

Attachment F

BMP/QAPP Certification

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Facility Name:_____

APDES Permit Number:_____

The BMP/QAPP Plan is complete and is available upon request to DEC.

The BMP/QAPP Plan is being implemented by trained employees.

The BMP/QAPP Plan has been reviewed and endorsed by the facility manager.

The individuals responsible for implementation of the BMP/QAPP Plan have been properly trained.

Summary of Revisions

“I certify under penalty of law that this document and all attachments were prepared under my direction or 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.”

Signature:	Title/Company:
Print Name:	Date: