USER REGISTRATION AND SECURITY AGREEMENT

CHAPTER 102 ePERMIT SYSTEM

*This form is to be completed and submitted to the Electronic Filing Administrator (EFA) of the applicant/client before the user accesses the Chapter 102 ePermit System on behalf of the EFA*

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| **APPLICANT/CLIENT INFORMATION** | | | | |
| Applicant/Client Name: |  | | | |
| Applicant/Client Address: |  | | | |
| Applicant/Client City, State, ZIP: |  | | | |
| Applicant/Client Phone No.: |  | | | |
| Applicant/Client Client ID (if known): |  | | | |
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| **OPERATOR/CONSULTANT INFORMATION** | | | | |
| Operator/Consultant Name: |  | | | |
| Operator/Consultant Title: |  | | | |
| Company/Organization: |  | | | |
| Operator/Consultant Address: |  | | | |
| Operator/Consultant City, State, ZIP: |  | | | |
| Operator/Consultant Phone No.: |  | | | |
| GreenPort User Name: |  | | | |
| GreenPort Email Address: |  | | | |
| Role Requested: |  | Preparer |  | Master Preparer |
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| **SECURITY AGREEMENT** | | | | |
| Your access to the Department of Environmental Protection’s (DEP’s) Chapter 102 ePermit System is conditioned upon and pursuant to the following terms and conditions:Your access to DEP’s ePermit System is a privilege and not a right. Access for you to engage in electronic reporting is at the sole discretion of DEP and may be terminated at any time and without notice, even over the objection of a Client.You are responsible for the security of your GreenPort user name and GreenPort password which are not to be shared with any other individual at any time during the course of this agreement. Failure to adhere to this provision may result in the immediate termination of your access and possible legal action by DEP for any direct, indirect or consequential damages that your breach of security caused.In the event that you believe the security of your GreenPort user name and/or password have been breached, you are required to immediately self-report the incident to DEP at 717-787-HELP. You will then be instructed by DEP as to any further action required.You agree that all electronic reporting made pursuant to this designation will be in the manner prescribed by the Client and/or DEP. In the event of any conflicting instructions, the instructions of DEP shall control your activities. You agree to also comply with any amendments issued as to the electronic filing of data during the course of this agreement or alternatively, terminate your participation as to your activities governed by this agreement with notice to the Client. | | | | |

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| **SECURITY AGREEMENT (CONTINUED)** | | | | | | | | |
| By signing this agreement, you understand and agree that that any data or documents filed electronically under your GreenPort account was, in fact, filed by you and only by you. You have no authority to delegate your access to any third party. Failure to adhere to this provision may result in the immediate termination of your access and possible legal action by DEP for any direct, indirect or consequential damages that your breach of security caused.Your access to DEP’s ePermit System will be according to your pre-approved use. You agree to engage in no activities during this agreement that would be knowingly incompatible with the software, equipment, or network of DEP.You will not knowingly file false or erroneous data or documents to DEP during the term of this agreement. You agree that all electronic access and filings shall be in accordance with any applicable Federal laws and the laws of the Commonwealth of Pennsylvania.You agree to immediately provide to the EFA of the Client changes as to any information that has been requested as part of the security verification process within thirty (30) days of any change. Failure to do so may result in the immediate termination of your access.In performing the services required by this Security Agreement, User is an independent Contractor and not an employee or agent of DEP or the Commonwealth of Pennsylvania and this Security Agreement shall be governed by and interpreted and enforced in accordance with the laws of the Commonwealth of Pennsylvania.For the security purpose of verifying your identity, you agree to submit with this agreement to the EFA of the Client a valid form of picture identification. To be valid, the issued identification cannot be expired.DEP reserves the right to request additional security information as to any User from the EFA, the Client or the User directly.The User shall hold DEP and the Commonwealth harmless from and indemnify DEP and the Commonwealth against any and all claims, demands and actions, including attorney’s fees and costs based upon or arising out of any activities performed by the User under this Security Agreement. I agree that the use of my GreenPort password to submit data and records to DEP constitutes an electronic signature. I understand that an electronic signature is taking place every time I use my password to submit data and records to DEP.  I intend to be bound by my electronic signature. I authenticate the electronic data and record and attest to the statements contained within. I understand that my electronic signature is fully binding and has the same legal effect as an original, handwritten signature under the Electronic Transactions Act, 73 P.S. § 2260.101. I understand that submitting another individual’s electronic signature or attesting to false statements in an electronic record may be subject to substantial civil and criminal penalties, including, but not limited to, 18 P.S. § 4904 relating to Unsworn Falsification to Authorities. If I discover that information I have submitted is incorrect, I will notify the DEP immediately.  I do hereby say, verify and attest to that the information provided below for this User’s Registration and Security Agreement for the ePermit System as being true and accurate to the best of my knowledge, information and belief, under penalty of perjury, and subject to the penalties of 18 Pa. C.S.A. § 4904 relating to unsworn falsification to authorities. | | | | | | | | |
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| Operator/Consultant Signature | | | | |  | Date Signed | | |
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| **EFA ACTION** | | | | | | | | |
|  | I approve this Operator/Consultant | | | | |  | | |
|  | I disapprove this Operator/Consultant | | | | |  | | |
|  | Reason: |  | | | | | |  |
|  |  | | | | |  | | |
|  |  | | |  | | |  |  |
|  | EFA Signature | |  | | | Date Signed | |  |