

## Appendix G

### **Discharge Monitoring Report (DMR) Signature Authorization**

Your SPDES permit may require you to periodically submit a Discharge Monitoring Report (DMR). The reports must be signed as follows:

1. for a corporation: by a responsible corporate officer. For the purposes of this section, a responsible corporate officer means:
  - (i) a president, secretary, treasurer, or vice president of the corporation in charge of a principal business function, or any other person who performs similar policy or decision-making function for the corporation, or
  - (ii) the manager of one or more manufacturing, production, or operating facilities employing more than 250 persons or having annual sales or expenditures exceeding \$25 million (in second quarter 1980 dollars), if authority to sign documents has been assigned or delegated to the manager in accordance with corporate procedures, or
2. for a partnership or sole proprietorship: by a general partner or the proprietor, respectively; or
3. for a municipality, state, federal, or other public agency: by either a principal or executive officer or ranking elected official. A principal executive officer of a federal agency includes:
  - (i) the chief executive officer of the agency, or
  - (ii) a senior executive officer having responsibility for the overall operations of a principal geographic unit of the agency; or
4. a duly authorized representative of the person described in items (1), (2), or (3). A person is a duly authorized representative only if
  - (i) the authorization is made in writing by a person described in paragraph (1), (2), or (3);
  - (ii) the authorization specifies either an individual or a position having responsibility for the overall operation of the regulated facility or activity such as the position of plant manager, operator of a well or well field, superintendent, position of equivalent responsibility, or an individual or position having overall responsibility for environmental matters for the company. (A duly authorized representative may thus be either a named individual or any individual occupying a named position);
  - (iii) the written authorization is submitted to the Department.

**Initial authorization or changes to authorization:** If an authorization under paragraph (4) is no longer accurate because a different individual or position has responsibility for the overall operation of the facility, a new authorization satisfying the requirements of paragraph (4) must be submitted to the Department prior to, or together with, any reports to be signed by an authorized representative.

**THE ATTACHED FORM MUST BE COMPLETED AND SUBMITTED TO THE DEPARTMENT.** The person identified on the first line must be person described in paragraph (1), (2), or (3). The form may be used to designate an authorized representative as described in paragraph (4). The permittee must notify the department of any change in the information on the attached form during the life of the permit. We strongly recommend at least two people be identified to sign DMRs to cover such absences as vacations, illness, retirements, etc.

## Discharge Monitoring Report (DMR) Signature Authorization Form

Permittee Name \_\_\_\_\_ SPDES NO. \_\_\_\_\_

Facility Name \_\_\_\_\_ Date \_\_\_\_\_

Name of person described in paragraph (1), (2) or (3):	Title:
Signature of person described in paragraph (1), (2), or (3):	Date:

**THE PERMITTEE MUST NOTIFY THE DEPARTMENT OF ANY CHANGE IN THIS INFORMATION DURING THE LIFE OF THE PERMIT**

Name and/or Title of person responsible for signing and submitting DMR's:	Phone: (    )		
Mailing Name:			
Mailing Address:	City:	State:	Zip Code:

Name and/or Title of person responsible for signing and submitting DMR's:	Phone: (    )		
Mailing Name:			
Mailing Address:	City:	State:	Zip Code:

Name and/or Title of person responsible for signing and submitting DMR's:	Phone: (    )		
Mailing Name:			
Mailing Address:	City:	State:	Zip Code:

Name and/or Title of person responsible for signing and submitting DMR's:	Phone: (    )		
Mailing Name:			
Mailing Address:	City:	State:	Zip Code:

Return To:      SPDES Compliance Information Section  
                     Bureau of Water Compliance Programs  
                     New York State Department of Environmental Conservation  
                     625 Broadway  
                     Albany, NY 12233-3506