

Date:

Company Name and Address (Owner/Operator)

Subject: Authorization for Agent to Sign the *WSMC Enrollment Agreement*, *WSMC Member MSRC Service Agreement*, and *ERTV Enrollment Agreement*

To: Washington State Maritime Cooperative (WSMC), the Marine Spill Response Corporation (MSRC), and the Marine Exchange of Puget Sound:

Pursuant to Section 13.2 of the Washington State Maritime Cooperative (WSMC) *Enrollment Agreement*, the undersigned hereby authorizes the below designated person or company to sign the *WSMC Enrollment Agreement* on behalf of the above-named company for any vessels owned or operated by the above-named company entering WSMC's geographical area of response. The designated agent shall provide WSMC with a copy of this written authorization to act on behalf of the Owner/Operator.

Pursuant to Section 13.1 of the WSMC *Enrollment Agreement*, in the event the signer of the Agreement is an agent of a disclosed principal, nothing contained herein is or shall be construed to be a guarantee or agreement by such agent to pay any cost, fee, expense, damages, fines, penalties or assessments chargeable to or against Covered Vessel or its owners, operators, charterers, officers or crew, under any of the aforementioned agreements, under any other agreements relating thereto entered by the Covered Vessel's Authorized Agent in a representative or agency capacity or under applicable federal or state law or regulation. All such costs, fees, expenses, damages, etc., shall remain exclusively for the account of the Covered Vessel and the above-named company as its owners and/or operators.

The undersigned also authorizes the below designated person or company to sign the *WSMC Member MSRC Service Agreement* on behalf of the above-named company for any vessels owned or operated by the above-named company entering WSMC's geographical area of response. As with the *WSMC Member Enrollment Agreement*, all costs, fees, expenses, damages, etc., payable under the *WSMC Member MSRC Service Agreement* shall remain exclusively for the account of the Covered Vessel and the above-named company as its owners and/or operators, and not with any duly authorized agent.

In addition, the undersigned authorizes the below designated person or company to sign the *ERTV Enrollment Agreement* on behalf of the above-named company for any vessels owned or operated by the above named company.

The undersigned confirms that he or she has the authority to represent and bind the above-named company and that the above-named company accepts the terms and conditions of the *WSMC Enrollment Agreement*, the *WSMC Member MSRC Service Agreement*, and the *ERTV Enrollment Agreement*.

Sincerely,

Signature

Name

Designated Authorized Agent

Name and Address:

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