



For any flow of vehicle maintenance wastewater (excluding discharges previously permitted by DEEP, discharges from small volume autobody repair facilities, or discharges from small volume vehicle detailing facilities), or cumulative process wastewater discharges with a maximum daily flow equal to or greater than 1,000 gallons per day but less than 25,000 gpd, and the process wastewater requires treatment to meet effluent limitations, the following certification must be signed by a Qualified Professional Engineer (QPE) or Qualified Certified Hazardous Materials Manager (QCHMM) if wastewater requires treatment (see Section 4(c)(3)(B) of the MIU Wastewater General Permit) to meet effluent limitations. A notification will be considered incomplete if the certification is required but not attached. **Please refer to the instructions while completing this form.**

"I hereby certify that I am a Qualified Professional Engineer or a Qualified Certified Hazardous Materials Manager as defined in the General Permit for Discharges from Miscellaneous Industrial Users (MIU GP). I am making this certification in connection with a notification under such general permit, submitted to each applicable POTW Authority by

Insert Name of Industrial User for an activity located at Insert Site Activity Address.

I have personally examined and am familiar with the information that provides the basis for this certification, including, but not limited to, all information described in Section 3(b)(15)(C) of such general permit and I certify, based on reasonable investigation, including my inquiry of those individuals responsible for obtaining such information, that the information upon which this certification is based is true, accurate and complete to the best of my knowledge and belief. I further certify that I have made the affirmative determination required in accordance with Section 3(b)(15)(D)(i) or (ii) of this general permit and that my signing this certification constitutes conclusive evidence of my having made such affirmative determination. If the discharge is vehicle maintenance wastewater and a treatment system is required, I certify that I have inspected the treatment system and such treatment system complies with Appendix H(12)(A) of the MIU GP. I understand that this certification may be subject to an audit by the Commissioner in accordance with section 22a-430b of the Connecticut General Statutes, and I agree to cooperate with the Commissioner should such an audit be required, including, but not limited to providing information as may be requested in writing by the Commissioner in connection with any such audit. I also understand that knowingly making any false statement in this certification may be punishable as a criminal offense, including the possibility of fine and imprisonment, under section 53a-157b of the Connecticut General Statutes and any other applicable law.

Signature of Qualified Professional	Date
	P.E. or C.H.M.M. Number (if applicable)
	Affix P.E. or C.H.M.M. Stamp Here
	(if applicable)
Printed Name of Qualified Professional	