

Post Construction Certification for Authorization to Discharge

1. I am a licensed professional engineer registered to practice in New York State;
2. Wastewater treatment system(s) serving the identified facility is (are) designed and constructed in accordance with (check one):
 - (a) Design Standards for Intermediate-Sized Wastewater Treatment Systems (NYSDEC, 2014), or
 - (b) Design Standards for Wastewater Treatment Works in the Lake George Basin (NYSDEC, 2015) for facilities in the Lake George Basin.

Stamp and Signature of Certifying Engineer

Date

Printed Name of Professional Engineer

Telephone

Email

Professional Engineer's Mailing Address

Post Office City

State

Zip

Name of Owner

SPDES #

Facility Name and Address

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.

Professional Engineer Signature _____