Division of Surface Water
Annual Sewage Sludge Report 2013

Station 584 - Certification Statement

Treatment works name:	Ohio NPDES permit #:

Certification Statement

"I certify, under penalty of law, that the information that was used to determine compliance with the exceptional quality pathogen reduction alternative identified in Table 2 of this annual report and the vector attraction reduction alternative identified in Table 2 of this annual report was prepared under my direction and supervision in accordance with the system designed to ensure that qualified personnel properly gather and evaluate this information. I am aware that there are significant penalties for false certification including the possibility of fine and imprisonment."

_____ _____ / _____ / _____
Signature Date

_____ _____
Printed Name Title

(A representative of the treatment works shall sign this form in accordance with the instructions for this annual report)

Appendix B

EPA 4229 (11/13)