

# Electronic Signature Agreement Form

**ESAF**

Washington State Department of Ecology  
Water Quality Program

Headquarters: (360) 407-7097  
Web site: <https://ecology.wa.gov/WQPermits>

For Ecology Use Only		Date Received:	
Form	Reviewed	Entered	Verified
ESAF			

## 1. Facility Information

If you are applying for multiple facilities/permits, please include a list containing the site location information and permit numbers for all requested facilities/permits.

Site/Facility Name: Fishing Vessel Owner's Marine Ways, Inc  
Site Location Address: 1511 W. Thurman  
City/State/Zip: Seattle, Wa 98119  
Permit Number: WA0031062

**RECEIVED**  
OCT 22 2020

**DEPARTMENT OF ECOLOGY**

## 2. Electronic Signature Information

Role:  Facility Signer  Facility Coordinator

Signature Account User Name: Earth 1511  
Full Name: James Christopher Fugere  
Work Mailing Address: 1511 W. Thurman  
City/State/Zip: Seattle, Wa 98119  
Work Phone No. (Ext): 206-601-9610  
Work Email Address: jfugere@fvo.biz

## 3. Proof of Affiliation

Please include a copy of one of the following documents, with your name on the document, with your ESAF to prove your association with the facility-(ies).

- Your permit's letter of coverage
- Your permit's cover sheet
- A previously submitted DMR
- A correspondence from Ecology that has both the facility name and permit number on the same page
- Signature authority delegation letter signed by the permittee (responsible official).

## 4. Electronic Signature Agreement and Consent (Required)

By completing and submitting this form to Ecology, I agree to follow the rules and procedures governing the Electronic Signature account. I also agree that the reports and documents I submit under my Electronic Signature will be used as the corresponding paper report would. I want to submit the following report(s) or document(s) using WQWebPortal with an electronic signature.

Discharge Monitoring Reports/Submittals  Notice of Intent (Permit Applications)  Certificate of No Exposure

## 5. WQWebPortal Application Statement

All submittals to the Department of Ecology under this WQWebPortal application are subject to the following certification, as required by federal and state regulations:

*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 gather and evaluate the information submitted. The information submitted is, to the best of my knowledge and belief, true, accurate, and complete and I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.*

<p><b>I agree that I will:</b></p> <ul style="list-style-type: none"> <li>• Protect my Electronic Signature account, which includes my answers to the verification questions and my password;</li> <li>• Review the content and meaning of my submitted Annual Reports and Notifications;</li> <li>• Within 24 hours of discovery, report to Ecology if:             <ul style="list-style-type: none"> <li>○ My Electronic Signature account is lost, stolen or used by someone else;</li> <li>○ There is any difference between the information I submitted and the information displayed in WebDMR;</li> <li>○ My role as a signer for this organization changes.</li> </ul> </li> </ul> <p>Agree: <u>JF</u> (initial here)</p>	<p><b>I agree that I will not:</b></p> <ul style="list-style-type: none"> <li>• Let anyone else use my Electronic Signature account.</li> </ul> <p>Agree: <u>JF</u> (initial here)</p>
--	--

I, James Fugere (print Electronic Signer's name), understand that:

1. My electronic signature is legally the same as my handwritten signature for the purpose of compliance with the relevant environmental regulations;
2. A failure to timely notify Ecology of a possible misuse of my Electronic Signature account may result in my liability for the information submitted;
3. There are significant penalties for submitting false information, including possible fines and imprisonment, related to the federal Department of Justice and federal environmental program;
4. I will be asked to verify that I am following the rules outlined in this agreement when I electronically submit documents.

*(Signature of the Responsible Official)* This form cannot be processed without a handwritten signature.

  
 Electronic Signer's Signature  
James Fugere  
 Name (print or type)

10/20/2020  
 Date  
Purchase Agent  
 Title

*(Signature of the Permittee or Responsible Official)* This form cannot be processed without a handwritten signature.

I, DAN PAYNE (insert name of permittee or responsible official) acknowledge that the individual named above works at/for Fishing Vessel Owners Marine Ways, Inc (insert site/facility name) and is authorized to submit documents on the site's/facility's behalf. I understand that I will be contacted by Ecology to validate the account holder's employment at the site/facility name listed above.

  
 Signature  
DAN PAYNE  
 Name (print or type)

10/20/2020  
 Date  
CEO, PRESIDENT  
 Title

**Note:** You may skip this section if the responsible official has written, signed, and attached a delegation letter to this form or if the responsible official completes this form.

*If you need this document in a version for the visually impaired call the Water Quality Program at 360-407-6401. Persons with hearing loss, call 711 for Washington Relay Service. Persons with a speech disability, call 877-833-6341.*

I, Dan Payne (insert name of permittee or responsible official) acknowledge that James Fugere (person being assigned) is authorized to be an administrator on the site's/facility's behalf. I understand that I will be contacted by Ecology to validate the account holder's employment at the site/facility name listed above.

  
 \_\_\_\_\_  
 Signature

10/20/2020  
 \_\_\_\_\_  
 Date

Dan Payne  
 \_\_\_\_\_  
 Name (print or type)

CEO, PRESIDENT  
 \_\_\_\_\_  
 Title

**Note:** You may skip this section if the responsible official has written, signed, and attached a delegation letter to this form, if the responsible official completes this form, or if the responsible official is not assigning a person to the administrator role.

\*Mail the signed electronic signature agreement & additional document(s) to one of the following Ecology offices:

*Stormwater Permit Facilities – Industrial and Construction Stormwater*

*Major Industrial Unit*

**Washington Department of Ecology  
 Water Quality Program Stormwater IT  
 PO Box 47699  
 Olympia, WA 98504-7699  
 360-407-7097**

**Washington Department of Ecology  
 Solid Waste Management Program  
 Industrial Section  
 ATTN: Ewa Kotwicka  
 PO Box 47600  
 Olympia, WA 98504-7600  
 360-407-6945**

For all other permits, please contact one of the follow offices:

*Clallam, Clark, Cowlitz, Grays Harbor, Jefferson, Mason, Lewis, Pacific, Pierce, Skamania, Thurston, and Wahkiakum counties*

*Adams, Asotin, Columbia, Ferry, Franklin, Garfield, Grant, Lincoln, Pend Oreille, Spokane, Stevens, Walla Walla, and Whitman counties*

**Washington Department of Ecology  
 Water Quality Program - SWRO  
 PO Box 47775  
 Olympia, WA 98504-7775  
 360-407-6300**

**Washington Department of Ecology  
 Water Quality Program - ERO  
 N. 4601 Monroe  
 Spokane, WA 99205-1295  
 509-329-3400**

*Benton, Chelan, Douglas, Kittitas, Klickitat, Okanogan, and Yakima counties*

*Island, King, Kitsap, San Juan, Skagit, Snohomish, and Whatcom counties*

**Washington Department of Ecology  
 Water Quality Program - CRO  
 1250 W ALDER ST  
 UNION GAP WA 98903-0009  
 509-575-2490**

**Washington Department of Ecology  
 Water Quality Program - NWRO  
 ATTN: Chris Smith  
 3190 - 160th Ave. SE  
 Bellevue, WA 98008-5452  
 425-649-7000**