



INDUSTRIAL USER DISCHARGE PERMIT APPLICATION

SECTION A - GENERAL INFORMATION

1. Facility Name: _____

2. Facility Address:
Street Address: _____
City _____ State _____ Zip _____

3. Business Mailing Address:
Street or P.O. Box: _____
City _____ State _____ Zip _____

4. Designate signatory authority of the facility:
(Attach similar information for each authorized representative)

Name: _____
Title: _____
Address: _____
City _____ State _____ Zip _____
Phone Number: _____ Fax Number : _____
E mail Address: _____

5. Designated facility contact:

Name: _____
Title: _____
Phone Number: _____
E mail Address : _____

SECTION B - BUSINESS ACTIVITY

1. If your facility employs or will be employing processes in any of the industrial categories or business activities listed below (despite whether they generate wastewater, waste sludge, or hazardous wastes), place a check beside the category of business activity (check all that apply).

INDUSTRIAL CATEGORIES*

- ALUMINUM FORMING
- ASBESTOS MANUFACTURING
- BATTERY MANUFACTURING
- CAN MAKING
- CARBON BLACK
- COAL MINING
- COIL COATING
- COPPER FORMING
- ELECTRIC AND ELECTRONIC COMPONENTS MANUFACTURING
- ELECTROPLATING
- FEEDLOTS
- FERTILIZER MANUFACTURING
- FOUNDRIES (METAL MOLDING AND CASTING)
- GLASS MANUFACTURING
- GRAIN MILLS
- INORGANIC CHEMICALS
- IRON AND STEEL
- LEATHER TANNING AND FINISHING
- METAL FINISHING
- NONFERROUS METALS FORMING
- NONFERROUS METALS MANUFACTURING
- ORGANIC CHEMICALS MANUFACTURING
- PAINT AND INK FORMULATING
- PAVING AND ROOFING MANUFACTURING
- PESTICIDES MANUFACTURING
- PETROLEUM REFINING
- PHARMACEUTICAL
- PLASTICS AND SYNTHETIC MATERIALS MANUFACTURING
- PLASTICS PROCESSING MANUFACTURING
- PORCELAIN ENAMEL
- PULP, PAPER, AND FIBERBOARD MANUFACTURING
- RUBBER
- SOAP AND DETERGENT MANUFACTURING
- STEAM ELECTRIC
- SUGAR PROCESSING
- TEXTILE MILLS
- TIMBER PRODUCTS

SECTION C - WATER SUPPLY & SEWER INFORMATION

1. List average water usage on premises:
(New facilities may estimate)

<u>Type</u>	Average Water Usage (GPD)	Indicate Estimated (E) or Measured (M)
a. Contact cooling water		
b. Non-contact cooling water		
c. Boiler feed		
d. Process		
e. Sanitary		
f. Air pollution control		
g. Contained in product		
h. Plant and equipment wash down		
I. Irrigation and lawn watering		
j. Other		
k. Total or A-J		

2. List size, descriptive location, and flow of each facility sewer that connects to the city's sewer system. (If more than three, attach additional information on another sheet.)

<u>Sewer Size</u>	<u>Descriptive Location of Sewer Connection of Discharge Point</u>	Average Flow (<u>GPD</u>)

SECTION D - WASTEWATER DISCHARGE INFORMATION

1. Does (or will) this facility discharge any wastewater other than from restrooms to the city sewer?

Yes If the answer to this question is 'yes', complete the remainder of the application.

No If the answer to this question is 'no', skip to section G.

2. Provide the following information on wastewater flow rates.
(New facilities may estimate)

a. Hours/day discharged (e.g., eight hours/day)

M ____	T ____	W ____	Th ____	F ____	Sat ____	Sun ____
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b. Hours of discharge (e.g., 9:00 a.m. to 5:00 p.m.)

M ____	T ____	W ____	Th ____	F ____	Sat ____	Sun ____
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c. Peak hourly flow rate (GPD) _____

d. Maximum daily flow rate (GPD) _____

e. Annual daily average (GPD) _____

3. If batch discharge occurs or will occur, indicate:
(New facilities may estimate)

a. Number of batch discharges per day _____

b. Average discharge per batch (GPD) _____

c. Time of batch discharges _____ at _____
(Days of week) (Hours of day)

d. Flow rate (gallons/minute) _____

e. Percent of total discharge _____

4. Schematic flow diagram - for each major activity in which wastewater is or will be generated, draw a diagram of the flow of materials, products, water, and wastewater from the start of the activity to its completion, showing all unit processes. Indicate which processes use water and which generate waste streams. Include the average daily volume and maximum daily volume of each waste stream (new facilities may estimate).

Facilities that checked activities in question one of Section B are considered categorical industrial users and should skip to question six.

- For non-categorical users only: list wastewater discharge, maximum discharge, and type of discharge (batch, continuous, or both), for each plant process. Include the reference number from the process schematic that corresponds to each process. (New facilities should provide estimates for each discharge.)

No.	Process Description	Average Flow (GPD)	Maximum Flow (GPD)	Type of Discharge (Batch, Continuous, None)

ANSWER QUESTIONS 6 & 7 ONLY IF YOU ARE SUBJECT TO CATEGORICAL PRETREATMENT STANDARDS.

- For categorical users: provide the wastewater discharge flows for each of you processes or proposed processes. Include the reference number from the process schematic that corresponds to each process. (New facilities should provide estimates for each discharge.)

No.	Regulated Process	Average Flow (GPD)	Maximum Flow (GPD)	Type of Discharge (Batch, Continuous, None)

(Question No. 6 continued)

No.	Unregulated Process	Average Flow (GPD)	Maximum Flow (GPD)	Type of Discharge (Batch, Continuous, None)

7. For categorical users subject to Total Toxic Organic (TTO) requirements:
Provide the following (TTO) information.
- a. Does (or will) this facility use any toxic organics listed under the TTO standard of the applicable categorical pretreatment standards published by the EPA?

 Yes
 No

 - b. Has a Baseline Monitoring Report (BMR) been submitted which contains TTO information?

 Yes
 No

 - c. Has a Toxic Organics Management Plan (TOMP) been developed?

 Yes,(please attach a copy)
 No

8. Do you have, or plan to have, automatic sampling equipment or continuous wastewater flow metering equipment at this facility?

Current: Flow Metering Yes No N/A
 Sampling Equipment Yes No N/A

Planned: Flow Metering Yes No N/A
 Sampling Equipment Yes No N/A

If so, please describe the equipment below:

9. Are any process changes or expansions planned during the next three years that could alter wastewater volumes or characteristics? Consider production processes as well as air pollution treatment processes that may affect the discharge.

Yes
 No, (Skip Question 10)

10. Briefly describe these changes and their effects on the wastewater volume and characteristics: (attach additional sheets if needed)

SECTION E - TREATMENT

1. Is any form of wastewater treatment practiced at this facility?

- Yes
- No

2. Is any form of wastewater treatment (or changes to a existing wastewater treatment) planned for this facility within the next three years?

- Yes, describe _____
- No

3. Attach a process flow diagram for each existing treatment system. Include process equipment, by-products, by-product disposal method, waste and by-product volumes, and design and operating conditions.

4. Describe any changes in treatment or disposal methods planned or under construction for the wastewater discharge to the sanitary sewer. Please include estimated completion date.

5. Do you have a treatment operator?

- Yes No

(If yes) Name: _____
Title: _____
Phone: _____
Full Time: _____ (Specify Hours)
Part Time: _____ (Specify Hours)

6. Do you have a manual on the correct operation of your treatment equipment?

- Yes No

7. Do you have a written maintenance schedule for you treatment equipment?

- Yes No

SECTION F - FACILITY OPERATIONAL CHARACTERISTICS

1. Shift Information

Work Days:		<input type="checkbox"/> MON.	<input type="checkbox"/> TUES.	<input type="checkbox"/> WED.	<input type="checkbox"/> THUR.	<input type="checkbox"/> FRI.	<input type="checkbox"/> SAT.	<input type="checkbox"/> SUN.
Shifts per Work Day:		_____	_____	_____	_____	_____	_____	_____
Employees Per Shift:	1st:	_____	_____	_____	_____	_____	_____	_____
	2nd:	_____	_____	_____	_____	_____	_____	_____
	3rd:	_____	_____	_____	_____	_____	_____	_____
Shift Start And End Times:	1st:	_____	_____	_____	_____	_____	_____	_____
	2nd:	_____	_____	_____	_____	_____	_____	_____
	3rd:	_____	_____	_____	_____	_____	_____	_____

2. Indicate whether the business activity is:

- Continuous through the year, or
- Seasonal - circle the months of the year during which the business activity occurs:

J	F	M	A	M	J	J	A	S	O	N	D
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Comments: _____

3. Indicate whether the facility discharge is:

- Continuous through the year, or
- Seasonal - circle the months of the year during which the business activity occurs:

J	F	M	A	M	J	J	A	S	O	N	D
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Comments: _____

4. Does operation shut down for vacation, maintenance, or other reasons?

Yes, indicate reasons and period when shutdown occurs:

No

5. List types and amounts (mass or volume per day) of raw materials used or planned for use (attach list if needed):

6. List types and quantity of chemicals used or planned for use (attach list if needed). Include copies of manufacturer's safety data sheets (if available) for all chemicals identified:

Chemical	Quantity
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

7. Building layout - draw to scale the location of each building on the premises. Show map orientation and location of all water meters, storm drains, numbered unit processes (from schematic diagram), public sewers, and each facility sewer line connected to the public sewers. Show existing and proposed sampling locations.

A blueprint or drawing of the facilities showing the above items may be attached in lieu of submitting a drawing on this sheet.

Authorized Representation Statement:

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 gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage 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 fine and imprisonment for knowing violations.

Name

Title

Signature

Date

Phone

INSTRUCTIONS TO FILL OUT WASTEWATER DISCHARGE PERMIT APPLICATION

All questions must be answered. Do not leave blanks. If a question is not applicable, indicate so on the form. Instructions to some questions on the permit application are given below.

SECTION A - INSTRUCTIONS (GENERAL INFORMATION)

1. Enter the facility's official or legal name. Do not use a colloquial name.
 - a. Operator name: Give the name, as it is legally referred to, of the person, firm, public organization, or any other entity which operates the facility described in this application. This may or may not be the same name as the facility.
2. Provide the physical location of the facility that is applying for a discharge permit.
3. Provide the mailing address where correspondence from the control authority may be sent.
4. Provide all the names of the authorized signatories for this facility for the purposes of signing all reports. The designated signatory is defined as:
 - a. A responsible corporate officer, if the industrial user submitting the reports is a corporation. For the purpose of the paragraph, a responsible corporate officer means:
 1. A president, secretary, treasurer, or vice-president of the corporation in charge of a principal business function, or any other person who performs similar policy- or decision-making functions for the corporation, or
 2. The manager of one or more manufacturing, production, or operation facilities employing more than 250 persons or having gross annual sales or expenditures exceeding \$25 million if authority to sign documents has been assigned or delegated to the manager in accordance with corporate procedures.
 3. A general partner or proprietor if the industrial user submitting the reports is a partnership or sole proprietorship respectively.
 4. The principal executive officer or director having responsibility for the overall operation of the discharging facility if the industrial user submitting the report is a federal, state, or local government entity, or their agents.

- b. A duly authorized representative of the individual designated in paragraph (a),
(b), or (c) of this section if:
 - 1. The authorization is made in writing by the individual described in paragraph (a), (b), or (c);
 - 2. The authorization specifies either an individual or a position having responsibility for the overall operation of the facility from which the industrial discharge originates, such as the position of plant manager, operator of a well, or well field superintendent, or a position of equivalent responsibility, or having overall responsibility for environmental matters for the company, or;
 - 3. The written authorization is submitted to the city.
 - c. If an authorization under paragraph (d) of this section is no longer accurate because a different individual or position has responsibility for the overall operation of the facility, or overall responsibility for environmental matters for the company, a new authorization satisfying the requirements of paragraph (d) of this section must be submitted to the city prior to or together with any reports to be signed by an authorized representative.
5. Provide the name of a person who is thoroughly familiar with the facts reported on this form and who can be contacted by the control authority (e.g., the plant manager)

SECTION B - INSTRUCTIONS (BUSINESS OPERATIONS)

1. Check off all operations that occur or will occur at your facility. If you have any question regarding how to categorize your business activity, contact the control authority for technical guidance.
2. Give a brief description of all operations at this facility.
3. For all processes found on the premises, indicate the Standard Industrial Classification (SIC) Code Number, as found in the most recent edition of standard industrial classification manual prepared by the executive office of the president, office of management and budget. This document is available from the government printing office in Washington D.C., or in San Francisco, California. Do not use previous editions of the manual. Copies of the manual are also available at most public libraries.
4. List the types of products, giving the common or brand name and the proper or scientific name. Enter from your records the average and maximum amounts produced daily for each operation for the previous calendar year, and the estimated total daily production for this calendar year. Be sure to specify the daily units of production. Attach additional pages if necessary.

SECTION C - INSTRUCTIONS (WATER SUPPLY & SEWER INFORMATION)

1. Provide daily average water usage within the facility. Contact cooling water is cooling water that during the process comes into contact with process material, thereby becoming contaminated. Non-contact cooling water does not come into contact with process materials. Sanitary water includes only water used in restrooms. Plant and equipment wash down includes floor wash down. If sanitary flow is not metered, provide an estimate based on 15 gallons per day (GPD) per each employee.

SECTION D - INSTRUCTIONS (WASTEWATER DISCHARGE INFORMATION)

1. If you answer 'no' to this question, skip to section G, otherwise complete the remainder of the application.

4. A schematic flow diagram is required to be completed and certified for accuracy by a state registered professional engineer. Assign a sequential number to each process starting with no. 1. To determine your average daily volume and maximum daily volume of wastewater flow, you may have to read water meters, sewer meters, or make estimates of volumes that are not directly measurable.
5. Non-categorical users should report average daily and maximum wastewater flows from each process, operation, or activity present at the facility. Categorical users should skip to question 6.
6. Categorical users should report average daily and maximum daily wastewater flows from every regulated, unregulated, and dilution process. A regulated waste stream is defined as wastewater from an industrial process that is regulated for a particular pollutant by a categorical pretreatment standard. Unregulated waste streams are waste streams from an industrial process that are not regulated by a categorical pretreatment standard and are not defined as a dilution waste stream. Dilution waste streams include sanitary wastewater, boiler blow down, noncontact cooling water or blow down, storm water streams, demineralizer backwash streams and process waste streams from certain industrial subcategories exempted by EPA from categorical pretreatment standards. (For further details see 40 CFR 403.6 (e))
7. Total Toxic Organics (TTO) means the sum of the masses or concentrations of specific toxic organic compounds found in the industrial user's process discharge. The individual organic compounds that make up the TTO value and the minimum reportable quantities differ according to the particular industrial category (see applicable categorical pretreatment standards, 40 CFR parts 405-471)

SECTION F - INSTRUCTIONS (FACILITY OPERATIONAL CHARACTERISTICS)

2. Indicate whether the business activity is continuous throughout the year or if it is seasonal. If the activity is seasonal, circle the months of the year during which the discharge occurs. Make any comments you feel are required to describe the variation in operation of your business activity.
4. Indicate any shut downs in operation which may occur during the year and indicate the reasons for such.
5. Provide a listing of all primary raw materials used (or planned) in the facility's operations. Indicate amount of raw material used in daily units.

6. Provide a listing of all chemicals used (or planned) in the facility's operations. Indicate the amount used or planned in daily units. Avoid the use of trade names of chemicals. If trade names are used, also provide chemical compounds. Provide copies of all available manufacturers' safety data sheets for all chemicals identified.
7. A building layout or plant site plan of the premises is required to be completed and certified for accuracy by a state registered professional engineer. Approved building plans may be substituted. An arrow showing north as well as the map scale must be shown. The location of each existing and proposed sampling location and facility sewer line must be clearly identified as well as all sanitary and wastewater drainage plumbing. Number each unit process discharging wastewater to the public sewer.

SECTION G - INSTRUCTIONS (AUTHORIZED SIGNATURES)

See instruction for question 4 in Section A, for a definition of an authorized representative.