# Electronic Subscriber Application and Agreement (ESAA)

**Form and Instructions**

The ESAA Form section of this document must be approved by the New Mexico Environment Department (NMED) Air Quality Bureau (AQB) in order to gain access to AQB Online Applications. Correctly completed ESAA Forms ensure electronic signatures in the AQB Online Applications are in compliance with EPA’s Cross-Media Electronic Reporting Rule (CROMERR). AQB Online Applications are accessed via the NMED’s Secure Extranet Portal (SEP): <https://sep.net.env.nm.gov/sep/login-form>.

Applications currently available through the SEP portal include:

**Air Emissions Inventory Reporting (AEIR):** The AEIR application is used to submit facility annual [Emissions Inventory](https://www.env.nm.gov/air-quality/emission-inventory/) to NMED. [**www.env.nm.gov/air-quality/ei-submittal/**](http://www.env.nm.gov/air-quality/ei-submittal/)

**Air Quality Bureau Compliance Reporting (AQBCR):** The AQBCR application is used to submit [Excess Emission Reports](https://www.env.nm.gov/air-quality/excess-emissions-reporting/) (EERs) and [Routine Reports](https://www.env.nm.gov/air-quality/compliance-submittal-forms/) such as Annual Compliance Certifications, Semi-Annual Reports, NSPS, MACT, and NMAC reports, as well as permit requirement reports and startup/shutdown notifications. [**www.env.nm.gov/air-quality/excess-emissions-reporting/**](http://www.env.nm.gov/air-quality/excess-emissions-reporting/)

Use this form to register as a new user, change companies for existing users, or register as a new Facility Administrator (FA) for any of the AQB Online Applications. The FA is responsible for approval and termination of all other document preparer or certifier roles in each application. Complete the ESAA Form section of this document (including required notary) and follow the applicable instructions for hard copy or electronic submittal. Two sections of the form must be notarized (Section III.A and Section IV.) AQB can accept forms notarized via any method as hard copy. AQB can accept only remotely notarized forms or electronically notarized forms via email. (Traditional, wet-ink notaries are only accepted via hard copy.)

Incomplete or incorrect ESAA Forms that do not adhere to the detailed instructions on pages 3 to 5 will not be approved. AQB will indicate approval or denial of the form via email to the Authorizing Company Official and Applicant.

**Hard Copy ESAA Submittal:**

Mail the completed and notarized ESAA form to:

**New Mexico Environment Department, Air Quality Bureau**

**Attn: CROMERR ESAA**

**525 Camino de los Marquez, Suite 1**

**Santa Fe, New Mexico 87505**

**Electronic ESAA Submittal:**

Email the completed and remotely or electronically notarized form to [NMENV-aqbeer@state.nm.us](mailto:NMENV-aqbeer@state.nm.us) and [NMENV-aqbaeir@state.nm.us](mailto:NMENV-aqbaeir@state.nm.us). Traditional, wet-ink notarized forms are **not** accepted via email.

**Remote and Electronic Notary Information**

NMED accepts notaries from other states if the notarization was conducted in compliance with the regulations that apply in that state. This includes:

* Remote notaries (done without being face-to-face with the notary)
* Electronic notaries (done face-to-face but documents are electronic instead of hard copy)
* Wet-ink notaries (done face-to-face on hard copy documents)

Please refer to the National Notary Association’s Notary Bulletin on “[Remote Notarization: What You Need to Know](https://www.nationalnotary.org/notary-bulletin/blog/2018/06/remote-notarization-what-you-need-to-know)”. This website is updated as new information is available. The AQB is not responsible for the content of this web site.

At this time, New Mexico does not have its own *remote* notary laws, so notaries in NM cannot perform remote notarizations. (Remote notaries can be done without being face-to-face with the notary.) A person in NM can use an online service to obtain a notary in a state that does allow remote notarization to notarize their documents remotely. New Mexico does accept notaries from states where remote notarization is allowed. When reviewing a remote notary, NMED staff will verify it was done properly through a certified remote notary. NMED staff cannot answer questions about the remote notary process.

New Mexico does have rules regarding *electronic* notaries, under 12.9.2 NMAC. From the NM Secretary of State’s Frequently Asked Questions for [E-Notarization](https://www.sos.state.nm.us/notary-and-apostille/notary-commissions/become-an-e-notary/):

**What is the difference between a paper-based notarization and an electronic notarization?**

The major difference is that the notary uses their electronic notary seal as opposed to using a rubber stamp or embosser. The notarization is performed electronically; computer to computer and no paper is involved. The signer **must** physically appear before the notary public at the time of the electronic notarization.

**Detailed ESAA Form Instructions**

## Section I – General Owner and Operator, Subsidiary or Consultant Information

A: Owner (Parent Company) Information: Required. Please fill out all fields.

B – D: Consultant, Operator, or Subsidiary Company Name: Only required if the Operator or Subsidiary company is different from the owner (parent company), or if a Consultant is requesting authorization to submit electronic reports on behalf of the Owner, Operator or Subsidiary. Please fill out all fields.

**Do not put the name of the individual consultant here, put the name of the consulting company.**

If different facilities are operated by different subsidiary or operator companies that are controlled by the same parent company, these companies could all be listed on one form rather than submitting multiple ESAA forms. Use Section I.B if an additional subsidiary or operator company needs to be listed and the form is not being submitted for a consultant. If more than 4 fields are required, attach a second page with Section I and include the additional companies.

## Section II – Electronic Signature Agreement

Please type or print your name in the field at the top of the page after you read and understand the underlying text. By submitting this form, you are agreeing to the conditions listed on this page.

## Section III.A – Certification by Person Requesting Authorization to Submit Electronic Documents

Required. Please fill out all fields. This is the person who is requesting authorization to submit the electronic documents.

III.A.1 Type or print your name

III.A.2 Enter you job title

III.A.3 Enter your office phone number

III.A.4 Enter the name of your company or organization

III.A.5 Enter your email address

III.A.6 Sign in front of a Notary Public

III.A.7 Date in front of a Notary Public

Have a Notary Public stamp and fill out the section for notarization.

## Section III.B – Role Authorization

Mark the roles the Applicant in Section III.A will have. Application specific roles not listed in the ESAA form are reviewed and approved by a user granted the Facility Administrator Role. Application Role descriptions can be reviewed in the applicable application user guides for [AEIR](https://www.env.nm.gov/air-quality/ei-submittal/) and [AQBCR](https://www.env.nm.gov/air-quality/excess-emissions-reporting/).

1. **Will the applicant in Section III.A have Facility Administrator Rights?**

Required. Select a box. By selecting YES, the applicant is authorized to be a Facility Administrator and any other roles, other than Responsible Official roles, within the AQB Online Applications. By selecting No, the applicant is authorized for roles, other than Responsible Official roles, approved by the Facility Administrator, subject to some restrictions listed below.

Facility Administrator (FA): Every organization must designate at least one FA and may assign alternates. The FA manages the users from your organization by approving and disapproving Preparers, Submitters and Certifiers of electronic documents in each of the AQB Online Applications. The FA can approve themselves for other roles as appropriate, but no other roles can be requested without at least one FA. The FA is responsible for deactivating user roles if the person leaves the company or changes assignments. The FA or the company is also responsible for notifying the AQB if a user leaves the company so that their ESAA form can be deactivated. An FA must be a company employee and cannot be a consultant.

1. **Is the applicant in Section III.A a Responsible Official for Title V Reporting?**

Required. Check Yes if the applicant in Section III.A is listed as the Responsible Official or alternate Responsible Official for Title V Permit with the Air Quality Bureau, otherwise check No. Only users with this box marked Yes will be approved for Responsible Official roles.

Note: For AEIR Emissions Inventory submission, the certifying Company Official does **not** need to be the Title V Responsible Official. A Company Official can be established by the FA and/or can be the FA.

Responsible Official for TV (RO)( [20.2.70.7.AE NMAC](http://164.64.110.134/parts/title20/20.002.0070.html)): The RO must be approved by the TV Permit Program under a permit action or an Administrative Amendment. Please see instruction for designation of a RO or Alternate RO for TV Major Sources on the “[Permitting Administrative Multi-Form](https://www.env.nm.gov/air-quality/air-quality-permit-applications-forms-and-related-information/)”. In order to certify Title V reports (ACCs and Semi-Annual Reports) submitted electronically through AQBCR, RO designation confirmed through the TV Permit Program must be indicated on the ESAA and the role must be approved by the FA in the AQBCR Application for each facility.

## Section IV – Certification by Authorizing Company Official

Required. Please fill out all fields. This is a company employee who is verifying that the person requesting authorization is employed by, or is a consultant for, the company and has authority to submit electronic documents.

IV.1 Type or print your name

IV.2 Enter you job title

IV.3 Enter your office phone number

IV.4 Enter the name of your company or organization

IV.5 Enter your email address

IV.6 Sign in front of a Notary Public

IV.7 Date in front of a Notary Public

Have a Notary Public stamp and fill out the section for notarization.

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| --- |
| **The Authorizing Company Official cannot be the same as the Person Requesting Authorization to Submit Electronic Documents (Section III.A).**  **The Authorizing Company Official does NOT have to be a Title V Responsible Official.** |

Once the ESAA form is submitted to the AQB and approved the user will receive an email with instructions on how to start registering for the online applications.

## Request for Termination

If a user ceases to work for a company or to be approved for the role they are currently approved for, it is the responsibility of the company/facility to notify the AQB and request termination of that user’s role(s) and ESAA form. Please specify if all roles require termination or only certain roles for certain facilities. The Facility Administrator should also deactivate the user’s role(s) in the application.

This request is to be submitted by a Facility Administrator or Authorizing Company Official. Email is acceptable for this termination request.

AQBCR: [NMENV-aqbeer@state.nm.us](mailto:NMENV-aqbeer@state.nm.us)

AEIR: [NMENV-aqbaeir@state.nm.us](mailto:NMENV-aqbaeir@state.nm.us)

**Electronic Subscriber Application and Agreement (ESAA) Form**

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| --- | --- | --- | --- | --- |
| **Section I - General Owner and Operator, Subsidiary or Consultant Information** | | | | |
| **A.** | **Owner Information (Parent Company)** | | | |
| **Owner (Parent Company) Name:** | | | | |
|  | | | | |
| **Main Telephone Number:** | | | | |
|  | | | | |
| **Company Address:** | | | | |
|  | | | | |
|  | | | | |
| **City:** | | **State:** | **Zip:** | |
|  | |  |  | |
| **B.** | **Consultant Information (if applicable) (or Operator or Subsidiary if necessary)** | | | |
| **Consultant Company Name (if different from owner):** | | | | |
|  | | | |
| **Main Telephone Number:** | | | | |
|  | | | | |
| **Company Address:** | | | | |
|  | | | | |
|  | | | | |
| **City:** | | **State:** | **Zip:** | |
|  | |  |  | |
| **C.** | **Operator Company or Subsidiary Company Information (if applicable)** | | | |
| **Company Name (if different from owner):** | | | | |
|  | | | |
| **Main Telephone Number:** | | | | |
|  | | | | |
| **Company Address:** | | | | |
|  | | | | |
|  | | | | |
| **City:** | | **State:** | **Zip:** | |
|  | |  |  | |
| **D.** | **Operator or Subsidiary or Other Company Information (if applicable)** | | | |
| **Company Name (if different from owner):** | | | | |
|  | | | |
| **Main Telephone Number:** | | | | |
|  | | | | |
| **Company Address:** | | | | |
|  | | | | |
|  | | | | |
| **City:** | | **State:** | **Zip:** | |
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**Electronic Subscriber Application and Agreement (ESAA)**

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| --- | --- | --- |
| **Section II - Electronic Signature Agreement** | | |
| **Name of Person Requesting Authorization to Prepare or Submit Electronic Documents:** | | |
|  |  |  |
| **(please type or print)** | | |
| **As the person requesting authorization to prepare or submit electronic documents, I understand and agree to all of the following:** | | |
| * I understand that this Electronic Signature Agreement allows me to submit electronic documents to the New Mexico Environment Department (NMED) Air Quality Bureau (AQB) under authorized programs in lieu of paper submissions. * I agree to protect my unique electronic signature device from compromise and from use by anyone except me. Specifically, I agree to maintain the secrecy of the password; I will not divulge or delegate my user name and password to any other individual; I will not store my password in an unprotected location; and I will not allow my password to be written into computer scripts to achieve automated log-in. * I agree to contact the NMED AQB online application administrator at [NMENV-aqbeer@state.nm.us](mailto:NMENV-aqbeer@state.nm.us) or [NMENV-aqbaeir@state.nm.us](mailto:NMENV-aqbaeir@state.nm.us) as soon as possible, but no later than 24 hours, after suspecting or determining that my user name or password have become lost, stolen or otherwise compromised. * I agree that I will review the contents of all electronic submissions prior to submission. * I understand and agree that I will be held as legally bound, obligated, or responsible by my electronic signature as I would be by my hand-written signature. * I understand that I will automatically receive an e-mail receipt from the NMED AQB for any submission that contains a valid electronic signature, identifying the document received, the signatory, and the date and time of receipt. * I agree that I will contact the NMED AQB online application administrator if I do not receive an e-mail receipt as specified above within one business day for any online submission to the NMED AQB. * I understand that I will have the opportunity to review the document submitted in a human-readable format and an opportunity to repudiate the electronic document based on this review. * I understand that the NMED AQB online system will automatically reject any electronic document submitted without a valid electronic signature if such signature is required. * I understand that the NMED AQB may contact the Company Official who signs below to authorize me as signatory for the company in order to verify my identity. * I agree to notify the NMED AQB online application administrator at [NMENV-aqbeer@state.nm.us](mailto:NMENV-aqbeer@state.nm.us) or [NMENV-aqbaeir@state.nm.us](mailto:NMENV-aqbaeir@state.nm.us) if I cease to represent the regulated entity specified above as signatory as soon as this change in relationship occurs. * I agree to retain a copy of this signed agreement as long as I continue to represent the regulated entity specified above as signatory of the company’s electronic submissions. | | |

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| **Section III.A – Certification by Person Requesting Authorization to Submit Electronic Documents** | | | | | | | | | | | | | | | |
| **After reasonable inquiry, I certify that the information in this submittal is true, accurate and complete. I understand and agree to be bound by the terms and conditions of the Electronic Signature Agreement in Section II of this document.** | | | | | | | | | | | | | | | |
| **1.** | | **Name of Person Requesting Authorization to Prepare or Certify Electronic Documents (please type or print):** | | | | | **2.** | | **Title:** | | | **3.** | | **Office Phone Number:** | |
|  | | | | | | |  | | | | |  | | | |
| **4.** | | **Name of Company or Organization (please type or print):** | | | | | **5.** | | **Email Address:** | | | | | | |
|  | | | | | | |  | | | | | | | | |
| **6.** | | **Signature of Person Requesting Authorization to Prepare or Submit Electronic Documents:** | | | | | **7.** | | **Date:** | | | | | | |
|  | | | | | | |  | | | | | | | | |
| Subscribed and sworn before me this | | | |  | | day of | | |  | , |  | | | |  |
|  | | | |  | |  | | |  | | | | | |  |
|  | | | |  | |  | | | Notary Public |  |  | | | |  |
| My commission expires: | | | |  | |  | | |  |  |  | | | |  |
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| **Section III.B – Role Authorization** | | | | | | | | | | | | | | | |
| **1.** | | **Will the applicant in Section III.A have Facility Administrator Rights?**  (If yes, this person will approve preparer, submitter and certifier roles for other users at the facility) | **Yes  No** | | **2.** | | | **Is the applicant in Section III.A a Responsible Official for Title V?**  (This could also be an Alternate Responsible Official) | | | | | **Yes  No** | | |

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| **Section IV – Certification by Authorizing Company Official** | | | | | | | | | | | | |
| **This cannot be the same person as the one requesting to submit electronic documents in Section III.**  **After reasonable inquiry, I certify that the information in this submittal is true, accurate and complete. I acknowledge that the person requesting authorization to prepare or submit electronic documents is employed by my company or organization either directly or as a consultant and is authorized to prepare or certify electronic documents and is authorized for the role(s) indicated in Section III.B or the roles that will be approved by the Facility Administrator.** | | | | | | | | | | | | |
| **1.** | | **Name of Authorizing Company Official (please type or print):** | | | **2.** | **Title:** | | | | **3.** | **Office Phone Number:** | |
|  | | | | |  | | | | |  | | |
| **4.** | | **Name of Company or Organization (please type or print):** | | | **5.** | **Email Address:** | | | | | | |
|  | | | | |  | | | | | | | |
| **6.** | | **Signature of Authorizing Company Official:** | | | **7.** | **Date:** | | | | | | |
|  | | | | |  | | | | | | | |
| Subscribed and sworn before me this | | |  | day of | | |  | , |  | | |  |
|  | | |  |  | | |  | | | | |  |
|  | | |  |  | | | Notary Public |  |  | | |  |
| My commission expires: | | |  |  | | |  |  |  | | |  |
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|  | | |  |  | | |  |  |  | | |  |

**Hard Copy ESAA Submittal:**

Mail the 5-page ESAA form to:

New Mexico Environment Department

Air Quality Bureau

Attn: CROMERR ESAA

525 Camino de los Marquez, Suite 1

Santa Fe, NM 87505

**Electronic ESAA Submittal:**

Email the completed and remotely or electronically notarized form to [NMENV-aqbeer@state.nm.us](mailto:NMENV-aqbeer@state.nm.us) and [NMENV-aqbaeir@state.nm.us](mailto:NMENV-aqbaeir@state.nm.us). Traditional, wet-ink notarized forms are **not** accepted via email.

**User guides for the respective applications can be found here:**

**AEIR:** [**www.env.nm.gov/air-quality/ei-submittal/**](http://www.env.nm.gov/air-quality/ei-submittal/)

**AQBCR:** [**www.env.nm.gov/air-quality/excess-emissions-reporting/**](http://www.env.nm.gov/air-quality/excess-emissions-reporting/)

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| --- | --- | --- | --- | --- | --- | --- |
| **NMED Use Only** | | | | | | |
| **Request for Approval** | | | | | | |
| **Electronic Subscriber Application and Agreement (ESAA) Form**  **If the answer to any question is “no” the application will be denied.** | | | | |  | |
| **1** | Fields in Section I.A are completed (Section I.B, C & D required if applicable)? | | | | **Yes** | **No** |
| **2** | Name of person requesting authorization is typed or printed in Section II? | | | | **Yes** | **No** |
| **3** | Section III.A 1-7: Are all fields completed? | | | | **Yes** | **No** |
| **5** | Section III.A: Signature of person requesting authorization present and matches typed or printed name? | | | | **Yes** | **No** |
| **6** | Section III.A: Signature of person requesting authorization is notarized? | | | | **Yes** | **No** |
| **7** | Section III.A: Notary stamp valid at time of notarization? | | | | **Yes** | **No** |
| **8** | Section III.B 1 & 2: One answer marked for each question? | | | | **Yes** | **No** |
| **9** | Section III.B 2, if Yes *and* Title V source, does name in III.A match RO of record?  **Not Applicable** | | | | **Yes** | **No** |
| **10** | Is the person requesting authorization in Section III.A different from the Authorizing Official in Section IV? | | | | **Yes** | **No** |
| **11** | Section IV 1-7: Are all fields completed? | | | | **Yes** | **No** |
| **12** | Section IV: Signature of authorizing company official present and matches typed or printed name? | | | | **Yes** | **No** |
| **13** | Section IV: Signature of authorizing company official is notarized? | | | | **Yes** | **No** |
| **14** | Section IV: Notary stamp valid at time of notarization? | | | | **Yes** | **No** |
| **15** | **Request is:** | Approved Denied | | | | |
| **16** | **If denied, explain below:** | | | | | |
|  | | | | | | |
| **Staff Initials:** | | | **Date:** |  | | |

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| --- | --- | --- | --- | --- | --- |
| **Request for Termination** | | | | | |
| **1** | Was the termination request (email acceptable) submitted by the Facility Administrator or Authorizing Company Official? | | | **Yes** | **No** |
| **2** | Date of termination request (mm/dd/yyyy)? | | |  | |
| **Staff Initials:** | | **Date:** |  | | |