

Documentation of Signatory Authority (Authorized Representative) and Delegation of Duly Authorized Representatives

The signatory authority authorized by this form supersedes any authorization previously submitted in baseline monitoring reports, application, or written communication. This form must be updated any time the authorized or duly authorized representatives change when the information is not included in a permit application or renewal.

Return signed form to:
Attn: Ryan Peasel
City of Wentzville
Wastewater Division
2455 Mette Road
Wentzville, Missouri 63385

Primary Signatory Authority Verification (Authorized Representative)

Facility Name	
Owner/Company Name	
IU Permit Number	
Facility Street Address	
City State Zip	

Signatory Authority/Authorized Representative

Date

Authorized Representative Full Name

Title of Authorized Representative

Email Address

Office Phone

Mobile Phone

I certify that I qualify for signatory authority, as set forth in [40 CFR 403.12\(l\)\(1\)\(2\)](#) based on the following criteria:

(i) If the Industrial User is a corporation, Authorized Representative shall mean:

- ☐ (A) the president, secretary, or a vice-president of the corporation in charge of a principal business function, or any other person who performs similar policy or decision-making functions for the corporation, or
- ☐ (B) the manager of one or more manufacturing, production, or operation facilities, provided, the manager is authorized to make management decisions which govern the operation of the regulated facility including having the explicit or implicit duty of making major capital investment recommendations, and initiate and direct comprehensive measures to assure long-term environmental compliance with environmental laws and regulations; can ensure that the necessary systems are established or actions taken to gather complete and accurate information for control mechanism requirements; and where authority to sign documents has been assigned or delegated to the manager in accordance with corporate procedures.

- ☐ (ii) If the Industrial User is a partnership or sole proprietorship, an Authorized Representative shall mean a general partner or the proprietor, respectively.

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Delegation of Signatory Authority (Optional)

I hereby delegate signatory authority for (choose one):

☐

Periodic Compliance Reports Only

☐

Representative #1

☐

Representative #2

☐

Representative #3

☐

All Reports Required by the Permit including Periodic Compliance Reports

☐

Representative #1

☐

Representative #2

☐

Representative #3

Duly Authorized Representative # 1

Name Title		
Company Name		
Mailing Street Address		
City, State, Zip Code		
Phone Email		
Signature		

Duly Authorized Representative #2

Name Title		
Company Name		
Mailing Street Address		
City, State, Zip Code		
Phone Email		
Signature		

Duly Authorized Representative #3

Name Title		
Company Name		
Mailing Street Address		
City, State, Zip Code		
Phone Email		
Signature		