

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			

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.

RECEIVED
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.

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:
 - o My Electronic Signature account is lost, stolen or used by someone else;
 - o There is any difference between the information I submitted and the information displayed in WebDMR;
 - o My role as a signer for this organization changes.

Agree: SLH (initial here)

I agree that I will not:

- Let anyone else use my Electronic Signature account.

Agree: SLH (initial here)

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

Shawn Hiday
Name (print or type)

9/28/2023
Date

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

Kelly Allison
Name (print or type)

9/29/2023
Date

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]
Signature

9/29/2023
Date

Kelly Allison
Name (print or type)

CFO
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

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
WQWebDMR-SWRO@ecy.wa.gov

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

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
509-675-2490
WQWebDMR-CRO@ecy.wa.gov

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

Permittee: Guemes Channel Holdings LLC

Facility County: Skagit

Receiving Waterbody:

Outfall: MR1 - Marine Railway 1

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	Zinc Total Micrograms/L (ug/L) Quarterly Grab	Lead Total Micrograms/L (ug/L) Quarterly Grab	Zinc Total 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	Volume Event Gallons Once per defined event Measurement
	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
Daily Maximum											Report Only
Total											Report Only

Reporting Codes Used: L - Dry Groundwater Well

Overall DMR Notes/Comment

Reporting Code: L - Dry Groundwater Well

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DEPARTMENT OF ECOLOGY



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

Permit Number: WA0501491

Permittee: Guemes Channel Holdings LLC

Facility County: Skagit

Receiving Waterbody:

Version: 1

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

Outfall: MR2 - Marine Railway 2

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 (NWTPH Dx) (semi-annual) 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	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	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.

Lovric's Sea-Craft
Signature

8/18/2023 2:26:20 PM
Date

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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+OIRxVXhaVmDIDIwbf4wPpyNrb3o09Bz2jdN2IEari5wVrNGUHEbVGzQwdP/D/dl1yyXcjmw=