

Industrial stormwater electronic
signature submittal agreement/
signatory registration form**MPCA e-Services**

Doc Type: Electronic Signature User Agreement

Facility information* Facility name: Grand Rapids Sludge Landfill SW-210 * Permit number: MNR05343N**A. Purpose of this form**

- Identification and authorization of an industrial stormwater (ISW) e-Service signatory (person with recognized authority to electronically sign ISW documents on behalf of a permit applicant or permittee and submit industrial Stormwater monitoring results).
- Delegation of authority from a responsible official to other qualified staff per Minn. R. 7001.0060.

B. Agreements

By their signature on this agreement, the identified signatory (account holder/user) and the responsible official agrees to:

1. Protect the account password, PIN, and answers to challenge questions from compromise.
2. Not allow anyone unauthorized access to the account, account password, PIN, or answers to challenge questions.
3. Promptly report to the MPCA any evidence of loss, theft, or other compromise of the account, account password, PIN, or answers to challenge questions.
4. Change the account password and User PIN if there is reason to suspect or believe that any have been become known to another person.
5. Notify the MPCA if the account holder or the responsible official named in this document no longer represents the named facilities in the capacity indicated on or authorized by this form as soon as the change becomes known.
6. Review in a timely manner the email onscreen acknowledgements and copies of record submitted and certified through my account to MPCA e-Services.
7. Report any evidence of discrepancy between the document submitted and what the MPCA e-Services received.

C. MPCA e-Services signatory (account holder) signature acknowledgments**By typing/signing my name below**, as an account holder, I acknowledge that:

1. I will be legally bound, obligated, and responsible for the use of my created electronic signature as I would be using my handwritten signature.
2. I have read, understand, and accept the terms and condition of this submittal agreement.
3. I have read the certification requirements of Minn. R. 7001.0070 and 7001.0540 and understand that certifications are made subject to the penalty of law, including penalties for submitting false information.
4. I have a current User ID in place with the MPCA e-Services.
5. *Signatory (account holder) user ID: SALANGER
6. *☐ I am the responsible official authorized to submit and sign per Minn. R. 7001.0060.
or
7. *☒ I am not the responsible official authorized to submit and sign per Minn. R. 7001.0060. **Section D is required.**

Signatory (account holder) signature

* Signature: Stephen Langer * Title: Wastewater Operations Director
(This document has been electronically signed.)

* Address: 1105 SE 23rd Ave * City: Grand Rapids

* State, Zipcode: MN, 55744 * Date (mm/dd/yyyy): 9/8/2026

* Phone number: 218.326.7197 * Email address: salanger@grpuc.org

D. If the signatory (account holder) is not the responsible official for the listed facility, the responsible official must complete this section.

I, Tasha Connelly
(Responsible official printed legal name)

Mayor
(Responsible official title)

certify that I am the responsible official authorized to submit and sign per Minn. R. 7001.0060.

By typing/signing my name below, I authorize and delegate authority to the user identified in section 'C' above. By my signature on this document, I understand that this authorization is valid unless the MPCA is notified by me or the above named user, in writing that the authorization status has changed.

Responsible Official signature

* Signature: _____
(This document has been electronically signed.)

* Title: Mayor

* Address: 420 N. Pokegama Ave

* City: Grand Rapids

* State, Zipcode: MN, 55744

* Date (mm/dd/yyyy): 9/8/2026

* Phone number: 218.326.7600

* Email address: tconnelly@grandrapidsmn.gov

E. Final step – Submit to the MPCA

Please sign and date section 'C' (if you are the signatory and responsible official) or sections 'C' and 'D' (if you are the signatory but are **not** the responsible official), and send completed form via email to onlineservices.pca@state.mn.us, using the subject line: "ISW Signature Registration Form".

Fields preceded by a single red asterisk () indicates a required field.
All **required fields** must be completed or submittal agreement will be returned.*