



## Water Quality Program

### Permit Submittal Electronic Certification

**Permittee:** WSU ENVIRONMENTAL HEALTH SERV

**Permit Number:** ST0005362

**Site Address:** AIRPORT RD & FARM WAY  
Pullman, WA 99164-1172

**Submittal Name:** Operations Maintenance Manual Annual Review Confirmation

**Version:** 1

**Due Date:** 6/15/2023

**Comments:** The O&M Manual was reviewed and revised on May 23, 2023. There were no revisions requiring submittal to Ecology for approval per S4.A.a.3.

*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 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.*

Gene Patterson

5/23/2023 12:01:55 PM

Signature

Date