

REQUEST FOR CHANGE OF AUTHORIZATION  
(CERTIFICATION AND SIGNATORY REQUIREMENTS)

NPDES Permit Number: AR0050148 Facility Name: SOUTHWEST WASTEWATER PLANT

- Type of Change:  New Cognizant Official (or duly authorized representative) (sections 1 and 2)  
(check one)  New Responsible Official (complete section 2 only)  
 Both (sections 1 and 2)  
 Additional Cognizant Official (or duly authorized representative) (sections 1 and 2)

1. **NEW COGNIZANT OFFICIAL** (or duly authorized representative) (See 122.22(b); the individual, authorized by the ranking official in writing, as **having responsibility for the overall operation** of the regulated facility or activity responsibility, or having overall responsibility for environmental matters for the company.)

The ranking official hereby designates the following **individual** as the cognizant official, (duly authorized representative), for signing the permit required reports, etc., including Discharge Monitoring Reports (DMR) required by the permit, and other information requested by the Director:

Harold Mauldin  
Signature of the Cognizant Official (Duly Authorized Representative)

Harold Mauldin  
Name (First Name, MI, Last Name) Typed or Printed

320 Davidson DR Hot Springs AR 71901  
Mailing Address City, State, and Zip

Facility Manager (501) 262-1125 501-262-0339  
Title A/C Phone Fax

Email Address: HMAULDIN@cityhs.net

By signature below, the responsible official certifies that the above named **individual** is qualified to act as the duly authorized representative under the provisions of 40 CFR 122.22(b).

2. **RESPONSIBLE OFFICIAL** (Note: The responsible official is the person authorized to sign the permit application i/a/w 40 CFR 122.22(a). For a Corporation: it is the responsible corporate officer. Partnership or Sole Proprietorship: the general partner or proprietor. Municipality, State, Federal or other Public Agency: the principal executive officer ranking elected official.)

Monty Ledbetter 7-13-18  
Signature of the Responsible Official Date

Monty Ledbetter  
Name (First Name, MI, Last Name) Typed or Printed

780 Adams St Hot Springs AR 71901  
Mailing Address City, State, and Zip

Utilities Director (501) 651-7730  
Title A/C Phone Fax

Email Address: Mledbetter@cityhs.net

**Certification:** I certify under penalty of law that this document and all attachments were prepared under my direct supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Will the Responsible Official also be the person signing submittals?  Yes  No

Agency: *Arkansas DEQ*  
 Subscriber Agreement Number: *59f36a9e-d873-4494-afd1-e59be973a2e2*  
 Generated On: *2018-10-03 10:45:51.0*  
 Account Reference: *204038*

***NetDMR Subscriber Agreement Instructions Page***

***This form can be used for permits issued by: Arkansas DEQ, hereafter referred to as "the Regulatory Authority".***

**A. Signatory Authority Information**

The Signatory Authority is the individual that intends to sign DMRs and signs this Subscriber Agreement in Section E.

**User Name:** HMAULDIN  
**Subscriber Name:** Harold Mauldin  
**Organization:** City of Hot Springs Utilities  
**Email Address:** hmauldin@cityhs.net  
**Phone Number:** (501) 262-1125

**B. Permit Information**

Signing privileges are requested for the following permits:

Permit ID	Facility Name	Facility Address	Relationship	Authorized By
AR0050148	HOT SPRINGS, CITY OF SW WWTP	365 WINKLER ROAD HOT SPRINGS, AR 71913	Facility	monjty ledbetter

## C. Terms and Conditions

- **PURPOSE:** This agreement creates a legally binding obligation for the signer of the Agreement (the Responsible Official and/or Signatory Authority) to abide by the terms and conditions for use of the NetDMR System, and memorializes a mutual understanding that the signer of this agreement is as legally bound, obligated, and responsible by use of the assigned electronic signature as by a hand-written signature.
- **ACCEPTANCE & EFFECT:** Acceptance of this agreement by the Regulatory Authority shall be evidenced by notice from the Regulatory Authority, provided electronically, that this agreement has been approved.
- **SUBMITTAL & RECEIPT:** A Document shall be deemed to have been submitted when it is accessible to the Regulatory Authority. A document shall be deemed to have been received when it can be fully processed. No document shall satisfy any reporting requirement until it is received.
- **VERIFICATION:** In accordance with the associated certification statement, the signer of the Agreement is responsible for the truth and accuracy of the content of each submission. The signer of the Agreement also has an affirmative obligation to check the accuracy of the document as received by the Regulatory Authority and to notify the Regulatory Authority promptly if the document was sent without authorization or differs in substance in any way from the document that was submitted.
- **INABILITY TO TRANSMIT OR FILE REPORTS ELECTRONICALLY:** No party shall be liable for any failure to perform its obligations in connection with any Electronic Transaction or any Electronic Document, where such failure results from any act or cause beyond such party's control which prevents such party from electronically transmitting or receiving any Documents, except that the signer of the Agreement (Responsible Official and/or Signatory Authority) is nonetheless required to submit records or information required by law via other means, as provided by applicable law and within the time period provided by such law.

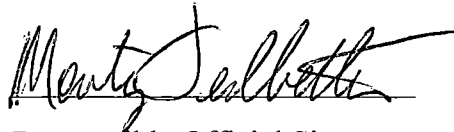
- **SEVERABILITY:** Any provision of the Agreement which is determined to be invalid or unenforceable will be ineffective to the extent of such determination without invalidating the remaining provisions of this Agreement or affecting the validity or enforceability of such remaining provisions.
- **TERMINATION AND RENEWAL:** The Agreement may be terminated at any time by the Regulatory Authority. Upon termination of this agreement, the associated ability to submit electronic information through the NetDMR system will be terminated. The Regulatory Authority will provide notification of termination, including the date on which termination takes effect. A new Responsible Official and/or Signatory Authority must resubmit this form at the time that a new permit application is submitted or when Responsible Official and/or Signatory Authority responsibility transfers from one person to another.  
-Note: Termination of this agreement may eliminate the ability to comply with permit requirements for any continuing operations. Paper DMR Reports will only be accepted under this permit where the permittee has provided sufficient justification and obtained prior approval from the Regulatory Authority.

#### **D. Responsible Official Authorization**

The Responsible Official is the appropriate individual identified under 40 CFR §122.22(a) with the authority to sign permit applications, reports, and other permit-required submittals (e.g., DMRs). The Responsible Official can also delegate the authority to electronically sign DMRs to a duly authorized representative(s) as described in 40 CFR §122.22(b).

Permit ID(s): AR0050148

I, monjty ledbetter utilities director, have the authority to enter into this Agreement for HOT SPRINGS, CITY OF SW WWTP and Permit ID AR0050148 under the applicable standards. I request Arkansas DEQ grant Harold Mauldin the ability to submit DMRs for Permit ID AR0050148.



Responsible Official Signature  
Responsible Official Phone

monjty  
ledbetter  
utilities  
director  
Title

10/19/18  
Date

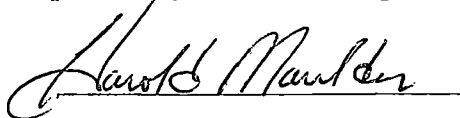
**E. Signatory Authority Signature**

The Signatory Authority is the NetDMR user that submits this agreement to request approval to electronically sign DMRs. The Signatory Authority has the authority to sign DMRs under 40 CFR §122.22(a) or is a duly authorized representative(s) who has been delegated the authority to electronically sign DMRs by the Responsible Official as described in 40 CFR §122.22(b).

Permit ID: AR0050148

I, Harold Mauldin, am authorized by the signatory authority named in Part D of this document, who does have the authority under the applicable standards, to enter into this agreement for HOT SPRINGS, CITY OF SW WWTP and Permit ID AR0050148.

By submitting this application for AR0050148, I, Harold Mauldin, have read, understand, and accept the terms and conditions of this subscriber 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.



Signatory Authority Signature

FACILITIES  
OPERATIONS  
MANAGER  
Title

10-19-18  
Date

Print this form, save a copy for your records, and mail to:

Arkansas DEQ  
 Attn: Water Enforcement  
 Arkansas Department of Environmental Quality  
 5301 Northshore Drive  
 North Little Rock , AR 72118-5317

**Checklist - Regulatory Authority Use Only:**

Check	Information	Name	Date
	Form Received by		
	Verified ICIS-NPDES Permit Limits		
	Regulatory Authority Approves NetDMR Authorization		
	ICIS-NPDES NetDMR Flag Populated		
	User Approved in NetDMR Application		
	Notification to User		
	Inactivated?		

REQUEST FOR CHANGE OF AUTHORIZATION  
(CERTIFICATION AND SIGNATORY REQUIREMENTS)

NPDES Permit Number: AR0033880 Facility Name: CITY Hot Springs WWTP

- Type of Change: (check one)
- New Cognizant Official (or duly authorized representative) (sections 1 and 2)
  - New Responsible Official (complete section 2 only)
  - Both (sections 1 and 2)
  - Additional Cognizant Official (or duly authorized representative) (sections 1 and 2)

1. **NEW COGNIZANT OFFICIAL** (or duly authorized representative) (See 122.22(b); the individual, authorized by the ranking official in writing, as **having responsibility for the overall operation** of the regulated facility or activity responsibility, or having overall responsibility for environmental matters for the company.)

The ranking official hereby designates the following **individual** as the cognizant official, (duly authorized representative), for signing the permit required reports, etc., including Discharge Monitoring Reports (DMR) required by the permit, and other information requested by the Director:

Harold Mauldin  
Signature of the Cognizant Official (Duly Authorized Representative)

Harold MAULDIN  
Name (First Name, MI, Last Name) Typed or Printed

320 DAVIDSON DR Hot Springs, AR 71901  
Mailing Address City, State, and Zip

Facility Manager (501) 262-1125 501-262-1125  
Title A/C Phone Fax

Email Address: HMAULDIN@cityhs.net

By signature below, the responsible official certifies that the above named **individual** is qualified to act as the duly authorized representative under the provisions of 40 CFR 122.22(b).

2. **RESPONSIBLE OFFICIAL** (Note: The responsible official is the person authorized to sign the permit application i/a/w 40 CFR 122.22(a). For a Corporation: it is the responsible corporate officer. Partnership or Sole Proprietorship: the general partner or proprietor. Municipality, State, Federal or other Public Agency: the principal executive officer ranking, elected official.)

Monty Ledbetter 7-13-18  
Signature of the Responsible Official Date

Monty Ledbetter  
Name (First Name, MI, Last Name) Typed or Printed

780 ADAMS ST Hot Springs, AR 71901  
Mailing Address City, State, and Zip

Utilities Director (501) 651-7730   
Title A/C Phone Fax

Email Address: MLedbetter@cityhs.net

Certification: I certify under penalty of law that this document and all attachments were prepared under my direct supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Will the Responsible Official also be the person signing submittals?  Yes  No

Agency: *Arkansas DEQ*  
 Subscriber Agreement Number: *9d0a747d-fbea-4437-aa12-b86b0a9db910*  
 Generated On: *2018-10-03 10:41:13.0*  
 Account Reference: *204038*

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**A. Signatory Authority Information**

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**User Name:** HMAULDIN  
**Subscriber Name:** Harold Mauldin  
**Organization:** City of Hot Springs Utilities  
**Email Address:** hmauldin@cityhs.net  
**Phone Number:** (501) 262-1125

**B. Permit Information**

Signing privileges are requested for the following permits:

Permit ID	Facility Name	Facility Address	Relationship	Authorized By
AR0033880	HOT SPRINGS, CITY OF - REGIONAL WWTP	320 DAVIDSON DRIVE HOT SPRINGS, AR 71901	Facility	Monty Ledbetter



## C. Terms and Conditions

- **PURPOSE:** This agreement creates a legally binding obligation for the signer of the Agreement (the Responsible Official and/or Signatory Authority) to abide by the terms and conditions for use of the NetDMR System, and memorializes a mutual understanding that the signer of this agreement is as legally bound, obligated, and responsible by use of the assigned electronic signature as by a hand-written signature.
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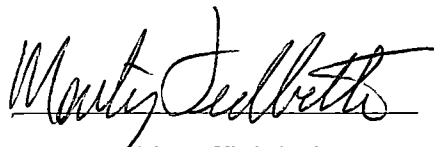
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Permit ID(s): AR0033880

I, Monty Ledbetter Utilities Director, have the authority to enter into this Agreement for HOT SPRINGS, CITY OF - REGIONAL WWTP and Permit ID AR0033880 under the applicable standards. I request Arkansas DEQ grant Harold Mauldin the ability to submit DMRs for Permit ID AR0033880.



Responsible Official Signature  
Responsible Official Phone

Monty  
Ledbetter  
Utilities  
Director

Title

10/19/18

Date

**E. Signatory Authority Signature**

The Signatory Authority is the NetDMR user that submits this agreement to request approval to electronically sign DMRs. The Signatory Authority has the authority to sign DMRs under 40 CFR §122.22(a) or is a duly authorized representative(s) who has been delegated the authority to electronically sign DMRs by the Responsible Official as described in 40 CFR §122.22(b).

Permit ID: AR0033880

I, Harold Mauldin, am authorized by the signatory authority named in Part D of this document, who does have the authority under the applicable standards, to enter into this agreement for HOT SPRINGS, CITY OF - REGIONAL WWTP and Permit ID AR0033880.

By submitting this application for AR0033880, I, Harold Mauldin, have read, understand, and accept the terms and conditions of this subscriber 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.



Signatory Authority Signature

FACILITIES  
OPERATIONS  
MANAGER

Title

10-19-18

Date

Print this form, save a copy for your records, and mail to:

Arkansas DEQ

Attn: Water Enforcement

Arkansas Department of Environmental Quality

5301 Northshore Drive

North Little Rock , AR 72118-5317

**Checklist - Regulatory Authority Use Only:**

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	Regulatory Authority Approves NetDMR Authorization		
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	Notification to User		
	Inactivated?		

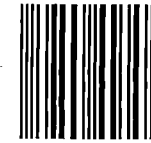
Harold Mauldin  
Wastewater Treatment  
320 Davidson Drive  
Hot Springs, Ar. 71901



7015 0640 0000 3285 1383



1000



72118

U.S. POSTAGE PAID  
FCM LG ENV  
HOT SPRINGS NATIONAL PARK,  
71913  
OCT 19, 18  
AMOUNT  
**\$7.62**  
R2303S102507-04

**RETURN RECEIPT  
REQUESTED**

Arkansas DEQ  
Attn: Water Enforcement  
5301 Northshore Drive  
North Little Rock, Ar. 72118-5317

