

#### **CERTIFICATION**

Register

Login



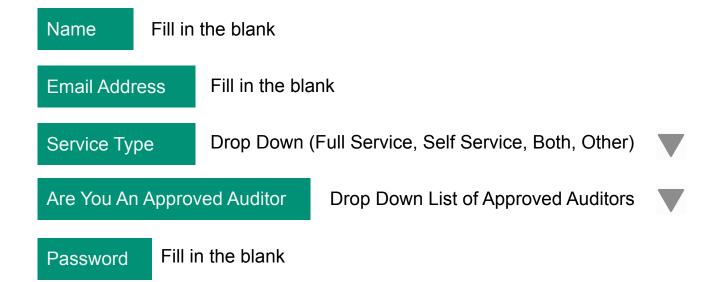
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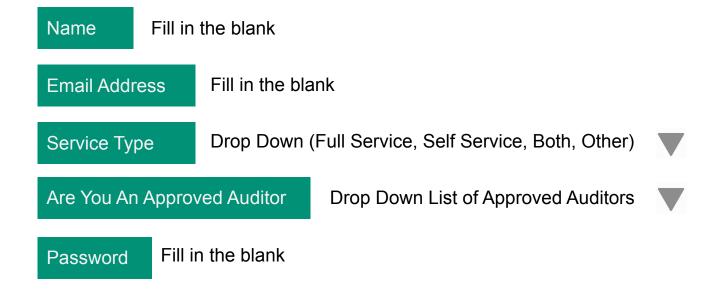


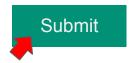
# **URG** Registration





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#### Add a New Facility

Choose a state

Drop Down (State abbreviations)

Choose a facility

Drop Down (Facilities for the picked state)

Choose a tier

Drop Down (Tiers)



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### **URG** Add A New Facility

All facilities using a preparer must complete the authorization page before any certifications can be completed.

Facility name

Fill in the blank

Facility state

Drop Down (state abbreviations)

Facility permit number

Fill in the blank

Upload authorization page





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Submit

**Authorization Form** 



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Next Steps		Facility	Permit Number	Description	Submission Date	Expiration Date	Status
View Copy	Go	JEM	#000000	Authorization	01/01/2020	01/01/2021	Approved
View Copy	Go	JEM	#000000	Tier 1	01/01/2020	01/01/2021	Submitted
Edit	Go	JEM	#000000	Tier 2	01/01/2020	01/01/2021	In Progress
Edit	Go	JEM	#000000	Tier 3	01/01/2020	01/01/2021	In Progress



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JEM	#000000	Authorization	01/01/2020	01/01/2021	Approved
JEM	#000000	Tier 1	01/01/2020	01/01/2021	Submitted
JEM	#000000	Tier 2	01/01/2020	01/01/2021	In Progress
JEM	#000000	Tier 3	01/01/2020	01/01/2021	In Progress
J	EM EM	EM #000000 EM #000000 EM #000000	EM #000000 Authorization  EM #000000 Tier 1  EM #000000 Tier 2	EM #000000 Authorization 01/01/2020 EM #000000 Tier 1 01/01/2020 EM #000000 Tier 2 01/01/2020	EM       #000000       Authorization       01/01/2020       01/01/2021         EM       #000000       Tier 1       01/01/2020       01/01/2021         EM       #000000       Tier 2       01/01/2020       01/01/2021



Facility Name	Completed from initial registration		
D.B.A.			
Facility Primary Contact	Completed from initial registration		
Primary Contact Role			
Owner Phone Number			
Email Address	Completed from initial registration		
Facility Phone Number			
Facility Street Address			
City			
State			
Zip			
County			



Are you completing this as a preparer?

Drop Down List of Yes

Digital Signature

Fill in the blank



Are you completing this as a preparer?

Drop Down List of Yes

Digital Signature

Fill in the blank

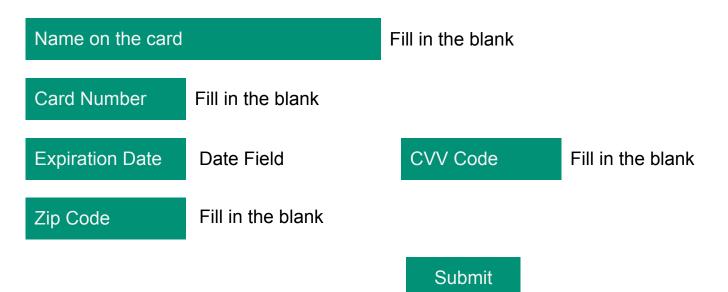




## **URG** Payment Information

To finalize your submission please complete the payment information requested below.

#### Total Due: \$0.00





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