

Electronic Signature Agreement Form

ESAF

Washington State Department of Ecology Water Quality Program

Web site:
<https://ecology.wa.gov/wqwebportal/>

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 that have the same Permittee (Responsible Official) otherwise complete separate Form for each request.

Permit Number/Application ID: ST0501273

Permit Name: SGL Composites

Permit Address: 8781 Randolph Rd. N.E.

City/State/Zip: Moses Lake, WA 98837

2. Electronic Signer Contact Information

Select One Role: ☒ Facility Signer ☐ Facility Coordinator

Signature Account User Name: joseph.akers@sglcarbon.com

Full Name: Joseph Akers

Work Mailing Address: 8781 Randolph Rd. N.E.

City/State/Zip: Moses Lake, WA 98837

Work Phone No. (Ext): 509 760-6739

Work Email Address: joseph.akers@sglcarbon.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.

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: JA ga (initial here)

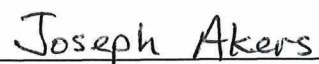
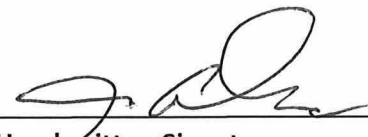
I agree that I will not:

- Let anyone else use my Electronic Signature account.

Agree: JA ga (initial here)

I, Joseph Akers (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	This form cannot be processed without a handwritten signature.
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>_____ Signer's Handwritten Signature  _____ Name (print)</p> </div> <div style="width: 45%;"> <p>_____ Date 4/11/225 _____ Title</p> </div> </div>	
8. Signature of Permittee (Responsible Official)	This form cannot be processed without a handwritten signature.
<p>I, <u>Joseph Akers</u> (insert name of permittee or responsible official) acknowledge that the individual named above works at/for <u>SGL Composites</u> (insert site/facility name) and is authorized to submit documents on the site's/facility's behalf. I understand that I may be contacted by Ecology to validate the account holder's employment at the site/facility name listed above.</p>	
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p> _____ Handwritten Signature</p> </div> <div style="width: 45%;"> <p>04/11/2025 _____ Date</p> </div> </div>	
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p><u>Joseph Akers</u> _____ Name (print)</p> </div> <div style="width: 45%;"> <p><u>V.P. of Operations</u> _____ Title</p> </div> </div>	
<p>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.</p>	
<p>To request an ADA accommodation, contact Ecology by phone at 360-407-6401 or email at ecyadacoordinator@ecy.wa.gov, or visit https://ecology.wa.gov/accessibility. For Relay Service or TTY call 711 or 877-833-6341.</p>	
<p>*To expedite access, we are accepting scanned Electronic Signature Agreement Forms (ESAF). You are required to mail the original signed ESAF to Ecology for our official records.</p>	

*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**

*Aquatic Pesticides, Bridgewashing,
CAFO, Irrigation, and Vessel
Deconstruction General Permits:*

**Washington Department of
Ecology Water Quality Program
ATTN: Eman Jabali
PO Box 47696
Olympia, WA 98504-7696
360-407-6600
WQGPUnit@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**

*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**

*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**

*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**

*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**



Washington State Department of Ecology Discharge Monitoring Report (DMR)

Permit Number: ST0501273 Permittee: SGL Automotive Carbon Fiber LLC

Facility County: Grant

Monitoring Period: 2/01/2025 - 2/28/2025

Date	Monitoring Point	Flow	Conductivity	Weekly pH Grab
		002	002	002
2/1/2025		5 ?	1442	8.2
2/2/2025		392	1861	
2/3/2025		1374	1274	
2/4/2025		1314	263	
2/5/2025		984	1475	
2/6/2025		880	1422	
2/7/2025		1412	2285	
2/8/2025		1140	1566	7.5
2/9/2025		430	1498	
2/10/2025		884	1831	
2/11/2025		840	2051	
2/12/2025		838	2238	
2/13/2025		896	2435	
2/14/2025		386	2435	
2/15/2025		3302	2435	7.7
2/16/2025		2776	2435	
2/17/2025		3872	2435	
2/18/2025		2466	2435	
2/19/2025		1398	2435	
2/20/2025		772	2435	
2/21/2025		462	2435	7.3
2/22/2025		844	2435	
2/23/2025		456	2435	
2/24/2025		1818	2435	
2/25/2025		900	2435	
2/26/2025		788	2435	
2/27/2025		784	2435	
2/28/2025		394	2435	
Minimum		5	654	?
		Report Only		
Average Monthly		1172		
		Report Only		
Maximum		3872	2435	
		Report Only	Report Only	

Reporting Codes Used: C - No Discharge

Receiving Waterbody:

Outfall: 002 - City of Moses Lake Larson POTW Version: 1

Joseph Akers, Plant Manager

This is a modified DMR report
The flow and conductivity were
submitted to the state through
DOE DMR website. SGL modified
the report to include pH data for
the City of Moses Lake.

3/11/2025 Date