

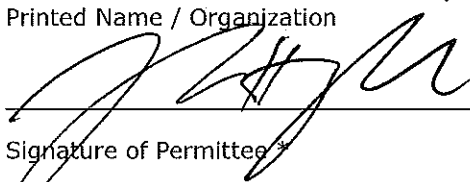
Application Id: 46320**Certification
Received:**
(Ecology use)**Facility Name:** KING COUNTY SOUTH TREATMENT
PLANT**Permit Number:** WAR002511
(Ecology use)**Facility Address:** 1200 MONSTER RD SW
RENTON, WA 98057**Facility County:** King**Permittee
Name:** John Taylor**Permittee Title:** Director Department of
Natural Resources and Parks**Permittee Email:** John-Dir.Taylor@kingcounty.gov**Permittee Phone:** 2064774602**Permittee
Address:** 201 S Jackson St
Seattle, WA 98104-3854**Organization
Name:** King County Wastewater
Treatment Division**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."

John Taylor, King CountyDirector, DNRP

Printed Name / Organization

Title

6/27/2024

Date

Signature of Permittee *

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

- A. For a corporation: By a responsible corporate officer.
- 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:

Washington Department of Ecology - Industrial Stormwater
P.O. Box 47696
Olympia, WA 98504-7696