



**Arizona Department of Environmental Quality**  
**myDEQ ELECTRONIC SIGNATURE AGREEMENT**

The Arizona Department of Environmental Quality (ADEQ) requires any **myDEQ** user who intends to submit an application or compliance information through the web portal to complete an Electronic Signature Agreement (ESA). Compliance information includes any information intended to satisfy a federal requirement to report information to the U.S. Environmental Protection Agency (EPA) under any provision of Title 40 of the U.S. Code of Federal Regulations (CFR), or any state requirement to report information to ADEQ under Title 18 of the Arizona Administrative Code (AAC).

This ESA is compliant with the EPA's "Cross Media Electronic Reporting Regulations" (CROMERR), therefore compliance with this ESA will satisfy EPA's electronic signature requirements and data submitted through **myDEQ** will be acceptable for state and federal reporting requirements.

The following information and affidavit of identity must be provided to ADEQ to establish electronic signature credentials for a Responsible Officer (RO). An RO is any principal officer, partner, or proprietor responsible for a key business function, or any other person who performs similar decision-making duties and is authorized to contractually bind the organization.

Any electronic submittal to the **myDEQ** portal must bear the valid electronic signature of an RO who would be a required signatory under 40 CFR or AAC Title 18 to sign the paper document for which the electronic document is a substitute.

Account Name:	
Address:	
City, State, Zip:	
Phone Number	
E-mail Address:	
Responsible Officer Name:	
Responsible Officer Title	
Account Manager Name	
Account Manager Title	

I, [*Name of Responsible Official (pre-populate)*], have the authority to enter into this Agreement on behalf of [*prepopulate Organization name*] and that I am that signatory authorized to represent [*Organization*], and I am able to sign and submit reports and other information on behalf of that [*Organization*] in the capacity required by federal or state statute and/or regulation.

I understand that an electronic document submitted to satisfy a federal or state reporting requirement bears an electronic signature that legally binds, obligates, and makes the Responsible Officer responsible, to the same extent as the handwritten signature would on a paper document submitted to satisfy the same federal or authorized program reporting requirement

I understand that proof that a particular signature device was used to create an electronic signature will suffice to establish that the individual uniquely entitled to use the device did so with the intent to sign the electronic document and give it effect and that the use of electronic documents or information derived from electronic documents may be as evidence in enforcement or other proceedings.

I certify that by signing and submitting this agreement, I have read, understand, and accept all the terms and conditions of this electronic signature agreement. I certify under penalty of law that I have personally examined and am familiar with the information submitted in this agreement and I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

\_\_\_\_\_  
Responsible Official Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_,

\_\_\_\_\_ (Notary Public), \_\_\_\_\_ County.

My commission expires \_\_\_\_\_ 20 \_\_\_\_\_

PLEASE MAIL THIS DOCUMENT TO:

**Arizona Department of Environmental Quality**  
**ATTN: myDEQ Administrator**  
**1110 West Washington Street**  
**Phoenix, AZ 85007**



## MyDEQ Terms and Conditions

(1) Agree to protect the electronic signature credential, consisting of my **myDEQ** user name and password, from use by anyone except me. Specifically, I agree to maintain the secrecy of the password; I will not divulge or delegate my user name and password to any other individual; I will not store my password in an unprotected location; and I will not allow my password to be written into computer scripts to achieve automated login.

(2) Agree to contact the **myDEQ** Help Desk at 1-844-827-4768 as soon as possible, but no later than 24 hours, after suspecting or determining that my user name and password have become lost, stolen or otherwise compromised.

(3) Agree to notify ADEQ within ~~ten working three~~ (3) business days if my duties change and I no longer need to interact with the **myDEQ** portal on behalf of my organization. I agree to make this notification by notifying the myDEQ Help Desk at 1-844-827-4768 or myDEQ.support@azdeq.gov.

(4) Understand that I will be informed through my registered electronic mail (e-mail) address whenever my user name or password have been modified.

(5) Understand that the **myDEQ** portal reports the last date my user name and password were used immediately after successfully logging into **myDEQ**.

(6) Understand and agree that I will be held as legally bound, obligated, and responsible for the use of my electronic signature as I would be using my hand-written signature.

(7) Understand that whenever I electronically sign and submit an electronic document to the **myDEQ** web portal, I will receive an e mail at my registered e mail address; This e-mail will inform me that a submission has been made to **myDEQ** from my user account and will contain instructions to view information regarding the submission, including my Copy of Record.

(8) Agree that if I receive an e mail notification for any activity that I do not believe that I performed, I will notify the myDEQ Help Desk as soon as possible, but no later than 24 hours, after receipt.

(9) Agree to contact the **myDEQ** Help Desk if I do not receive an e mail notification within 3 business days for any electronically signed submission using my credentials.

(10) Agree to report, within 24 hours of discovery, any evidence of discrepancy between any electronic document I have signed and submitted and what the myDEQ web portal has received from me by contacting the **myDEQ** Help Desk.

(11) Agree to retain a copy of this signed agreement as long as I continue to represent the regulated entity specified above as signatory of the company's electronic submissions.

(12) Certify I have the authority to enter into this Agreement on behalf of the Organization identified above, and I am that signatory authorized to represent that Organization, and I am able to sign and submit reports and other information on behalf of that Organization in the capacity required by federal or state statute and/or regulation.

(13) Understand that an electronic document submitted to satisfy a federal or state reporting requirement bears an electronic signature that legally binds, obligates, and makes the Responsible Officer responsible, to the same extent as the handwritten signature would on a paper document submitted to satisfy the same federal or authorized program reporting requirement

(14) Understand that proof that a particular signature device was used to create an electronic signature will suffice to establish that the individual uniquely entitled to use the device did so with the intent to sign the electronic document and give it effect and that the use of electronic documents or information derived from electronic documents may be as evidence in enforcement or other proceedings.

(15) Certify that by signing and submitting this agreement, I have read, understand, and accept the terms and conditions of this electronic signature agreement. I certify under penalty of law that I have personally examined and am familiar with the information submitted in this agreement and I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.



## MyDEQ Account Manager Authorization Agreement - OPTIONAL

The Responsible Official is the appropriate individual with the authority to sign and submit reports; however an Account Manager can be designated to manage account contact information.

I, [Name of Responsible Official (pre-populate)], have the authority to enter into this Agreement for [prepopulate organization name]. I request ADEQ to grant [Name & Title of Account Manager] to manage **myDEQ** account contact information on behalf of my organization.

\_\_\_\_\_  
Responsible Official Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

This Account Manager Agreement was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 201\_\_ by

\_\_\_\_\_  
Responsible Official (pre-populate?)

\_\_\_\_\_  
Notary Public

My commission expires:\_\_\_\_\_

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## MyDEQ Delegated Account Manager Authorization Agreement - OPTIONAL

An Account Manager may also receive “delegated” signature and submittal authority from the Responsible Official if the following conditions are certified with a wet-ink signature:

- (1) The Responsible Official has the authority to delegate signature and submittal authority on behalf of [prepopulate Organization name]
- (2) I, [Account Manager], as a Delegated Account Manager, understand that an electronic document submitted to satisfy a federal or state reporting requirement bears an electronic signature that legally binds, obligates, and makes the Delegated Account Manager responsible, to the same extent as the handwritten signature would on a paper document submitted to satisfy the same federal or authorized program reporting requirement.
- (3) I understand that proof that a particular signature device was used to create an electronic signature will suffice to establish that the individual uniquely entitled to use the device did so with the intent to sign the electronic document and give it effect and that the use of electronic documents or information derived from electronic documents may be as evidence in enforcement or other proceedings.
- (4) I certify that by signing and submitting this agreement, I have read, understand, and accept all the terms and conditions of this electronic signature agreement. I certify under penalty of law that I have personally examined and am familiar with the information submitted in this agreement and I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment

\_\_\_\_\_  
Account Manager Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

This Account Manager Agreement was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 201\_\_ by

\_\_\_\_\_  
Account Manager (pre-populate?)

\_\_\_\_\_  
Notary Public

My commission expires:\_\_\_\_\_

PLEASE MAIL THIS DOCUMENT TO:

**Arizona Department of Environmental Quality  
ATTN: myDEQ Administrator  
1110 West Washington Street  
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**REFERENCE LIST A**

The following list of actions within the myDEQ portal that must be completed by a designated Responsible Officer or that may be completed by a designate Account Manager

<b>myDEQ Action</b>	<b>Responsible Officer <u>AND</u> 'Delegated' Account Manager</b>	<b>Account Manager</b>
Create corporate account	YES	<b>NO</b>
Designate Account Manager	YES	<b>NO</b>
Create facility accounts	YES	YES
Designate Facility Responsible Officer	YES	YES
Designate Facility Account Manager	YES	YES
Modify account information	YES	YES
Enter compliance data	YES	YES
Submit compliance data	YES	<b>NO</b>
Receive notices	YES	YES