

Application Id: 37835

Certification Received:
(Ecology use)

Facility/Site Name: LANGLEY STP

Permit Number:
(Ecology use)

Facility Address: 4999 COLES RD
LANGLEY, WA 98260

Facility County: Island

Permittee Name:

Permittee Title:

Permittee Email:

Permittee Phone:

Permittee Address:

Company Name:

Certification of Permittee

"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 directly responsible for gathering the 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."

Scott Chaplin / City of Langley

Printed Name / Company

Mayor

Title

Scott Chaplin

Signature of Permittee *

12/31/21

Date

* Federal regulations require this application is signed by one of the following:

- A. For a corporation: By a responsible corporate officer, of at least the level of vice president.
- B. For a partnership or sole proprietorship: By a general partner or the proprietor, respectively.
- C. For a municipality, state, federal, or other public facility: By either a principal executive officer or ranking elected official.

Please print, sign and mail this form to the following address:

ATTN: Water Quality Program - Puget Sound Nutrient Permit Administrator
Washington State Department of Ecology
PO Box 330316
Shoreline, WA 98133-9716