

**Withdrawal of Registration/Coverage Under the
General Discharge (GD) Permit for Animal Feeding Operation (AFO)**

I, _____, am the current permittee for the following AFO:

Facility/Operation Name: _____

Facility/Operation Location/Address: _____

City _____ County: _____ State _____ Zip code _____

Registration Number: _____

I wish to withdraw my Notice of Intent for coverage under the AFO GD Permit because:

I have sold/leased the facility/operation on _____ (date) to:

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone No.: _____

I no longer raise animals as of _____ (date), but still grow crops at this location.

I no longer have the number of animals necessary to qualify me as a Maryland Animal Feeding Operation (MAFO) or Concentrated Animal Feeding Operation (CAFO) as of _____ (date) at the referenced location.

Other: (include end date) _____

Signed: _____ **Date:** _____

PRINT: Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone No.: _____

Mail to:

Maryland Department of the Environment
Land Management Administration, Waste Diversion and Utilization Program
1800 Washington Boulevard, Suite 610, Baltimore, Maryland 21230-1719