



# Water Quality Program

## Permit Submittal Electronic Certification

**Permittee:** Hoquiam Plywood Products

**Permit Number:** WAR001939

**Site Address:** 1000 WOODLAWN STREET  
HOQUIAM, WA 98550-1140

**Submittal Name:** ISGP Annual Gross Revenue Form

**Version:** 1

**Due Date:** 3/15/2024

### Questionnaire

Number	Permit Section	Question	Answer
1	S11	Permit Number	WAR001939
2	S11	Company Name	Hoquiam Plywood Products
3	S11	Site Name	Hoquiam Plywood Products
4	S11	Billing Contact's First and Last Name	Susan Radke
5	S11	Billing Contact's Mailing Address	PO Box 457, Oakville, WA, 98568
6	S11	Billing Contact's Phone Number	360-273-0728
7	S11	Billing Contact's Email Address	hr@willisent.com
8	S11	Are you a Municipality or Publically-owned Entity?	No
9	S11	Are you a newly permitted business without historical gross revenue information for the reporting year?	No
10	S11	Select the range from the dropdown list that your facility's Gross Revenue falls within for the most recent completed calendar year.	\$15,000,000 - < \$20,000,000

*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.*

Susan Radke

2/22/2024 11:12:49 AM

Signature

Date