Contractor Certification Statement

	NYR	
Name of Construction Site	DEC Permit ID	Municipality (MS4)
I hereby certify that I underst	and and agree to comply w	ith the terms and conditions of the
SWPPP and agree to impleme	ent any corrective actions id	lentified by the <i>qualified inspector</i>
during a site inspection. I also	understand that the owner	r or operator must comply with the
terms and conditions of the r	nost current version New Yo	ork State Pollution Discharge
Elimination System ("SPDES")	general permit for stormw	ater discharges from construction
activities and that it is unlawf	ful for any person to cause o	or contribute to a violation of water
quality standards. Furthermo	ore, I understand that certify	ying false, incorrect or inaccurate
information is a violation of t	he referenced permit and th	ne laws of State of New York and
could subject me to criminal,	civil and /or administrative	proceedings.
Name		Title
Signature		Date
Company Name & Address		Phone
		
Provisions Responsible for		
Information or	the Trained Certified Cont	ractor or Subcontractor
Name of Trained Employee	 Title of Trained Employe	ee NYSDEC SWT#
Name of Trailieu Employee	Title of Trailled Elliploye	EC INTODEC 3VV 1#

A copy of this signed contractor certification statement must be maintained in the SWPPP on site.