

DIVISION OF WASTE MANAGEMENT TAX CERTIFICATION APPLICATION RESPONSIBLE PARTY SIGNATURE PAGE

NOTICE: The penalty for false statement, representation, or certification herein is imprisonment and fine up to \$10,000. N.C.G.S. Sect. 130A-26.2.

I hereby certify that the equipment, facilities and/or land listed in the tax certification application submitted electronically to the NC Department of Environmental Quality on _____ (date) by _____ (name and title of person filling out application) are used for the purpose stated in the application, and that the information presented in the application is accurate. Furthermore, I certify that any portable or mobile equipment listed on this application will be used exclusively in the state of North Carolina.

Responsible Party Signature:

Date:

Print Name, Title, and Company:

I hereby certify that the property listed in the tax certification application submitted electronically to the NC Department of Environmental Quality on _____ (date) by _____ (name and title of person filling out application) and the facility where said property is located are in compliance with all local, state, and federal laws and rules for the protection of the environment and are in compliance with the conditions of any permit issued to the facility by the NC Department of Environmental Quality, any permit issued under Section 404 of the Federal Water Pollution Control Act (33 U.S. Code Section 1344), any permit issued by a local Air Quality Program, and any permit issued by a local Sedimentation and Erosion Control program.

Responsible Party Signature:

Date:

Print Name, Title, and Company:

I hereby certify that _____ (name of applicant) has no pending administrative, civil or criminal enforcement action based on alleged violation(s) of any program implemented by an agency of the N.C. Department of Environmental Quality ("DEQ"), and further certifies that within the last five years there has been no final determination of responsibility against _____ (name of applicant) for any administrative, civil, or criminal violation of any program implemented by an agency of DEQ. The undersigned also certifies that _____ (name of applicant) will notify the DEQ Solid Waste Section Compliance Officer in writing within 60 days of receipt of notification of any administrative, civil or criminal enforcement action based upon alleged violation(s) of any program implemented by DEQ. I further certify that I have the authority to bind _____ (name of applicant) herein.

Responsible Party Signature:

Date:

Print Name, Title, and Company:
