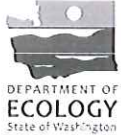


Electronic Signature Agreement Form

ESAF

Washington State Department of Ecology Water Quality Program

Headquarters: (360) 407-7097
Web site: www.ecy.wa.gov/programs/wq

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

1. Site Location 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: SeaCast Arlington LLC
Site Location Address: 18410 63rd Avenue N.E.
City/State/Zip: Arlington, Washington 98223
Permit Number: ST0501338

2. Electronic Signer Contact Information

Role: ☒ Facility Signer ☒ Facility Coordinator

Signature Account User Name: jerrymccaslin
Full Name: George (Jerry) McCaslin
Work Mailing Address: 6130 31st Avenue N.E.,
City/State/Zip: Marysville, WA 99271
Work Phone No. (Ext): (360) 386-1628
Work Email Address: jerrym@seacast.com

3. Proof of Identity

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 Certification Statement

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.

5. Clean Water Act Certification 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.

RECEIVED**MAR 10 2023****DEPARTMENT OF ECOLOGY**

6. Certification Statement

I agree that I will:

- Protect my Electronic Signature account, which includes my answers to the verification questions and my password;
- Review the content and meaning of my submitted Annual Reports and Notifications;
- Within 24 hours of discovery, report to Ecology if:
 - My Electronic Signature account is lost, stolen or used by someone else;
 - There is any difference between the information I submitted and the information displayed in WebDMR;
 - My role as a signer for this organization changes.

Agree: GGM (initial here)

I agree that I will *not*:

- Let anyone else use my Electronic Signature account.

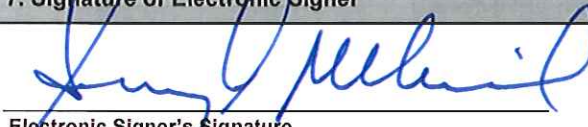
Agree: GGM (initial here)

I, George (Jerry) McCaslin (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.

7. Signature of Electronic Signer

This form cannot be processed without a handwritten signature.



Electronic Signer's Signature

George (Jerry) McCaslin

Name (print or type)

March 3rd, 2023

Date

Corporate Environmental Health & Safety Manager

Title

8. Signature of Permittee (Responsible Official)

This form cannot be processed without a handwritten signature.

I, Michael Robins (insert name of permittee or responsible official) acknowledge that the individual named above works at/for SeaCast, 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

Michael Robins

Name (print or type)

March 3rd, 2023

Date

President, SeaCast Inc.

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.

9. Assign Administrator**This section cannot be processed without a handwritten signature.**

I, Michael Robins (insert name of permittee or responsible official) acknowledge that George (Jerry) McCaslin (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

March 3rd, 2023

Date

Michael Robins

Name (print or type)

President, SeaCast Inc.

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.

*Due to COVID and limited access to the office, we are accepting scanned Electronic Signature Agreement Forms (ESAF). When it is safe and you are able, please mail the original signed ESAF to Ecology for our official records.

*Stormwater Permit Facilities – Industrial
and Construction Stormwater*

*Major Industrial Facilities (NPDES and
State Waste Discharge Permits)*

Washington Department of Ecology
Water Quality Program Stormwater IT
PO Box 47699
Olympia, WA 98504-7699
360-407-7097
wqwebportal@ecy.wa.gov

Washington Department of Ecology
Solid Waste Management Program
Industrial Section
ATTN: Ewa Kotwicka
PO Box 47600
Olympia, WA 98504-7600
360-407-6945
WQWebDMR-Industrial@ecy.wa.gov

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

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

Washington Department of Ecology
Water Quality Program - SWRO
PO Box 47775
Olympia, WA 98504-7775
360-407-6300
WQWebDMR-SWRO@ecy.wa.gov

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

Washington Department of Ecology
Water Quality Program - ERO
4601 N Monroe
Spokane, WA 99205-1295
509-329-3400
WQWebDMR-ERO@ecy.wa.gov

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

Washington Department of Ecology
Water Quality Program - CRO
1250 W Alder St
Union Gap, WA 98903-0009
509-575-2490
WQWebDMR-CRO@ecy.wa.gov

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

Washington Department of Ecology
Water Quality Program - NWRO
ATTN: Chris Smith
PO Box 330316
Shoreline, WA 98133-9716
206-594-0169
WQWebDMR-NWRO@ecy.wa.gov



STATE OF WASHINGTON
DEPARTMENT OF ECOLOGY

Northwest Region Office
PO Box 330316, Shoreline, WA 98133-9716 • 206-594-0000

January 12, 2023

Michael Robins, President
SeaCast Arlington LLC
18410 63rd Avenue NE
Arlington, WA 98223

Re: State Waste Discharge Permit Issuance, Permit No. ST0501338

Dear Michael Robins:

Under Chapter 90.48 RCW Water Pollution Control Laws, the enclosed State Waste Discharge Permit No. ST0501338 is being issued to SeaCast Arlington LLC located at 18410 63rd Avenue NE in Arlington, WA. This permit satisfies the requirements of state laws.

The permit authorizes SeaCast Arlington LLC, the Permittee, to discharge wastewater to the City of Arlington Water Reclamation Facility subject to the terms and conditions of the permit.

The Department of Ecology, in response to the passage of Initiative 97 in 1988, has adopted a regulation to recover costs associated with issuing and administering wastewater discharge permits (Chapter 173-224 WAC). The annual fee for industrial discharges is computed according to the permit fee schedules contained in WAC 173-224-040. Ecology will notify permit holders of fee charges by mailed billing statements. Failure to pay the applicable permit fee may result in the suspension or revocation of the permit, and could result in the issuance of civil penalties or actions to enjoin the activity under the permit.

You have the right to appeal this permit within thirty (30) days upon receipt of this document. Complete details about appealing the permit are in Appendix B of the permit fact sheet. Pursuant to chapter 43.21B RCW, your appeal must be filed with the Pollution Control Hearings Board, and served on the Department of Ecology, within thirty (30) days of the date of your receipt of this document.

Your appeal must be filed with:

The Pollution Control Hearings Board
P.O. Box 40903
Olympia, Washington 98504-0903

Your appeal must also be served on:

The Department of Ecology
Appeals Coordinator
P.O. Box 47608
Olympia, Washington 98504-7608.



Michael Robins, President
SeaCast Arlington, LLC
Page 2

In addition, please send a courtesy copy of your appeal to:

Maia Hoffman
Department of Ecology
Northwest Regional Office
PO Box 330316
Shoreline, WA 98133-9716

If at any time during the term of this permit a question should arise regarding the permit or discharge, or if there is a significant change in the discharge or operation, please contact Maia Hoffman at (425) 507-5681 or by email at maia.hoffman@ecy.wa.gov.

Sincerely,



Rachel McCrea
Water Quality Section Manager
Northwest Region Office

Enclosures

By Certified Mail: 9171 9690 0935 0214 2643 70

Ecc: Jerry McCaslin, SeaCast Arlington LLC, jerrym@seacast.com
James Kelly, City of Arlington Public Works Dept, jkelly@arlingtonwa.gov
WQ Permit Fee Unit, wqfee_unit@ecy.wa.gov
Maia Hoffman, Permit Manager, maia.hoffman@ecy.wa.gov
Chris Smith, Compliance Specialist, chris.smith@ecy.wa.gov
PARIS: ST0501338; SeaCast Arlington LLC



Washington Department of Ecology

Electronic Submission Cover Letter



WQWebDMR - Permit# ST0007380 - DMR Submission Id: 1862981 - 2/20/2023 4:19:50 PM

Company Name	Signer Name	System Name
SeaCast, Inc.	George McCaslin	WQWebPortal

Attachments:

Document Name Or Description	Document Name
Submitted Copy of Record for SeaCast Inc.	Copy of Record SeaCastInc. Monday February 20 2023

Attestation Agreed to at Signing:

I certify I personally signed and submitted to the Department of Ecology an Electronic Signature Agreement. I understand that use of my electronic signature account/password to submit this information is equal to my written signature. I have read and followed all the rules of use in my Electronic Signature Agreement. I believe no one but me has had access to my password and other account information.

I further certify: I had the opportunity to review the content or meaning of the submittal before signing it; and to the best of my knowledge and belief, the information submitted is true, accurate, and complete. I intend to submit this information as part of the implementation, oversight, and enforcement of a federal environmental program. I am aware there are significant penalties for submitting false information, including possible fines and imprisonment.

For Ecology Use Only



S1uztZtWkIgZVs4hFnaD7wXT/phzM
+xW/RVvzpnIqVCand7p5KKT3jqfthj0M/6Kg4cyssqNIIEvHVxzD81uZNnz9MjJ41dvZTry5h9Ug=