

# 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](http://www.ecy.wa.gov/programs/wq)

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

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.

**OCT 10 2023**

Site/Facility Name: Guemes Channel Holdings, LLC  
Site Location Address: 3100 Oakes Avenue  
City/State/Zip: Anacortes, WA 98211  
Permit Number: WA0501491

**DEPARTMENT OF ECOLOGY**

Role: ☒ Facility Signer ☒ Facility Coordinator

Signature Account User Name: \_\_\_\_\_  
Full Name: Shawn Hiday  
Work Mailing Address: 3100 Oakes Avenue  
City/State/Zip: Anacortes, WA 98211  
Work Phone No. (Ext): 1-360-298-6045  
Work Email Address: shawn.hiday@stabbertmaritime.com

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).

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.

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>SLH</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>SLH</u> (initial here)</p>
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- I, Shawn Hiday (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.

This form cannot be processed without a handwritten signature.

Shawn Hiday  
Electronic Signer's Signature

9/28/2023  
Date

Shawn Hiday  
Name (print or type)

Storm Water Admin  
Title

This form cannot be processed without a handwritten signature.

I, Kelly Allison (insert name of permittee or responsible official) acknowledge that the individual named above works at/for Cruces Channel Holdings, LLC (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]  
Signature

9/29/2023  
Date

Kelly Allison  
Name (print or type)

CEO  
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.

This section cannot be processed without a handwritten signature.

I, Kelly Allison (insert name of permittee or responsible official) acknowledge that  
Shawn Hiday (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

Name (print or type)

Date

Title

Kelly Allison

9/29/2023

CFO

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

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

Major Industrial Facilities (NPDES and  
State Waste Discharge Permits)

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  
509-675-2490  
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



# Washington State Department of Ecology Discharge Monitoring Report (DMR)

Permit Number: WA0501491

Facility County: Skagit

Monitoring Period: 04/01/2023 - 06/30/2023

Permittee: Guemes Channel Holdings LLC

Receiving Waterbody:

Outfall: MR1 - Marine Railway 1

Version: 1

Week	Monitoring Point	Chromium Total Micrograms/L (ug/L) Quarterly Grab	Copper Total Micrograms/L (ug/L) Quarterly Grab	Iron Total Micrograms/L (ug/L) Quarterly Grab	Lead Total Micrograms/L (ug/L) Quarterly Grab	Zinc Total Micrograms/L (ug/L) Quarterly Grab	NWPHDX Diesel (NWPHDX) (ug/L) Micrograms/L (ug/L) Quarterly Grab	Oil & Grease Ves/No Once per defined event Visual Observation	Solids (Residue) Total suspended (TSS) Micrograms/L (mg/L) Quarterly Grab	Turbidity (NTU) Measured NTU Quarterly Grab	pH Standard Units Quarterly Grab	Volume Event Gallons Once per defined event Measurement
	MR1	MR1	MR1	MR1	MR1	MR1	MR1	MR1	MR1	MR1	MR1	003
Daily Minimum											Report Only	
Maximum	Report Only	Report Only	Report Only	Report Only	Report Only	Report Only	Report Only	Report Only	Report Only	Report Only	Report Only	
Daily Maximum												Report Only
Total												Report Only

Reporting Codes Used: L - Dry Groundwater Well

Overall DMR Notes/Comment

Reporting Code: L - Dry Groundwater Well

RECEIVED

OCT 10 2023

DEPARTMENT OF ECOLOGY



Permit Number: WA0501491

Permittee: Guemes Channel Holdings LLC

Facility County: Skagit

Receiving Waterbody:

Outfall: MR2 - Marine Railway 2

Version: 1

Monitoring Period: 04/01/2023 - 06/30/2023

Week	Monitoring Point	Chromium Total Micrograms/L (ug/L) Quarterly Grab	Copper Total Micrograms/L (ug/L) Quarterly Grab	Iron Total Micrograms/L (ug/L) Quarterly Grab	Lead Total Micrograms/L (ug/L) Quarterly Grab	Zinc Total Micrograms/L (ug/L) Quarterly Grab	NWTP HDX Diesel (NMT PH Dx) (semi- Micrograms/L (ug/L) Quarterly Grab	Oil & Grease Yes/No Once per defined event Visual Observation	Solids (Residue) Total suspended (TSS) Milligrams/L (mg/L) Quarterly Grab	Turbidity (NTU) Measured NTU Quarterly Grab	pH Standard Units Quarterly Grab
	MR2	MR2	MR2	MR2	MR2	MR2	MR2	MR2	MR2	MR2	MR2
Daily Minimum											Report Only
Maximum		Report Only	Report Only	Report Only	Report Only	Report Only	Report Only	Report Only	Report Only	Report Only	
Daily Maximum											Report Only

Reporting Codes Used: L - Dry Groundwater Well

## Overall DMR Notes/Comment

Reporting Code: L - Dry Groundwater Well

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.

8/18/2023 2:26:20 PM

Date

Lovric's Sea-Craft  
Signature

RECEIVED

Washington Department of Ecology  
Electronic Submission Cover Letter

OCT 10 2023



DEPARTMENT OF  
**ECOLOGY**  
State of Washington

DEPARTMENT OF ECOLOGY

**WQWebDMR - Permit# WA0501491 - DMR Submission Id: 1890645 - 8/18/2023  
2:26:18 PM**

Company Name	Signer Name	System Name
Lovric's Sea-Craft Inc.	Lovric's Sea-Craft Inc.	WQWebPortal

**Attachments:**

Document Name Or Description	Document Name
Submitted Copy of Record for Lovric's SeaCraft Inc.	Copy of Record Lovric'sSeaCraftInc. Friday August 18 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



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