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**U.S. Environmental Protection Agency
Office of Enforcement and Compliance Assurance
NPDES e-Reporting Tool Electronic Signature Agreement**

In accepting the electronic signature credential issued by the U.S. Environmental Protection Agency (EPA) to sign electronic documents submitted to EPA's Central Data Exchange (CDX), and as a representative for:

Electronic Signature Holder Company Information

Organization Name	City of Hazen
Address	P.O. Box 564
City, State, Zip	Hazen, AR 72064
Province	
Country	US
Phone Number	(870) 255-4521
E-mail Address	phillipfoot@hotmail.com
Registrant's Name	Mr Phillip B. Foot
Registrant Title	Utilities manager
CDX User Name	PHILLIPFOOT@HOTMAIL.COM

I, Phillip B. Foot,
(Responsible Official or Duly Authorized Representative)

(1) Agree to protect the electronic signature credential, consisting of my Central Data Exchange (CDX) user identification and password, from use by anyone except me. Specifically, I agree to maintain the secrecy of the password; I will not divulge or delegate my user name and password to any other individual; I will not store my password in an unprotected location; and I will not allow my password to be written into computer scripts to achieve automated login.

(2) Agree to contact the U.S. EPA CDX Help Desk at 1-888-890-1995 as soon as possible, but no later than 24 hours, after suspecting or determining that my user name and password have become lost, stolen or otherwise compromised.

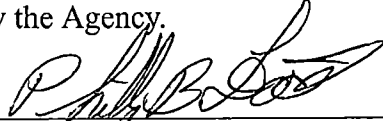
(3) Agree to notify CDX within ten working days if my duties change and I no longer need to interact with the CDX on behalf of my organization. I agree to make this notification by notifying the CDX Technical Support staff at 1-888-890-1995 or helpdesk@epacdx.net.

(4) Understand that I will be informed through my registered electronic mail (e-mail) address whenever my user identification or password have been modified.

(5) Understand that CDX reports the last date my user identification and password were used immediately after successfully logging into CDX.

- (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 whenever I electronically sign and submit an electronic document to the CDX, I will receive an e-mail at my registered e-mail address; This e-mail will inform me that a submission has been made to CDX from my user account and will contain instructions to view information regarding the submission, including my Copy of Record (COR).
- (8) Agree that if I receive an e mail notification for any activity that I do not believe that I performed, I will notify the CDX Help Desk as soon as possible, but no later than 24 hours, after receipt.
- (9) Agree to contact the CDX Help Desk if I do not receive an e mail notification within 5 business days for any electronically signed submission using my credentials.
- (10) Agree to report, within 24 hours of discovery, any evidence of discrepancy between any electronic document I have signed and submitted and what the CDX has received from me by contacting the CDX or service Help Desk.
- (11) Agree to notify the EPA if I cease to represent the regulated entity specified above as signatory of that organization's electronic submissions by contacting the CDX Help Desk as soon as this change in relationship occurs and to sign a surrender certification at that time.
- (12) 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 company's electronic submissions.
- (13) Certify that I am the Responsible Official or their Duly Authorized representative as defined in 40 C.F.R. § 122.22 for the facilities listed in this agreement; and I certify that I have the authority to enter into this Agreement on behalf of the facilities listed above; and
- (14) Certify that by signing and submitting this agreement, I 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 agreement and 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.
- (15) Agree to provide and maintain an email address by which to receive communications from the CDX system. I understand that this account must be accessible only by me and that I have an affirmative obligation to check this email account regularly. If any email sent to me by CDX is returned as undeliverable, I will explain why this occurred when requested by the Agency.

Signed:



Mr Phillip B. Foot
Utilities manager
Responsible Official or Duly Authorized
Representative

Date:

6-19-17

Sponsorship/Revocation of Duly Authorized Representative

Sponsorship

I, Mr Phillip B. Foot (Responsible Official), hereby attest that I am a Responsible Official for City of Hazen within the meaning of 40 C.F.R. § 122.22(a) and that the individuals named below are both duly authorized representatives within the meaning of 40 C.F.R. § 122.22(b) and authorized to represent City of Hazen in using the NPDES e-Reporting Tool:

Beth Lewis

Signed:



Mr Phillip B. Foot
Responsible Official


Date:

6-19-17

Revocation

I, Mr Phillip B. Foot (Responsible Official), hereby attest that I am a Responsible Official for City of Hazen within the meaning of 40 C.F.R. § 122.22(a) and the individuals named below are no longer duly authorized representatives within the meaning of 40 C.F.R. § 122.22(b) or are otherwise no longer authorized to represent City of Hazen in using the NPDES e-Reporting Tool:

Signed:



Mr Phillip B. Foot
Responsible Official

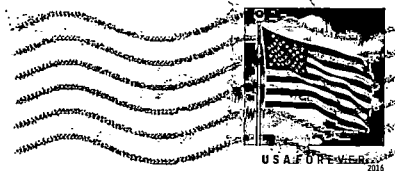
Date:

City of Hazen

P. O. Box 564
Hazen, Arkansas 72064

LITTLE ROCK AR 722

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Attn: David Ramsey/Water Enforcement
Arkansas Dept of Environmental Quality
5301 Northshore Dr.
North Little Rock, AR 72218-5317

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