

**Application for Discharge**

**WASTEWATER SYSTEM/TREATMENT FACILITIES**

Note to signing official: The use of information contained in this application shall be in conformity with Title 40 of the Code of Federal Regulations.

**A. GENERAL INFORMATION**

(1) Company Name \_\_\_\_\_

(2) Mailing Address \_\_\_\_\_

(3) Premise Address (If different from above) \_\_\_\_\_  
\_\_\_\_\_

(4) Name and Title of Signing Official \_\_\_\_\_  
\_\_\_\_\_

(5) Name and Title of Person Responsible for Completing this Application  
\_\_\_\_\_

Telephone ( ) \_\_\_\_\_ Extension \_\_\_\_\_

E-mail address \_\_\_\_\_

(6) Contact Person for Inspections, Monitoring, Sampling, etc.  
(Name and Title) \_\_\_\_\_

Telephone ( ) \_\_\_\_\_ Extension \_\_\_\_\_

E-mail address \_\_\_\_\_

(7) Type of permit requested: Existing Discharge \_\_\_\_\_  
Proposed Discharge \_\_\_\_\_

(8) Name of Owner \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Telephone No. \_\_\_\_\_

(9) Name of Operator \_\_\_\_\_

Address \_\_\_\_\_

Telephone No. \_\_\_\_\_

(10) Telephone No. of Facility \_\_\_\_\_

(11) Environmental Permits held by Facility:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information, the information submitted is to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of a civil penalty for knowing violation."

DATE \_\_\_\_\_

\_\_\_\_\_  
Signature of Official

**B. PRODUCT INFORMATION**

1. Type of Industry or Business \_\_\_\_\_  
 \_\_\_\_\_

2. General description of Industry \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

3. Indicate Standard Industrial Classification (SIC) Code(s) applicable to this facility.  
 \_\_\_\_\_

4. List of chemicals or other materials (Liquid or Solid) which may be stored in bulk. (Over 50 gallons)

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

5. Verify the presence or absence in the product, process, or at your facility of the following pollutants.

<u>Toxic Substances</u>	<u>Present</u>	<u>Absent</u>
Acenaphthene .....	_____	_____
Acenaphthylen .....	_____	_____
Acrolein.....	_____	_____
Acrylonitrile.....	_____	_____
Aldrin.....	_____	_____
Alpha-endosulfan.....	_____	_____
Alpha-BHC.....	_____	_____
Aluminum, total.....	_____	_____
Anthracene.....	_____	_____

	<u>Present</u>	<u>Absent</u>
Antimony, tota .....	_____	_____
Arsenic, total.....	_____	_____
Asbestos.....	_____	_____
Barium.....	_____	_____
Benzene.....	_____	_____
Beta-endosulfan.....	_____	_____
Benzidine.....	_____	_____
Benzo(a) anthracene.....	_____	_____
Benzo(b) pyrene.....	_____	_____
3,5-benzoflouranthene.....	_____	_____
Benzo(ghi) perylene.....	_____	_____
Benzo(k) flouanthene.....	_____	_____
Beryllium, tota .....	_____	_____
Beta - BHC.....	_____	_____
Bis(2-chloroethoxy) methane.....	_____	_____
Bis(2-chloroethyl) ether.....	_____	_____
Bis(2-chloroisopropyl) ether.....	_____	_____
Bis(2-ethylhexyl) phtalate.....	_____	_____
Boron.....	_____	_____
Bromide.....	_____	_____
Bromoform.....	_____	_____
4-bromophenyl phenyl ether.....	_____	_____
Butylbenzyl Phthalate.....	_____	_____
Cadmium.....	_____	_____
Carbon tetrachloride.....	_____	_____
Chlordane.....	_____	_____
Chlorine, total residual.....	_____	_____
Chlorobenzene.....	_____	_____
Chlorodibromomethane.....	_____	_____
Chloroethane.....	_____	_____
2-Chloronaphthalene.....	_____	_____
2-Chlorophenol.....	_____	_____
p-Chloro-M-Cresol.....	_____	_____
4-Chlorophenyl phenyl ether.....	_____	_____
2-Chloroethyl vinyl ether.....	_____	_____
Chloroform.....	_____	_____
Chromium, total.....	_____	_____
Chrysene.....	_____	_____
Cobalt, total.....	_____	_____
Color.....	_____	_____
Copper, total.....	_____	_____
1,3-Cis-dichloropropylene.....	_____	_____
Cyanide, total.....	_____	_____
Dibenzo(a,b) anthracene.....	_____	_____
Delta - BHC.....	_____	_____
4,4 - DDT.....	_____	_____
4,4 - DDE.....	_____	_____
4,4 - DDD.....	_____	_____

	<u>Present</u>	<u>Absent</u>
Dieldrin.....	_____	_____
1,2 - Dichlorobenzene.....	_____	_____
1,3 - Dichlorobenzene.....	_____	_____
1,4 - Dichlorobenzene.....	_____	_____
3,3 - Dichlorobenzidine.....	_____	_____
Dichlorobromomethane.....	_____	_____
1,1 - Dichloroethane.....	_____	_____
1,2 - Dichloroethane.....	_____	_____
1,1 - Dichloroethylene.....	_____	_____
2,4 - Dichlorophenoll,2 - Dichloropropane.....	_____	_____
1,2 - Dichloropropylene.....	_____	_____
Diethyl Phthalate.....	_____	_____
Dimethyl Phthalate.....	_____	_____
2,4 - Dimethylphenol Di-N-butyl phthalate.....	_____	_____
Di-N-butyl Phthalate.....	_____	_____
2,4 - Dinitrotoluene.....	_____	_____
2,6 - Dinitrotoluene.....	_____	_____
Di-N-octyl phthalate.....	_____	_____
1,2 - Diphenylhydrazine.....	_____	_____
Endosulfan sulfate.....	_____	_____
Endrin.....	_____	_____
Endrin aldehyde.....	_____	_____
Ethylbenzene.....	_____	_____
Fecal coliform.....	_____	_____
Fluoranthene.....	_____	_____
Fluorine.....	_____	_____
Fluoride.....	_____	_____
Gamma BHC.....	_____	_____
Heptachlor.....	_____	_____
Heptachlor epoxide.....	_____	_____
Hexachlorobenzene.....	_____	_____
Hexachlorobutadiene.....	_____	_____
Hexachlorocyclopentadiene.....	_____	_____
Hexachloroethane.....	_____	_____
Ideno (1,2,3 - cd) pyrene.....	_____	_____
Isophorone.....	_____	_____
Iron, total.....	_____	_____
Lead, total.....	_____	_____
Manganese, total.....	_____	_____
Magnesium, total.....	_____	_____
Mercury, total.....	_____	_____
Methyl Bromide.....	_____	_____
Methyl chloride.....	_____	_____
Methylene chloride.....	_____	_____
Molybdenum, total.....	_____	_____
Naphthalene.....	_____	_____
Nitrobenzene.....	_____	_____
N-nitrosodimethylamine.....	_____	_____

	<u>Present</u>	<u>Absent</u>
N-nitrosodi-N-propylamine.....	_____	_____
N-nitrosodiphenylamine.....	_____	_____
Nickel, total.....	_____	_____
Nitrate - Nitrite.....	_____	_____
Nitrogen, total organic.....	_____	_____
2 - Nitrophenol.....	_____	_____
4 - Nitrophenol.....	_____	_____
Oil and Grease.....	_____	_____
PCB - 1016.....	_____	_____
PCB - 1221.....	_____	_____
PCB - 1232.....	_____	_____
PCB - 1242.....	_____	_____
PCB - 1248.....	_____	_____
PCB - 1254.....	_____	_____
PCB - 1260.....	_____	_____
Pentachlorophenol.....	_____	_____
Phenol.....	_____	_____
Phenols, total.....	_____	_____
Phenanthrene.....	_____	_____
Phosphorus, total.....	_____	_____
Pyrene.....	_____	_____
Radioactivity.....	_____	_____
Selenium, total.....	_____	_____
Silver, total.....	_____	_____
Sulfate.....	_____	_____
Sulfide.....	_____	_____
Sulfite.....	_____	_____
Surfactants.....	_____	_____
1,1,2,2 - Tetrachloroethane.....	_____	_____
Thallium, total.....	_____	_____
Tin, total.....	_____	_____
Titanium, total.....	_____	_____
Toluene.....	_____	_____
Toxaphene.....	_____	_____
1,2,4 - trichlorobenzene.....	_____	_____
1,2 - trans-dichloroethylene.....	_____	_____
1,2 - trans-dichloropropylene.....	_____	_____
1,1,1 - trichloroethane.....	_____	_____
1,1,2 - trichloroethane.....	_____	_____
Trichloroethylene.....	_____	_____
2,4,6 - trichlorophenol.....	_____	_____
Vinyl chloride.....	_____	_____
Zinc, total.....	_____	_____

<u>Hazardous Substances</u>	<u>Present</u>	<u>Absent</u>
Acetaldehyde.....	_____	_____
Allyl alcohol.....	_____	_____
Allyl chloride.....	_____	_____
Amyl acetate.....	_____	_____
Aniline.....	_____	_____
Benzonitrile.....	_____	_____
Benzyl chloride.....	_____	_____
Butyl acetate.....	_____	_____
Butylamine.....	_____	_____
Captan.....	_____	_____
Carbaryl.....	_____	_____
Carbofuran.....	_____	_____
Carbon disulfide.....	_____	_____
Chlorpyrifos.....	_____	_____
Coumaphos.....	_____	_____
Cresol.....	_____	_____
Crotonaldehyde.....	_____	_____
Cyclohexane.....	_____	_____
2,4-D (2,4-Dichlorophenoxy acetic acid.....	_____	_____
Diazinon.....	_____	_____
Dicamba.....	_____	_____
Dichlobenil.....	_____	_____
Dichlone.....	_____	_____
2,2-Dichloropropionic Acid.....	_____	_____
Dichlorvos.....	_____	_____
Diethylamine.....	_____	_____
Dimethylamine.....	_____	_____
Dinitrobenzene.....	_____	_____
Diquat.....	_____	_____
Disulfoton.....	_____	_____
Diuron.....	_____	_____
Epichlorohydrin.....	_____	_____
Ethanolamine.....	_____	_____
Ethion.....	_____	_____
Ethylenediamine.....	_____	_____
Ethylenedibromide.....	_____	_____
Formaldehyde.....	_____	_____
Furfural.....	_____	_____
Guthion.....	_____	_____
Isoprene.....	_____	_____
Isopropanolamine dodecylbenzenesulfanate.....	_____	_____
Kelthane.....	_____	_____
Kepone.....	_____	_____
Malathion.....	_____	_____
Mercaptodimethur.....	_____	_____
Methoxychlor.....	_____	_____
Methylmercaptan.....	_____	_____
Methylmethacrylate.....	_____	_____

	<u>Present</u>	<u>Absent</u>
Methylparathion.....	_____	_____
Mevinphos.....	_____	_____
Mexacarbate.....	_____	_____
Monoethylamine.....	_____	_____
Monomethylamine.....	_____	_____
Naled.....	_____	_____
Naphthenic acid.....	_____	_____
Nitrotoluene.....	_____	_____
Parathion.....	_____	_____
Phenolsulfanate.....	_____	_____
Phosgene.....	_____	_____
Propargite.....	_____	_____
Propylene oxide.....	_____	_____
Pyrethrins.....	_____	_____
Quinoline.....	_____	_____
Resorcinol.....	_____	_____
Strontium.....	_____	_____
Strychnine.....	_____	_____
Styrene.....	_____	_____
2,4,5-T (2,4,5-Trichlorophenoxy acetic acid)...	_____	_____
TDE (Tetrachlorodiphenylethane).....	_____	_____
2,4,5-TP [2-(2,4,5 Trichlorophenosyl) (propanoic acid)].....	_____	_____
Trichlorofuran.....	_____	_____
Triethylamine.....	_____	_____
Trimethylamine.....	_____	_____
Uranium.....	_____	_____
Vanadium.....	_____	_____
Xylene.....	_____	_____
Xylenol.....	_____	_____
Zirconium.....	_____	_____
Other *.....	_____	_____

\*Material listed in 40 CFR Part 116 (Designation of Hazardous Substances) known to be present.



**C. OPERATIONAL CHARACTERISTICS**

- 1. Number of shifts worked per 24 hour day \_\_\_\_\_  
Average number of employees per shift:  
First \_\_\_\_\_ Second \_\_\_\_\_ Third \_\_\_\_\_
  
- 2. Time shift begins:  
First \_\_\_\_\_ Second \_\_\_\_\_ Third \_\_\_\_\_
  
- 3. Is operation seasonal? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, give brief description \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  
- 4. Does operation shut down for vacation period?  
Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, give time period \_\_\_\_\_
  
- 5. Production process is: Batch \_\_\_\_\_ Continuous \_\_\_\_\_  
Both \_\_\_\_\_ % Batch \_\_\_\_\_ % Continuous \_\_\_\_\_
  
- 6. Are any process changes or expansion planned during the next three years?  
Yes \_\_\_\_\_ No \_\_\_\_\_
  
- 7. Are any water or materials reclaimed in the process?  
Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, give brief description \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**D. WATER USAGE/WASTE DISCHARGE**

1. Water Source \_\_\_\_\_  
 \_\_\_\_\_

2. Average daily water usage \_\_\_\_\_

3. The facility generates the following type of waste:

	Average Gallons Per Day (gpd)		
<input type="checkbox"/> Domestic Waste (restrooms, employee showers, etc.)	_____	<input type="checkbox"/> Estimated	<input type="checkbox"/> Measured
<input type="checkbox"/> Cooling water, non-contact	_____	<input type="checkbox"/> Estimated	<input type="checkbox"/> Measured
<input type="checkbox"/> Boiler/Tower blowdown	_____	<input type="checkbox"/> Estimated	<input type="checkbox"/> Measured
<input type="checkbox"/> Cooling water, contact	_____	<input type="checkbox"/> Estimated	<input type="checkbox"/> Measured
<input type="checkbox"/> Process wastes	_____	<input type="checkbox"/> Estimated	<input type="checkbox"/> Measured
<input type="checkbox"/> Equipment/Facility Washdown	_____	<input type="checkbox"/> Estimated	<input type="checkbox"/> Measured
<input type="checkbox"/> Air Pollution Control Unit	_____	<input type="checkbox"/> Estimated	<input type="checkbox"/> Measured
<input type="checkbox"/> Storm water runoff to sewer	_____	<input type="checkbox"/> Estimated	<input type="checkbox"/> Measured
<input type="checkbox"/> Cafeteria wastes	_____	<input type="checkbox"/> Estimated	<input type="checkbox"/> Measured
<input type="checkbox"/> Other (describe)	_____	<input type="checkbox"/> Estimated	<input type="checkbox"/> Measured
 TOTAL ALL ITEMS	 _____		

**FLOW MEASUREMENT BY SIC**

SIC	Activity	Avg. Daily Flow (gpd)	Max. Daily Flow (gpd)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

4. Wastes are discharged to (check all that apply)

	Average Gallons Per Day (gpd)		
<input type="checkbox"/> Sanitary Sewer	_____	<input type="checkbox"/> Estimated	<input type="checkbox"/> Measured
<input type="checkbox"/> Storm Sewer	_____	<input type="checkbox"/> Estimated	<input type="checkbox"/> Measured
<input type="checkbox"/> Combined Sewer	_____	<input type="checkbox"/> Estimated	<input type="checkbox"/> Measured
<input type="checkbox"/> Surface Water	_____	<input type="checkbox"/> Estimated	<input type="checkbox"/> Measured
<input type="checkbox"/> Ground Water	_____	<input type="checkbox"/> Estimated	<input type="checkbox"/> Measured
<input type="checkbox"/> Waste Haulers	_____	<input type="checkbox"/> Estimated	<input type="checkbox"/> Measured
<input type="checkbox"/> Evaporation	_____	<input type="checkbox"/> Estimated	<input type="checkbox"/> Measured
<input type="checkbox"/> Other (describe)	_____	<input type="checkbox"/> Estimated	<input type="checkbox"/> Measured

5.

Industrial Processes	Description	Waste Discharge No.

a. Average flows for Intermittent Discharges

Waste Discharge Number	Frequency (Average no. of discharge occurrences per day)	Duration (Average no. of hours per day the discharge is operating)	Discharge Quantity (Average volume per day discharged - gallons)	Est. (E) or Measurement

b. Average flow for Continuous Discharges

Waste Discharge Number	Frequency (Average no. of discharge occurrences per day)	Duration (Average no. of hours per day the discharge is operating)	Discharge Quantity (Average volume per day discharged - gallons)	Est. (E) or Measurement

c. Describe the methods used for flow measurement and/or flow estimation for above flows:

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6. Regulated Process	Categorical Pretreatment Standard	Discharge Types	
		Continuous	Intermittent

7. Discharge Point Description

SIC	Discharge Points (describe receiving systems)

Discharge Occurrence

SIC	Days Per Week (Circle)	Months
	S M T W T F S	
	S M T W T F S	
	S M T W T F S	
	S M T W T F S	

8. Provide name and address of waste hauler(s), if used.

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9. Is a Spill Prevention Control Plan prepared for this facility?  
 Yes \_\_\_\_\_ No \_\_\_\_\_

## E. WASTEWATER INFORMATION

1. If your facility employs processes in any of the 34 industrial categories or business activities listed below and any of these processes generate wastewater or waste sludge, place a check beside the category or business activity.  
(Check all that apply)

A. 34 Industrial Categories

1.  Adhesives
2.  Aluminum Forming
3.  Auto and Other Laundries
4.  Battery Manufacturing
5.  Coal Mining
6.  Coil Coating
7.  Copper Forming
8.  Electric & Electronic Components
9.  Electroplating
10.  Explosives Manufacturing
11.  Foundries
12.  Gum and Wood Chemicals
13.  Inorganic Chemicals
14.  Iron and Steel
15.  Leather Tanning & Finishing
16.  Mechanical Products
17.  Nonferrous Metals
18.  Ore Mining
19.  Organic Chemicals
20.  Paint & Ink
21.  Pesticides
22.  Petroleum Refining
23.  Pharmaceuticals
24.  Photographic Supplies
25.  Plastic and Synthetic Materials
26.  Plastics Processing
27.  Porcelain Enamel
28.  Printing & Publishing
29.  Pulp and Paper
30.  Rubber
31.  Soaps and Detergents
32.  Steam Electric
33.  Textile Mills
34.  Timber

B. Other Business Activitiy

- Dairy Products
- Slaughter/Meat Packing/Rendering
- Food/Edible Products Processor
- Beverage Bottler

2. If your facility discharges any waste other than domestic waste, non-contact cooling water, or cafeteria wastes to the sewer, a recent wastewater analysis must be submitted with this application.

The analysis must include the following information:

- a. process where pollutant is generated.
- b. average concentration (in mg/l) or mass.
- c. maximum concentration (in mg/l) or mass.
- d. flow from the process generating the pollutant.
- e. type of sample.
- f. number of samples composited.
- g. location of sample.
- h. sampling technique.

At a minimum, the analysis must provide information on the concentrations of the following pollutants.

BOD	Arsenic
TSS	Silver
pH	Cyanide
Oil and Grease	
Cadmium	
Chromium	
Copper	
Lead	
Mercury	
Nickel	
Zinc	

All pollutants regulated under categorical standards.

All pollutants regulated under the Industrial Wastewater Discharge Permit.

The analysis must be performed on a 24-hour composite sample with information to include the date the sample was taken, date of analysis, name of laboratory performing the analysis, and location(s) from which the sample(s) were taken (attach sketches, plans, etc., as necessary). If any toxic or hazardous substances listed in B.5. are present at your facility, the wastewater must also be analyzed for that substance.

3. List average concentrations in milligrams per liter (mg/l) of wastewater discharge.  
If unknown, so state.

	<u>Concentration mg/l</u>
Parameter	_____
BOD	_____
COD	_____
Total Suspended Solids	_____
Total Kjeldahl nitrogen	_____
Oil and Grease (Hexane Solubles)	_____
Ammonia	_____
Total Phosphorus	_____
Algicides (attach list)	_____
Calcium	_____
Chloride	_____
Dyes (organic - attach list)	_____
Dyes (inorganic - attach list)	_____
Flammable liquids	_____
High temperature (80°F or greater)	_____
Organic nitrogen	_____
pH (in S.U.)	_____
Potassium	_____
Sodium	_____
Turbidity (NTU's)	_____
Others (attach list)	_____

4. List the temperature and pH range for your discharge.

<u>Temperature Range</u>		<u>pH Range</u>	
Low	_____	Low	_____
Average	_____	Average	_____
High	_____	High	_____

5. Does your company keep a continuous record of pH?

Yes \_\_\_\_\_ No \_\_\_\_\_

**F. SEWER INFORMATION**

1. Attach a scale drawing of your plant site showing the connection to the Service Authority line, all sampling points, and other pertinent information.

<u>Connection/Reference</u>	<u>Sewer Main Size</u>	<u>Description of Connection</u>
1	_____	_____
2	_____	_____

2. Size of line from building to public sewer \_\_\_\_\_.

3. Ultimate destination of the wastewater is the Wastewater Treatment Plant. \_\_\_\_\_



**G. PRETREATMENT**

1. Is any form of pretreatment (see list below) practiced at this facility?  
Yes \_\_\_\_\_ No \_\_\_\_\_

For all waste streams which are treated before discharge, check the appropriate boxes for types of pretreatment used at this facility:

- Sump
  - Septic Tank
  - Grease Trap
  - Gasoline Trap
  - Grease or oil separation,  
type: \_\_\_\_\_
  - Screen
  - Grit removal
  - Sedimentation
  - Flow Equalization
  - Filtration
  - Rainwater diversion or storage
  - Neutralization, pH correction
  - Chemical Precipitation
  - Reverse Osmosis
  - Ion Exchange
  - Ozonation
  - Chlorination
  - Solvent Separation
  - Spill Protection
  - Air Flotation
  - Centrifuge
  - Cyclone
  - Export or Hauling
  - Other chemical treatment, type \_\_\_\_\_
  - Other physical treatment, type \_\_\_\_\_
  - Biological treatment, type \_\_\_\_\_
  - Other, Specify \_\_\_\_\_
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2. Is any form of pretreatment planned for this facility within the next three (3) years?  
Yes \_\_\_\_\_ No \_\_\_\_\_

3. Please furnish a process flow diagram for each existing or planned pretreatment system. Include process equipment products, by-product disposal method, concentrations, waste and by-product volumes, design and operating conditions.

**H. NON DISCHARGED WASTE**

1. Are any waste, liquid or solid, not disposed of in wastewater discharge pipe?

Yes \_\_\_\_\_ No \_\_\_\_\_

2. If yes, please describe waste and volume handled.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3. Do you use on-site or off-site disposal?

Off-site \_\_\_\_\_ On-site \_\_\_\_\_

4. Do you use a contract hauler for off-site?

Yes \_\_\_\_\_ No \_\_\_\_\_

5. Name of off-site hauler, if applicable:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

6. Location of disposal site, if known:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_