny.gov](mailto:DEP.R8@dec.ny.gov)

#### NYS DEC REGION 1

Regional Permit Administrator  
SUNY @ Stony Brook  
50 Circle Road  
Stony Brook, NY 11790-3409  
631-444-0365 fax: 631-444-0360  
email: [DEP.R1@dec.ny.gov](mailto:DEP.R1@dec.ny.gov)

#### NYS DEC REGION 3

Regional Permit Administrator  
21 South Putt Corners Road  
New Paltz, NY 12561-1620  
845-256-3054 fax: 845-255-4659  
email: [DEP.R3@dec.ny.gov](mailto:DEP.R3@dec.ny.gov)

#### NYS DEC REGION 2

Regional Permit Administrator  
1 Hunter's Point Plaza  
47-40 21st Street  
Long Island City, NY 11101-5407  
718-482-4997 fax: 718-482-4975  
email: [DEP.R2@dec.ny.gov](mailto:DEP.R2@dec.ny.gov)

#### NYS DEC REGION 4

Regional Permit Administrator  
1130 North Westcott Road  
Schenectady, NY 12306-2014  
518-357-2069 fax: 518-357-2460  
email: [DEP.R4@dec.ny.gov](mailto:DEP.R4@dec.ny.gov)

#### NYS DEC REGION 6

Regional Permit Administrator  
Dulles State Office Building  
317 Washington Street  
Watertown, NY 13601-3787  
315-785-2245 fax: 315-785-2242  
email: [DEP.R6@dec.ny.gov](mailto:DEP.R6@dec.ny.gov)

#### NYS DEC REGION 9

Regional Permit Administrator  
270 Michigan Avenue  
Buffalo, NY 14203-2915  
716-851-7165 fax: 716-851-7168  
email: [DEP.R9@dec.ny.gov](mailto:DEP.R9@dec.ny.gov)

#### NYS DEC REGION 6 Sub-Office

Regional Permit Administrator  
Utica State Office Building  
207 Genesee Street, Room 1404  
Utica, NY 13501-2885  
315-793-2555 fax: 315-793-2748  
email: [DEP.R6@dec.ny.gov](mailto:DEP.R6@dec.ny.gov)  
► For Herkimer, and Oneida Counties

#### NYS DEC REGION 9 Sub-Office

Regional Permit Administrator  
182 East Union, Suite 3  
Allegany, NY 14706-1328  
716-372-0645 fax: 716-372-2113  
email: [DEP.R9@dec.ny.gov](mailto:DEP.R9@dec.ny.gov)  
► For Allegany, Cattaraugus, and Chautauqua Counties