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| Minnesota Pollution Control Agency (MPCA), 520 Lafayette Road North, St. Paul, MN 55155-4194 | CSW subdivision registration formNPDES Construction Stormwater (CSW) Permit ProgramNational Pollutant Discharge Elimination System (NPDES) Doc Type: Subdivision Registration Form |

## Purpose:Transfer permit coverage for a ***portion*** of a site already covered under the NPDES Construction Stormwater General Permit to a new owner or contractor or both. You will be assigned a new permit number for your site under the parent permit. If the ***entire*** site needs to be transferred to a new owner or contractor, use the transfer/modification form found on the Minnesota Pollution Control Agency (MPCA) website at <https://www.pca.state.mn.us/water/construction-stormwater#permit-and-forms-591ec494>. Permit numbers can be found using the [MPCA’s permit search tool](https://cf.pca.state.mn.us/water/stormwater/csw/search.cfm). (Found on the MPCA website at <https://www.pca.state.mn.us/water/construction-stormwater>.)

**Submittal**: The person who certifies this form can email the completed form to csw.pca@state.mn.ususing “Subdivision Application” as the subject line. An auto-reply message will be sent upon the email being received. A manual confirmation email will be sent to the sender of the form via email when issuance is complete. There is no fee associated with this form.

**Questions:** Email the program at csw.pca@state.mn.usor call the Stormwater Hotline at 651-757-2119 or 800-657-3804 (non-metro only).

1. **Parent project information**

Enter the project name listed on the parent permit (C000xxxxx) and brief location information of that permit.

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|  | Project name: |       | **Parent permit number: C000** |   |  |   |  |   |  |   |  |   |
|  | Project location description: |       |
|  | City: |       | State: | MN | Zip code: |       | County: |       |

1. **Subdivision contact information**

Enter the name, email address, phone number, and mailing address of the subdivision project owner, alternate owner contact, contractor and alternate contractor contact information. If a contact is the same as another contact, specify which contact it is the same as (for example, when the contractor is the same as the owner, in the contact name for the contractor write “same as owner”.)

1. **New Owner (required)**

|  |  |
| --- | --- |
| Business/Firm name: |       |
| Last name: |       | First name: |       | Title: |       |
| Email address: |       | Telephone: | (     ) |       | Ext. |       |
| Mailing address: |       |
| City: |       | State: |       | Zip code: |       |

**Alternate contact (optional)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Last name: |       | First name: |       | Title: |       |
| Email address: |       | Telephone: | (     ) |       | Ext. |       |

1. **New Contractor (required if different than owner)**

|  |  |
| --- | --- |
| Business/Firm name: |       |
| Last name: |       | First name: |       | Title: |       |
| Email address: |       | Telephone: | (     ) |       | Ext. |       |
| Mailing address: |       |
| City: |       | State: |       | Zip code: |       |

**Alternate contact (optional)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Last name: |       | First name: |       | Title: |       |
| Email address: |       | Telephone: | (     ) |       | Ext. |       |

1. **Subdivision site description information**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Addition/Phase *(if applicable)*: |       | Lot(s): |       | Block: |       |
| Project location/address: |       |
| City: |       | State: |       | Zip code: |       |

*Feel free to list multiple lots and blocks per form. The site name for the subdivision will be based on the lots/blocks and description given on this form. Be advised that you cannot separate lots/blocks once applied for and all must be complete and stabilized as a whole to terminate.*

Certification

*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 gathered and evaluated the information submitted. I certify that 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 civil and criminal penalties.*

*I also certify under penalty of law that I have read, understood, and accepted all terms and conditions of the National Pollutant Discharge Elimination System (NPDES)/State Disposal System (SDS) General Stormwater Permit Construction Activity (MN R100001) that authorizes stormwater discharges associated with the construction site identified on this form.*

*By signing my name below, I certify the above statements to be true and correct, to the best of my knowledge, and that this information can be used for the purpose of processing this form.*

|  |  |  |
| --- | --- | --- |
| **Parent Permit Owner authorized signature (required)** |  |  |
| Name: |       |  |  |  |
| Company name: |       |  |  |  |
| Signature: |  |  |  |  |
| Date (mm/dd/yyyy): |  |  |  |  |

|  |  |  |
| --- | --- | --- |
| **New Subdivision Owner authorized signature (required)** |  | **New Subdivision Contractor authorized representative *(required if different than subdivision owner)*** |
| Name: |       |  | Name: |       |
| Company name: |       |  | Company name: |       |
| Signature: |  |  | Signature: |  |
| Date (mm/dd/yyyy): |  |  | Date (mm/dd/yyyy): |  |