Notice of Intent for the Offshore Subcategory of the Oil and Gas Extraction Point Source Category for the Western Portion of the Outer Continental Shelf of the Gulf of Mexico (GMG290000)

U.S. EPA Region 6 Offshore General Permits Mail Code 6EN-WC1445 Ross Ave., Suite 1200 Dallas, TX 75202-2733

Submission of this completed Notice of Intent (NOI) constitutes notice that the entity in Section B intends to be authorized to discharge pollutants to Federal waters of the Gulf of Mexico seaward of the outer boundary of the territorial seas offshore of Louisiana and Texas (77 Fed. Reg. No. 196, p. 61605, October 10, 2012, http://www.epa.gov/region6/water/npdes/genpermit/gmg290000final/gmg290000finalpermit2012.pdf) www.epa.gov/region6/water/npdes/genpermit/ . Submission of the NOI also constitutes notice that the party identified in Section B of this form has read, understands, and meets the eligibility conditions in the Regulated Entities section of the Final General Permit for the above mentioned permit and agrees to comply with all applicable terms and conditions of this General Permit. In order to be granted coverage, all information required on this form must be completed unless designated as optional. Please read and make sure you comply with all permit requirements.

You must look up your NPDES ID and confirm the Permit Name before proceeding with this form.

NPDES ID *	Organization Formal Name *
GMG29 0161	Tennessee Gas Pipeline

☒ Confirm NPDES ID: GMG290161 / Permit Name: TENNESSEE GAS PIPELINE CO.

Reason for Submission *

- ○ Change operator legal name and address
- ○ Add structures
- ○ Change structure information
- ◉ Delete structures
- ○ Add limit set(s) for an existing permitted feature
- ○ Delete limit set(s) from an existing permitted feature

Delete Structures

Permitted Feature ID *	Reason for Deletion *	
0010	Project has been completed; no longer need to discharge at this location.	Delete Row
0011	Project has been completed; no longer need to discharge at this location.	Delete Row

Add Row

Certification Information

Certifier E-Mail *: Redacted

Form Action *: Approve

Digital Signature Acknowledgement

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 person 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 fine and imprisonment for knowing violations.