NC Department of Environmental Quality



Division of Energy, Mineral and Land Resources

# Stormwater eDMR Submitter Change Request Form

⇒ This form is for adding or updating the Submitter User(s). Submitter(s) must have signatory authority for the permit in order to have Submitter privileges in eDMR.

# A. Owner Information

⇒ This form must be completed by a Responsible Official who meets the legal signature authority requirements in <u>40 CFR 122.22</u> or a person who has been delegated signature authority to act on behalf of the Owner.

Owner/Organization Name:				
Responsible Official Name:				
Title:				
eDMR User ID:				
Email Address:	P	Phone:		
Mailing Address:				
City:	S	State:	Zip:	

### B. Activate New Submitter or Update Existing User

- ⇒ Please complete the Submitter User Detail on page 2 for the individuals who will need Submitter permission or to update Submitter details, such as adding additional permits, to an existing user. Submitter permissions can only be assigned by the Stormwater eDMR Administrator. Note: The Responsible Official and Facility Administrator can deactivate or delete eDMR user permissions for any individual within its organization, including Submitter permissions.
- ⇒ In addition to the User Details, please specify the permit(s) that each user will be associated with for eDMR submittal. Should additional space be needed for user and/ or permits, please make additional copies for the Submitter User Details page and complete as needed.

Submitter User Details						
Permit No. (s):						
First Name:						
Middle Name:						
Last Name:						
Phone Number:						
Email:			User ID:	(Ass	igned by NCDWR eDI	MR Administrator)
Select Request	Add User Per	rmission				
Туре:	□ Update User	Permission	Add/Update User Permission as of (Date):			
Submitter User Details						
Permit No. (s):						
First Name:						
Middle Name:						
Last Name:						
Phone Number:						
Email:		User ID: (Assigned by NCDWR eDMR Admin			MR Administrator)	
Select Request	Add User Pe	rmission				
Туре:	Update User	Permission	Add/Update User Permission as of (Date):			
		Submitter	User Details	\$		
Permit No. (s):						
First Name:						
Middle Name:						
Last Name:						
Phone Number:						
Email:			User ID:	(Ass	igned by NCDWR eD	MR Administrator)
Select Request	Add User Pe	rmission				
Туре:	□ Update User	Permission	Add/Update User Permission as of (Date):			

## C. Electronic Signature Agreement Conditions

To receive and accept the required electronic signature credential, consisting of a User ID and password, issued by the North Carolina Division of Water Resources (NCDEQ) in order to sign electronic documents submitted to NCDEQ's Electronic Document Systems and to receive electronic documents from NCDEQ's systems;

The Responsible Official and Submitter(s) (if applicable) named in this form do herby:

- 1. Understand that this Electronic Signature Agreement requires me to submit electronic documents to NCDEQ's approved eDMR system under the authorized program in lieu of paper submissions.
- 2. Understand that this Electronic Signature Agreement requires me to accept electronic transmissions, in lieu of paper transmissions of all permits, permit modifications, authorizations to construct, and any other correspondence related to reviewing and processing permits from NCDEQ. This authorization will not become effective until NCDEQ establishes a system for processing electronic documents; I am notified in writing from NCDEQ that use of the electronic systems has officially been initiated; and North Carolina rules and statutes are changed to allow the implementation of electronic submittal and acceptance of documents.
- 3. Understand that this Electronic Signature Agreement requires me to submit electronic all necessary information for processing of NPDES application including information for renewal of existing permits, modification to existing permits, and applications for new discharge permits. The submittals may include all necessary applications and supporting documentation to NCDEQ's approved system for electronic submittals in lieu of paper submissions. This authorization will not become effective until NCDEQ establishes a system for processing electronic documents; I am notified in writing from NCDEQ that use of the electronic systems has officially been initiated; and North Carolina rules and statutes are changed to allow the implementation of electronic submittal and acceptance of documents.
- 4. Understand that this Electronic Signature Agreement requires me to accept electronic submissions, in lieu of paper submissions, of all Notices of Deficiency, Notices of Violation, Civil Penalty Assessments, and any other correspondence related to compliance with federal and state water quality laws and regulations that might be sent by NCDEQ. This authorization will not become effective until NCDEQ establishes a system for processing electronic documents; I am notified in writing from NCDEQ that use of the electronic systems has officially been initiated; and North Carolina rules and statutes are changed to allow the implementation of electronic submittal and acceptance of documents.
- 5. Agree to protect both the electronic signature credential, consisting of my User ID and password, and security questions and answers, from compromise and from use by anyone except me. Specifically, I agree to maintain the secrecy of my electronic signature credential and security questions and answers; I will not divulge or delegate my credential or security questions and answers to any other individual; I will not store my credential or security questions and answers in an unprotected location; and I will not allow my electronic signature credential or security questions and answers to be written into computer scripts to achieve automated log-in.
- 6. Understand and agree that I will be held as legally bound, obligated, and responsible for the use of my electronic signature as I would be using my hand-written signature.
- 7. Understand that I will be informed through my registered email address whenever my User ID or password has been modified.

- 8. Understand that eDMR reports the last date my User ID and password were used immediately after successfully logging into eDMR.
- Agree to contact the NCDEQ SW-eDMR Administrator via email at <u>SW-eDMR@deq.nc.gov</u> as soon as possible, but no later than 24 hours, after suspecting or determining that my User ID and/or password have become lost, stolen or otherwise compromised.
- 10. Agree that I will review the contents of all electronic submissions prior to submission.
- 11. Understand that I will automatically receive an email receipt at my registered email address from the NCDEQ's SW-eDMR system for any submission that contains a valid electronic signature, identifying the document received, the signatory, and the date and time of receipt.
- 12. Agree to contact the NCDEQ SW-eDMR Administrator via email at <u>SW-eDMR@deq.nc.gov</u> if I do not receive an email receipt as specified above within five (5) business days for any electronically signed submission using my credentials.
- 13. Agree that if I received an email notification for an activity that I do not believe that I performed, I will notify the NCDDEQ SW-eDMR Administrator via email at <u>SW-eDMR@deq.nc.gov</u> as soon as possible, but no later than 24 hours, after receipt.
- 14. Agree to report, within 24 hours of discovery, any evidence of discrepancy between any electronic document I have signed and submitted and what the NCDEQ eDMR has received from me by contacting the NCDEQ SW-eDMR Administrator via email at <u>SW-eDMR@deq.nc.gov</u>.
- 15. Understand that the NCDEQ eDMR's system will automatically reject any electronic document submitted without a valid electronic signature if such signature is required.
- 16. Agree to contact the NCDEQ SW-eDMR Administrator via email at <u>SW-eDMR@deq.nc.gov</u> within ten working days if my duties change and I no longer need to interact with eDMR on behalf of my organization.
- 17. Agree to notify the NCDEQ SW-eDMR Administrator via email at <u>SW-eDMR@deq.nc.gov</u> if I cease to represent the regulated entity specified above as signatory of that organization's electronic submissions as soon as this change in relationship occurs.
- 18. Understand that the NCDEQ may contact the Organization's Responsible Official, who signs below to authorize me as a signatory for the Owner/Organization, in order to verify my identity.
- 19. Agree to retain a copy of this signed agreement as long as I continue to represent the regulated entity specified above as signatory of the Organization's electronic submissions.
- 20. Certify that I have the authority to enter into this Agreement on behalf of the Organization identified above, and I am a signatory authorized to represent that Organization, and I am able to sign and submit reports and other information on behalf of that Organization in the capacity required by statute and/or regulation.

#### D. Responsible Official Signature

# ⇒ This form must be completed with an original wet signature (not digital) [40 CFR 122.22]

The Responsible Official, as identified in accordance with 40 CFR 122.22, is the appropriate individual with the authority to sign and submit reports for the organization.

I,	(printed name), have the authority to enter into
this Agreement for Name).	(Owner/Organization
Name).	

I request the NCDEQ grant the Submitter(s) named in Part B of this form an electronic signature credential to submit and accept documents electronically on behalf of my organization.

I acknowledge that I, and the individual(s) named in Part B of this form, work at/for my organization and have authority to submit and accept electronic documents and act as a signatory for purposes of the NCDEQ's electronic document systems.

By submitting this application, I,	(printed name),
have read, understand, and accept the terms and conditions of this E	lectronic Signature
Agreement. I certify under penalty of law that I have personally exam	ined and am familiar with
the information submitted in this application and all attachments and	that, based on my inquiry
of those persons immediately responsible for obtaining the information	on contained in the
application, I believe that the information is true, accurate and compl	ete. I am aware that there
are significant penalties for submitting false information, including the	e possibility of fine and
imprisonment.	

Title

Date

Responsible Official Signature

#### E. Submitter Signature

 $\Rightarrow$  Provide a separate page of Part E for each Sumitter User listed in Part B.

#### $\Rightarrow$ This form must be completed with an original wet signature (not digital) [40 CFR 122.22]

The Submitter (electronic signature applicant) is a user other than the Responsible Official who submits this agreement to request to sign reports electronically. The Submitter is given signatory authority by an individual identified as the Responsible Official by the Owner/Organization to sign reports and other information and to accept electronic documents.

I, \_\_\_\_\_\_ (printed name), am authorized by the Responsible Official named in this document, who has the authority under the applicable standards, to enter into this agreement for \_\_\_\_\_\_ (Owner/ Organization Name).

By submitting this application, I, \_\_\_\_\_\_\_\_\_ (printed name), have read, understand, and accept the terms and conditions of this Electronic Signature Agreement. I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Title

Date

Submitter Signature

#### Submit the completed Stormwater eDMR Submitter Change Request Form in hard copy with original signatures to:

DEMLR Stormwater Program eDMR Attn: Stormwater eDMR Administrator 1612 Mail Service Center Raleigh, NC 27699-1612

eDMR Submitter Change Request Form Page 6