Minnesota Pollution Control Agency

520 Lafayette Road North
St. Paul, MN 55155-4194

Electronic Submittal Agreement for Air Emissions Inventory Report and Submitter Registration Form

Air Emissions Inventory Program, MPCA e-Services

Modifications to this form are prohibited.

Submitter (Account Holder) Information:

Name:	Dua Thor	User Account Number:	77000504
Phone Number:	651.451.6858 x 1520	Email Address:	dua.thor@sanimax.com

Facility Information:

Facility ID:	03700070	Facility Name:	Sanimax USA LLC

A. Purposes of this form:

1. Identification and authorization of an Air Emissions Submitter (person with recognized authority to electronically sign air emission inventory documents).
2. Identification and/or updating of Air Responsible Official in the MPCA databases per Minn. R. 7007.0100, subp. 21
3. Delegation of authority from Responsible Official to other qualified staff per Minn. R. 7007.0100, subp. 21

B. Agreements:

By signature on this agreement, the identified Submitter (Account Holder/User) and the Responsible Official agrees to:

1. Protect the account password and answers to challenge questions from compromise.
2. Not allow anyone unauthorized access to the account, account password or answers to challenge questions.
3. Promptly report to the MPCA any evidence of loss, theft, or other compromise of the account, account password or answers to challenge questions.
4. Change the account password if there is reason to suspect or believe that it has 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 Notify the MPCA if the account holder or the Responsible Official named in this document no longer represents the named facility in the capacity indicated on or authorized by this form as soon as the change becomes known.
6. Review in a timely manner: emails, 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 Submitter (Account Holder) Signature

By signing 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 account with the MPCA e-Services.
5. *Submitter (Account Holder) account number 77000504
6. ☐ * **I am** the Responsible Official authorized to submit and sign per Minn. R. 7007.0100, subp. 21.

   Note: *The individual who is identified as the 'Responsible Official' will be updated in the MPCA database and become the legal and binding Responsible Official for the above named facility.*

   or,

   ☑ * **I am not** the Responsible Official authorized to submit and sign per Minn. R. 7007.0100, subp. 21. Section D is required.

Submitter (Account Holder)

*Print Name: Dua Thor

*Title: EHS Specialist

*Signature: Dua Thor

*Date (mm/dd/yyyy): 3/21/17

D. If the Submitter (Account Holder) IS NOT the Responsible Official for the listed facility, the Responsible Official must complete this section

I, Donn Johnson — General Manager
Responsible Official Printed Legal Name — *Responsible Official Title*

certify that I am the Responsible Official per Minn. R. 7007.0100, subp. 21, by virtue of my status as one of the following: President of corporation, Vice- President in charge of a principal business function, Secretary of corporation, Treasurer of corporation, or Other person who performs policy or decision-making functions for the corporation similar to the functions performed by those listed.

I authorize and delegate authority to the user identified in section 'C' above. By 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.

Note: The individual who is identified as the 'Submitter (account holder)' will be updated in the MPCA database and become the legal and binding Responsible Official for the above-named facility.

*Print Name: Donn Johnson
*Title: General Manager
*Signature:
*Date (mm/dd/yyyy): 03-21-2017
Phone Number: 920-494-5233 x1218
EMail: donn.johnson@sanimax.com

E. Final Step - Submit to the MPCA

Print this form and sign and date section 'C' (if you are the Submitter and Responsible Official) or sections 'C' and 'D' (if you are the Submitter but are NOT the Responsible Official), and mail or hand deliver to:

Attn: Air Quality Permit Document Coordinator
Minnesota Pollution Control Agency
520 Lafayette Rd N
St Paul, MN 55155-4194

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

For MPCA Use Only

77012087
Authorization Number

Becki Olson — 3/23/17
Authorizing MPCA Staff Signature — Date