



GUAM ENVIRONMENTAL PROTECTION AGENCY • AHENSIAN PRUTEKSIÓN LINA'LA' GUÅHAN
LOURDES A. LEON GUERRERO • GOVERNOR OF GUAM | JOSHUA F. TENORIO • LIEUTENANT GOVERNOR OF GUAM
MICHELLE C. R. LASTIMOZA • ADMINISTRATOR

FORM B: Type 4 ANODS Statement of Commitment

And Installer / O&M Provider Certification

Regulatory Reference: 22 GAR § 12114, § 12115, & § 12118

Part 1: Owner & Occupant Statement of Commitment

This section must be completed and signed by the property owner and, if applicable, the renter/lessee.

I/We, the undersigned, acknowledge that the Type 4 Advanced Nitrogen-Reducing Onsite Disposal System (ANODS) installed on

Lot _____

Block _____

Track _____

Description _____

Village _____

is a highly specialized biological treatment system. In accordance with Guam EPA regulations, I/we hereby commit to the following:

1. **Continuous O&M Contract:** I/we will maintain a valid, uninterrupted 2-year Operation and Maintenance (O&M) contract with a GEPA-approved provider at all times.
2. **Report any system performance failure or sewage overflow** incident to GEPA.
3. **Access for Inspections:** I/we will allow the certified O&M provider and Guam EPA inspectors access to the property for regular maintenance, testing, and compliance inspections.
4. **Prompt Repairs:** I/we will immediately authorize and pay for any repairs or replacement parts identified by the O&M provider to maintain system performance.
5. **Non-Transferability:** I/we understand that the Operating Permit is non-transferable. If ownership or occupancy changes, the new owner/occupant must apply for a new permit. (In the event of a sale or transfer of ownership, the current owner must notify GEPA in writing and provide the name of the new permittee.)

• **Owner Printed Name:** _____

• **Signature:** _____ **Date:** _____

• **Occupant/Lessee Name (if applicable):** _____

• **Signature:** _____ **Date:** _____



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Part 2: Certified Installer or O&M Provider Certification

CERTIFICATION TYPE

- ☐ Certified Installer
☐ Certified Operations and Maintenance (O&M) Provider
☐ Both Certified Installer and O&M Provider

To be completed by the GEPA-approved Installer or O&M Contractor.

Contractor Information	Details
Company Name:	_____
GEPA Approval Number:	_____ (Attach current GEPA approval letter)
Certified Operator Name:	_____ Class Level: _____ (Min. Class I)
Operator Certification No.:	_____ (Under 22 GAR Chapter 11)

Certification Statements:

- ☐ I certify that my company has written manufacturer authorization to install, commission, and/or purchase replacement parts for the specific Type 4 system model proposed in this application.
- ☐ I certify that a certified Class I (or higher) Wastewater Treatment Operator is on staff or contract to oversee the operations of this system.
- Certified Provider Signature:** _____

Date: _____

