## STORM WATER POLLUTION PREVENTION PLAN

## Typical Residential Lot Project Owner\_\_\_\_ Site Address\_\_\_\_\_ Salina, Kansas 67401

## **CONTRACTOR'S CERTIFICATION and DELEGATION**

I certify under penalty of law, that I understand the terms and conditions of the National Pollutant Discharge Elimination System (NPDES) Construction General Permit (CGP) that authorizes the storm water discharges associated with industrial activity from the construction site identified as part of this Certification. I understand that I am legally required under the Clean Water Act, to ensure compliance with the terms and conditions of NPDES storm water CGP and this Storm Water Pollution Prevention Plan (SWPPP).

I understand that I am fully responsible for all subcontractors who perform work activities on the construction site, to comply with all provisions and requirements of the NPDES storm water CGP and this SWPPP.

Contractor :	
Authorized Representative:	
Title:	
Address:	
Signature, Date:	
As Contractor, I have delegated SWPPP compliance and inspection responsibilities tring individual for the duration of construction activities for which this company is uct with this project.	
Contractor SWPPP Representative:	
Title:	
Signature, Date:	
Phone:	