



Florida Department of Environmental Protection

Bob Martinez Center
2600 Blair Stone Road
Tallahassee, Florida 32399-2400

Rick Scott
Governor

Jennifer Carroll
Lt. Governor

Herschel T. Vinyard Jr.
Secretary

Electronic Subscriber Agreement

Please complete the following form and mail to:

Florida Department of Environmental Protection
Attn: {Contact.contactName}
2600 Blair Stone Road
{Contact.addressLine2}
Tallahassee, FL 32399

User ID: _____
Name: _____
Telephone: _____
Email: _____
Street Address: _____
City: _____
State: _____
Zip Code: _____

I, _____, the undersigned, am hereby submitting this Subscriber Agreement to the Florida Department of Environmental Protection (FDEP) in application for a Personal Identity Number that shall, along with my username, password and additional personal security information, serve as the Electronic Signature Device and equivalent of my handwritten signature on all electronically submitted reports, documents, applications, files and forms to the FDEP. I hereby:

1. Agree to protect my electronic signature device and security question/answer pairs from compromise and from use by any other party, including anyone who may be acting as my agent;
2. Promptly report (within 24 hours after discovery) to the FDEP any evidence of the loss, theft, or other compromise of this electronic signature device and/or security question/answer pairs;
3. Review and, if necessary, repudiate, any electronic reports, documents, applications, files and forms that may have been submitted to the FDEP after this loss, theft or compromise;
4. Promptly review (within 24 hours after discovery), the acknowledgements (email and onscreen) and copies of submitted documents using this electronic signature device, and;

5. Promptly report (within 24 hours after discovery) evidence of discrepancy between any electronically submitted information signed using this electronic signature device and what was received by the FDEP's electronic receiving system.

I understand that I shall be held as legally bound, obligated, and responsible by the electronic signature created using this electronic signature device as by my handwritten signature.

Applicant Signature: _____

Date: _____

Notarization of Electronic Signature Device and Subscriber Agreement

In the State of: _____

and the County of: _____

On _____ before me, _____,
(date of signing) (Notary's name)

personally appeared _____, personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed within this instrument and acknowledged to me that he/she executed the same in his/her authorized capacity and that by their affixed signature on this instrument do affirm their lawful execution thereof.

Witness therefore my hand and official seal

(Notary Seal)

(Signature of Notary)