



Washington State
Department of Ecology
Spill Prevention, Preparedness, and Response Program
P.O. Box 47600, Olympia, WA 98504-7600
Office Phone: (360) 407-7455
Fax: (360) 407-7288 or toll free 1-800-664-9184

Proof of Financial Responsibility Chapter 173-187 WAC

Delegation of Authority Form

This form must be completed by the facility or vessel owner or operator if the Proof of Financial Responsibility Attestation Form has been executed by an authorized representative acting on behalf of the owner or operator.

I, _____ (name of facility or vessel owner or operator)
hereby declare that

_____ (name of authorized representative whose signature
appears in the attestation) is authorized to submit an application for a Washington Certificate of
Financial Responsibility on behalf of the facility or vessel owner or operator.

Signature of authorized representative of insurer

Date

Print Name

Title

Submitting Party Information

Company Name:	
Contact Name:	
Address:	
Phone Number:	Fax Number:
Email:	Website:

Additional Submitting Party Information (If Needed)

Company Name:	
Contact Name:	
Address:	
Phone Number:	Fax Number:
Email:	Website:
