

SLUG DISCHARGE PREVENTION PLAN CERTIFICATION

COMPANY NAME: DISCHARGE ADDRESS: INDUSTRIAL WASTEWATER DISCHARGE PERMIT NUMBER:					
			prevent discharges to the sanita limited to an accidental spill or Interference or Pass Through, or regulations, local limits, or Pern	ry sewer that are considered non-ing a non-customary batch Discharge in any other way violate the San Jonit conditions. If conditions change	rge Prevention Plan has been developed to routine, episodic in nature, including but not e, which has reasonable potential to cause sé-Santa Clara Regional Wastewater Facility's e onsite that affect the potential for a Slug d an updated plan will be submitted.
				CERTIFICATION STATE	<u>MENT</u>
or supervision in accordance w evaluate the information submit or those persons directly respo best of my knowledge and belie	ith a system designed to assure the ted. Based on my inquiry of the ponsible for gathering the informate, true, accurate, and complete. It	hments were prepared under my direction nat qualified personnel properly gather and person of persons who manage the system, tion, the information submitted is, to the am aware that there are significant penalties mprisonment for knowing violations."			
Printed Name	Email	Title			
Signature EXECUTIVE OFFICER:	Date	Phone			
EXECUTIVE OFFICER.					
Printed Name	Email	Title			
Signature	Date	Phone			

Municipal Code requires that reports required by the Director shall be **signed by an Executive Officer of the business filing the application**. Such Executive Officer shall be at least of the level of Vice President, General Partner, President, or an individual responsible for the overall operation of the facility applying for the Permit or meet the Federal requirements for NPDES applications as contained in Code of Federal Regulations, Title 40 Protection of the Environment, Part 403.12(I).