



Water Quality Program

Permit Submittal Electronic Certification

Permittee: Waste Management North Sound

Permit Number: WAR000574

Site Address: 6225 233RD ST SE
WOODINVILLE, WA 98072

Submittal Name: ISGP Annual Gross Revenue Form

Version: 1

Due Date: 3/15/2024

Questionnaire

Number	Permit Section	Question	Answer
1	S11	Permit Number	WAR000574
2	S11	Company Name	Waste Management of WA, Inc. North Sound Hauling
3	S11	Site Name	Waste Management North Sound
4	S11	Billing Contact's First and Last Name	Jason Shea
5	S11	Billing Contact's Mailing Address	6211 234th St NE, Woodinville, WA, 98072
6	S11	Billing Contact's Phone Number	2534550486
7	S11	Billing Contact's Email Address	jshea1@wm.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.	> \$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.

Jason Davendonis

3/15/2024 1:17:51 PM

Signature

Date