INTERNAL Change of Authorization Form - All permits

version 1.18

(Submission #: HPR-3S8B-JZYE4, version 1)

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Date: 2023.01.31 14:36:45 -06:00
Reason: Copy Of Record
Location: North Little Rock, Arkansas

Details

AFIN 70-00473

Submission ID HPR-3S8B-JZYE4

Form Input

Application and Information

Date Request Received

1/30/2023

AFIN number

70-00473

Attach Permit Transfer Form & Disclosure Statement

ARG550540_Anthony Forest Products LLC 1.pdf - 01/31/2023 02:36 PM

Comment

NONE PROVIDED

1/31/2023 2:36:45 PM Page 1 of 1

REQUEST FOR CHANGE OF AUTHORIZATION (CERTIFICATION AND SIGNATORY REQUIREMENTS)

	NPDES Permit Number: ARG550540	Facility Name: Anthony Forest Products, LLC
	(check one) New Responsible Offi Both (sections 1 and 2)	al (or duly authorized representative) (sections 1 and 2) icial (complete section 2 only) Official (or duly authorized representative) (sections 1 and 2)
1.		d representative) (See 122.22(b); the individual, authorized by sibility for the overall operation of the regulated facility or ty for environmental matters for the company.)
	The ranking official hereby designates the following <u>individual</u> as the cognizant official, (duly authorized representative) for signing the <u>permit required reports</u> , etc., including Discharge Monitoring Reports (DMR) required by the permit, and other information requested by the Director: Signature of the Cognizant Official (Duly Authorized Representative)	
	Chelsea Fisher	
	Name (First Name, MI, Last Name) Typed or Print	ted
	101 Dauphin Street Suite 600	Mobile, Alabama 36602
	Mailing Address	City, State, and Zip
	Environmental Coordinator (25	51) 459-8768
	Title Email Address: Chelsea.Fisher@Canfor.	Phone Fax
2.	By <u>signature below</u> , the responsible official <u>certifies</u> that the above named <u>individual</u> is qualified to act as the duly authorized representative <u>under the provisions of 40 CFR 122.22(b)</u> . 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: if	t is the responsible corporate officer. Partnership or Sole Municipality, State, Federal or other Public Agency: the principal
	Red To	1-30.23
	Signature of the Responsible Official	Date
	Phil Witter	<u> </u>
	Name (First Name, MI, Last Name) Typed or Print	ted
	101 Dauphin Street / Suite 600	Mobile, Alabama 36602
	Mailing Address	City, State, and Zip
	ENV. Manager US Operations (25	
	Title A/C Email Address: Phil.Witter@Canfor.com	Phone Fax
	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 fals information, including the possibility of fine and imprisonment for knowing violations.	
	Will the Responsible Official also be the person sign	ning submittals?