

Letter of Withdrawl from AFO Program

Send to: MDE, LMA, 1800 Washington Blvd., Suite 610, Baltimore, MD 21230-1719

I am the person responsible for the operation located at:

Name of Operation: _____ AI # _____

Address: _____

City: _____ State: _____ Zip Code: _____

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

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

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone No.: _____

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

I no longer have the number of animals necessary to qualify me as a MAFO/CAFO as of _____ (date) at the referenced address.

Other: (include end date) _____

Sincerely,

Signed: _____ **Date:** _____

PRINT: Name: _____

Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Telephone No.: _____