



Please do not mail.  
Submit through ePlace.  
See instructions.

# Certification Statement

For BRP WP82 – Administrative Renewal of Groundwater  
Discharge Permit

## A. Engineer Information

**Important:** When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.



\_\_\_\_\_  
Engineer Name

\_\_\_\_\_  
Company

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Email Address

## B. Certification

I, \_\_\_\_\_  
Name

attest under the pains and penalties of perjury:

(i) that I am a registered professional engineer in the State of Massachusetts with a concentration in civil, sanitary or environmental engineering and am employed by

\_\_\_\_\_  
Name of Company/Firm

(ii) that I have inspected the treatment works and best management practices required by the permit for

\_\_\_\_\_  
Name of Facility

\_\_\_\_\_  
Permit Number

And based on that inspection, certify to MassDEP that there are no deficiencies in said treatment works and best management practices that prevent or would prevent the discharge from meeting all the terms and conditions of the permit, including but not limited to, the effluent limitations set forth in 314 CMR 5.00.

I am aware that there are significant penalties including, but not limited to, possible fines and imprisonment for willfully submitting false, inaccurate, misleading or incomplete information. I am also aware that submitting false, inaccurate misleading or incomplete information could lead to modification, suspension or revocation of any permit granted pursuant to this application.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Massachusetts PE Number

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date



# Certification Statement

## For BRP WP82 – Administrative Renewal of Groundwater Discharge Permit

### C. Applicant Certification

I, \_\_\_\_\_, am eligible to sign this application in accordance with 314 CMR 5.14(1) and by signing certify that:

- 1) 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 diligent 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.
  
- 2) I am aware that submitting a false and misleading certification could lead to modification, suspension, or revocation of any permit granted pursuant to this application, as set forth in 314 CMR 5.12.
  
- 3) I shall maintain a copy of all records, regardless of form (e.g., both printed and electronic) upon which I rely in making the certifications in this Section D, until a final decision on this application has been issued by the Department and, if this application is approved, will do so thereafter in accordance with permit conditions. Such records shall include without limitation all documents described in paragraph 1, above, and any supporting documentation provided to me by, or relied upon by, such qualified professionals as I may consult.
  
- 4) I will be responsible for publication of public notice of the applicable permit proceedings, as required by 314 CMR 2.06.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Printed Name of Applicant

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Name of Preparer

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Title of Preparer

\_\_\_\_\_  
Email



# Certification Statement

**For BRP WP82 – Administrative Renewal of Groundwater  
Discharge Permit**

## **D. Additional Application Certification for Privately Owned Wastewater Treatment Facilities (PWTFS)**

- 1) I hereby acknowledge that it is my responsibility:
  - a. to ensure that I understand the “Requirements for Privately Owned Wastewater Treatment Facilities” set forth at 314 CMR 5.15 (1), (2), and (3) and in related provisions of the Ground Water Discharge Permit Program regulations, 314 CMR 5.00, before I provide the certification in paragraph 2, below;
  - b. to ensure that I have compiled, evaluated and/or established all pertinent documents, instruments, records and information necessary to provide the certification in paragraph 2, below;
  - c. to consult with legal, technical and other qualified professionals, as necessary for me to understand and comply with the above requirements and to make the certification in paragraph 2, below.
  
- 2) Based on the foregoing, I hereby certify that I have fully and completely satisfied and complied with each and every applicable requirement set forth in 314 CMR 5.15 (1), (2), and (3) for coverage under a general permit issued for the construction, installation, modification, operation and maintenance of a PWTF; and will continue to do so until a final decision on this application has been issued by the Department and, if this application is approved, will do so thereafter in accordance with the general permit conditions.
  
- 3) I shall maintain a copy of all records, regardless of form (e.g., both printed and electronic) upon which I rely in making the certifications in this Section E, until a final decision on this application has been issued by the Department and, if this application is approved, will do so thereafter in accordance with permit conditions. Such records shall include without limitation all documents described in paragraph 1, above, and any supporting documentation provided to me by, or relied upon by, such qualified professionals as I may consult in certifying as to the information set forth in paragraph 2, above.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Printed Name of Applicant

\_\_\_\_\_  
Date Signed