

## Environmental Control Electronic Subscriber Agreement (ESA) and SLEIS Account Request **South Carolina Department of Health and**

(All fields are required)

Facilit	y Name:			
Air Permit Number:			Phone No.:	
Certif	ying Official's E-Mail	Address:	of Health and Environmental Control will use this e-m	
		(Department	of Health and Environmental Control will use this e-m	ail address as your User ID in SLEIS)
l,	(Printed Name (	of Certifying Official)	, do hereby affirm on this	Day of
	, 20	that I understa	and and agree to the following:	
1.	_	nated by the above alth and Environme	e facility to submit Emissions Inver	ntory Data electronically to
2.	•	as legally bound, o	bligated, and responsible by the el	ectronic signatures created
3.	It is understood that I and the above facility are subject to the requirements set forth by Department of Health and Environmental Control in S.C. Regulation 61-115, Environmental Electronic Reporting Requirements.			
4.	I will be given a sinventory data.	Submitter role tha	at allows editing and electronic su	ıbmission of the emission
5.	I agree to protect and keep secure my User ID and password. In the event I become aware that any accounts for this facility become compromised, I will notify Emissions Inventory staff as soon as possible.			
6.	•	elf, the following po	eople are authorized to have Editor	roles in SLEIS:
			(5 11411	
	(Name)		(Email Address)	
	(Do not use	black ink)	(Signature of Certifying Official	<del>/</del> )
				*

## Instructions for ESA:

This agreement will require information from a facility's Certifying Official (which is the "Responsible Official" as defined in Regulation 61-62.7 Title V Operating Permit Program) pertaining to a digital signature within SLEIS. The Certifying Official will be held as legally bound, obligated, or responsible by the electronic signature created as by a wet-ink, handwritten signature. This form will be secured in a locked cabinet and will be kept as long as the current retention schedule allows. This ESA must contain original signatures. Do NOT use black ink for the signatures.

There are two types of accounts: Submitters and Editors. Certifying Officials have a Submitter role that allows electronic submission of emissions inventory data. Submitters can also make data changes in SLEIS and can designate facility Editors for facility on this form (if desired). Editors can only enter data and make changes; they cannot submit the inventory. In order to allow staff to easily assist facility representatives with reporting questions, Emissions Inventory personnel will be assigned Viewer roles for all SLEIS Emissions Inventory reports.

The ESA is used to update the account each collection cycle or as needed. After this form is processed, all persons listed on this form will receive an e-mail notification. New users will receive an embedded link to set their initial password in SLEIS. This link will expire 24 hours after the message is sent. For new Submitters, challenge questions will also need to be set up. **These notices will originate from 'El\_submittals@dhec.sc.gov'.** 

Facility Name: Company name that is used for mailing. Many companies own two or more facilities. If this

is the case for this facility, please indicate the specific name/identifier for this facility.

Air Permit Number: Provide the State Air Quality Operating Permit Number for the facility.

Phone Number: Telephone number, including area code, of Certifying Official. Please include an extension, if

applicable.

E-mail Address: Enter the e-mail address of the Certifying Official. This will be your User ID for SLEIS.

Certifying Official: Print the name of the Certifying Official.

Authorized SLEIS

**Editors:** 

This is the list of standard users (Editors) who are authorized to edit electronic inventory data using SLEIS. Only those listed on this form will be granted access to SLEIS for this facility. Should you later decide to remove or add someone, you should e-mail your request to

'EI\_submittals@dhec.sc.gov'.

Affirmation Section: The Certifying Official must sign the form. This signature will serve as the wet-ink signature

when electronically signing the data submittal in SLEIS. Do NOT use black ink for the

signatures.

Electronic copies of this form will not be accepted. Please mail this completed form to:

Manager

S.C. Department of Health and Environmental Control ATTN: Bureau of Air Quality - Emission Inventory Section 2600 Bull Street

Columbia, SC 29201