Los Angeles County Municipal Storm Water Permit (Order 01-182)
Individual Annual Report Form
Attachment U-4

I. Certification Statement

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted.

Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility, of a fine and imprisonment for knowing violations.

Executed on the 1 day of September, 2009,

At Arcadia, CA

Printed Name Pat Malloy
Title Assistant City Manager/Public Works Services Director

City Name City of Arcadia
(Signature) P Malloy

Signature by duly authorized representative