



# Water Quality Program

## Permit Submittal Electronic Certification

**Permittee:** CHAMBERS CREEK STP - PSNGP

**Permit Number:** WAG994560

**Site Address:** 10311 CHAMBERS CREEK RD W  
UNIVERSITY PLACE, WA 98467-1040

**Submittal Name:** Nitrogen Optimization Report for DOMINANT loaders

**Version:** 1

**Due Date:** 3/31/2025

### Questionnaire

| Number | Permit Section | Question   | Answer         |
|--------|----------------|--|----------------|
| 1      | S4.C.2.b.i     | Did your facility stay below the Action Level in S4.b, Table 5 or Table 6 for a jurisdiction with a bubbled action level?                | Yes            |
| 1a     | S4.C.2.b.i     | Attach a document listing the contribution of each of your individual facilities to the total bubble allocation for the reporting period | Not Applicable |
| 2      | S4.C.2.b.i     | Did your facility stay below a 10 mg/L annual average TIN concentration?   | Yes            |

*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.*

Laurie Pierce

1/29/2025 10:55:07 AM

Signature

Date