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MAY 09 2022

Department of Ecology
Eastern Washington Office

7. Person to contact who is familiar with the information contained in this application:

Name Katharine Cruz Title Lead Engineer
Telephone number 281-380-7454 Fax number _____

8. Check One:

☐ **Permit renewal** (including renewal of temporary permits authorized by RCW 90.48.200)

Does this application request a greater amount of wastewater discharge, a greater amount of pollutant discharge, or a discharge of different pollutants than specified in the last permit application for this facility? ☐ YES ☐ NO

For permit renewals, the current permit is an attachment, by reference, to this application.

☐ **Permit modification**

☐ **Existing
unpermitted discharge**

☒ **Proposed discharge**

Anticipated date of discharge: 7/1/2022

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. 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 am aware that there are significant penalties for submitting false information, including the possibility of a fine and/or imprisonment for knowing violations.

Signature* [Signature] Date 5/3/2022 Title CTO
Printed name Thomas Feldman

*Applications must be signed as follows: Corporations, by a principal executive officer of at least the level of vice-president; partnership, by a general partner; sole proprietorship, by the proprietor. If these titles do not apply to your organization, the person who makes budget decisions for this facility must sign the application.

The application signatory may delegate signature authority for submittals required by the permit, such as monthly reports, to a suitable employee. You can delegate this authority to a qualified individual or to a position, which you expect to fill with a qualified individual. If you wish to delegate signature authority, please complete the following:

Signature of delegated employee [Signature] Date 5/3/2022 Title or function at the facility Lead Engineer - Moses Lake
Printed name Katharine Cruz