



Notice of Intent (NOI) for Storm Water Discharges Associated with Construction Activity Under the Construction General Permit (CGP) UPDES General Permit No. UTRC00000

NOI

Permit Information

Master Permit Number: UTRC00000
UPDES ID: UTRC03666
State/Territory to which your project/site is discharging: UT
Is your project/site located on federally recognized Indian Country Lands? No
Which type of form would you like to submit? Notice of Intent (NOI)
Have stormwater discharges from your project/site been covered previously under an UPDES permit? No
Has a Stormwater Pollution Prevention Plan (SWPPP) been prepared in advance of filling this NOI, as required? Yes

Owner/Operator Information

Owner Information

Owner: Osprey Ranch LLC
Status of Owner: Private
Owner Mailing Address:
Address Line 1: 3718 N Highway 158
Address Line 2:
ZIP/Postal Code: 84310
City: Eden
State: UT

Owner Point of Contact Information

First Name Middle Initial Last Name: John Lewis
Title: Owner
Phone: 801-430-1507 Ext.:
Email: tlew1220@yahoo.com

Operator Information

Is the Operator Information the same as the Owner Information? No
Operator: Rivers Edge Excavating, LLC
Operator Mailing Address:
Address Line 1: 3602 E. 3500 N.
Address Line 2:
ZIP/Postal Code: 84310
City: Liberty
State: UT

Operator Point of Contact Information

First Name Middle Initial Last Name: Colby Rhees
Title: Excavator
Phone: 801-710-6038 Ext.:
Email: riversedgeex@gmail.com

NOI Preparer Information

This NOI is being prepared by someone other than the certifier.

Project/Site Information

Project/Site Name: Osprey Ranch
Project Number:
Project/Site Address:
Address Line 1: 1385 N Highway 158
Address Line 2:
ZIP/Postal Code: 84310
County or Similar Division: Weber
City: Eden
State: UT

48
49
50
51
52
53
54
55
56
57
58
59
60
61
62
63
64
65
66
67

Active
Active
Active
Active
Active
Active
Active
Active
Active
Active
Active
Active
Active
Active
Active
Active
Active
Active
Active

Certification Information

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. 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 have no personal knowledge that the information submitted is other than true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. Signing an electronic document on behalf of another person is subject to criminal, civil, administrative, or other lawful action.

Certified By: Taylor Lewis

Certifier Title: Development Assistant

Certifier Email: taylor@wolfcreekresort.com

Certified On: 10/11/2021 5:24 PM ET