

U.S. Environmental Protection Agency
ELECTRONIC SIGNATURE AGREEMENT

RECEIVED
Florida Department of Environmental
Protection

MAY 25 2018

In accepting the electronic signature credential issued by the U.S. Environmental Protection Agency (EPA) to sign electronic documents submitted to EPA's Central Data Exchange (CDX), and as a representative for the Permitting & Compliance Assistance Program

Electronic Signature Holder Company Information

Organization Name:	LIGHTING RESOURCES LLC INC
Address:	1007 SW 16TH LANE
City, State, Zip:	OCALA, FLORIDA 34471
Province:	
Country:	
Phone Number:	352-509-3001
E-mail Address:	buff.fritz@lightingresourcesinc.com
Job Title:	BRANCH MANAGER
Registrant's Name:	BUFF FRITZ
CDX User Name:	BUFF2017

I, BUFF FRITZ (Electronic Signature Holder):

- (1) Agree to protect the electronic signature credential, consisting of my Central Data Exchange (CDX) user identification 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 U.S. EPA CDX Help Desk at 1-888-890-1995 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) I agree to notify CDX within ten working days if my duties change and I no longer need to interact with the CDX on behalf of my organization. I agree to make this notification by notifying the CDX Technical Support staff at 1-888-890-1995 or helpdesk@epa.gov.
- (4) Understand that I will be informed through my registered electronic mail (e-mail) address whenever my user identification or password have been modified.
- (5) Understand that CDX reports the last date my user identification and password were used immediately after successfully logging into CDX.
- (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 CDX, 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 CDX from my user account and will contain instructions to view information regarding the submission, including my Copy of Record (CoR).
- (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 CDX Help Desk as soon as possible, but no later than 24 hours, after receipt.

(9) Agree to contact the CDX Help Desk if I do not receive an e mail notification within 5 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 CDX has received from me by contacting the CDX or service Help Desk.

(11) Agree to notify the EPA if I cease to represent the regulated entity specified above as signatory of that organization's electronic submissions by contacting the CDX Help Desk as soon as this change in relationship occurs and to sign a surrender certification at that time.

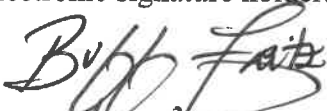
(12) Agree to retain a copy of this signed agreement as long as I continue to represent the regulated entity specified above as signatory of the company's electronic submissions.

(13) Certify I have the authority to enter into this Agreement on behalf of the Organization identified above, and I am a 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 statute and/or regulation.

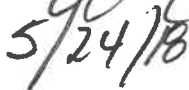
(14) Certify that by signing and submitting this agreement, I have read, understand, and accept the terms and conditions of this electronic signature agreement. I certify under penalty of law that I have personally examined and am familiar with the information submitted in this agreement and I believe 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.

Name of electronic signature holder: BUFF FRITZ

Signature:



Date:



PLEASE SEND THIS DOCUMENT AS SOON AS POSSIBLE TO:

Erin G. Wilcox
Florida Department of Environmental Protection
2600 Blainstone Rd
MS 4550
Tallahassee, FL 32399
850-245-8754