**I. Applicant - Owner of Potential Contamination Source for which Waiver is Requested**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **First Name:** |       | **Last Name:** |       | **Phone:** |       |
| **Company Name:** |       | **Fax:** |       |
| **Mailing Address:** |       |  |  |
| **City:** |       | **State:** |       | **Zip Code:** |       |
| **Email Address:** |       |

**II. Potential Source of Contamination**

|  |  |
| --- | --- |
| **Property Address:** |       |
| **Legal Description:** | Lot: |       | Block: |       | Subdivision: |       | Addition: |       |
| **or** |  |  |  |  |  |  |  |  |  |  |
| **Location:** | Meridian: |       | Section: |       | Township: |       | Range: |       | Tax Lot: |       |

**III. Public Water System (PWS) to which waiver is requested**

|  |  |  |  |
| --- | --- | --- | --- |
| **PWS Name:** |       | **PWSID:** |  |

**IV. Project Engineer**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **First Name:** |       | **Last Name:** |       | **Phone:** |       |
| **Company Name:** |       | **Fax:** |       |
| **Mailing Address:** |       |  |  |
| **City:** |       | **State:** |       | **Zip Code:** |       |
| **Email Address:** |       | **AK P.E. License No.:** |       |

**V. Applicant's Statement**

|  |  |
| --- | --- |
| **Project Name:** |       |
| I have authorized submittal of the enclosed items for the above-referenced waiver project. By my signature, I certify the information above is correct and my authority to sign this statement (18 AAC 15.030), as the owner of the potential source of contamination the waiver is requested for, is based on one of the following: |
| [ ]  | **Corporation:** I am a principal executive officer of at least the level of vice president or his/her duly authorized representative, if the representative is responsible for the overall management of the project or operation. |
| [ ]  | **Partnership:** I am a general partner. |
| [ ]  | **Sole proprietorship:** I am the proprietor. |
| [ ]  | **Municipal, State, Federal, or other public facility:** I am either a principal executive officer, ranking elected official, or other duly authorized employee. |
|  |  | mo/dy/yr |  |       |  |       |
| **Applicant’s Signature** |  | **Date** |  | **Printed Name** |  | **Title** |